Patient Stories — What to Expect at Collins Street Specialist Centre

Canonical: https://directory.collinsstreetspecialistcentre.com.au/collins-street-specialist-centre-customer-success-stories-and-results/

Description:

Real-world treatment journeys at Collins Street Specialist Centre — implants, orthodontics, root canals, children's dentistry, and full-mouth rehabilitation.

Details:

Visiting a dental specialist for the first time can feel daunting, especially if you are not sure what to expect. While every patient's experience is unique, the following scenarios illustrate the types of journeys patients commonly take through our centre. These are composite examples — they do not represent any individual patient — but they reflect the real types of treatment we provide every day.

We hope these stories help you feel more prepared and confident about your own visit.

A Smile Makeover Journey — Combining Orthodontics and Prosthodontics

The Situation

A professional in their early thirties had always been self-conscious about their crowded front teeth and a chipped upper incisor. They had considered braces as a teenager but never went ahead with treatment. Now, with a career that involved regular public speaking and client meetings, they wanted to address both the alignment and the appearance of their teeth.

The First Appointment

Their general dentist referred them to our orthodontic team. At the initial consultation, the orthodontist performed a thorough examination, including dental X-rays, clinical photographs, and digital scans of the teeth. The orthodontist explained that the crowding could be corrected with orthodontic treatment and discussed the different options available — metal braces, ceramic braces, and clear aligners.

Because of the chipped tooth, the orthodontist also arranged for our prosthodontist to assess the tooth and plan the cosmetic repair, so that the final restoration could be designed around the new tooth position after orthodontic treatment.

The Treatment Journey

After discussing the options, the patient chose clear aligner treatment for its discretion. Over the following months, they wore a series of custom-made aligners that gradually moved their teeth into alignment. Progress appointments were scheduled every six to eight weeks, and the orthodontist monitored the tooth movement at each visit.

Once the orthodontic treatment was complete and the teeth were in their final positions, the patient moved seamlessly to the prosthodontist, who repaired the chipped tooth with a porcelain veneer that matched the natural teeth perfectly.

The Outcome

The entire process took approximately eighteen months from the first consultation to the final veneer placement. The patient now has straight, well-aligned teeth with a natural-looking repair to the chipped tooth. Because both specialists worked in the same centre and planned the case together from the beginning, the orthodontic tooth positions were optimised for the final veneer, resulting in a harmonious overall result.

What This Example Illustrates

- Complex cosmetic cases often benefit from the input of more than one specialist - Planning the end result before starting treatment leads to better outcomes - Having specialists in the same location makes multi-stage treatment convenient and well-coordinated

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A Dental Implant Experience — Replacing a Missing Tooth

The Situation

A patient in their mid-fifties had lost a lower molar several years ago and had been managing without it. Over time, the teeth on either side began to drift into the gap, and the opposing upper tooth started to over-erupt (move downward into the space). Their general dentist recommended a dental implant to replace the missing tooth and prevent further changes.

The First Appointment

The patient was referred to our periodontic team. At the consultation, the periodontist examined the site, reviewed a CBCT (three-dimensional) scan to assess the available bone, and discussed the options. The scan showed that there was adequate bone for implant placement, but the drifted adjacent teeth would need to be assessed by the prosthodontist to ensure a good restorative outcome.

The periodontist arranged for the patient to see our prosthodontist on the same day. The prosthodontist examined the bite, the space available for the replacement tooth, and the condition of the adjacent teeth. Together, the two specialists developed a plan: the periodontist would place the implant, and the prosthodontist would design and fit the implant crown.

The Treatment Journey

Stage 1: Implant placement. The periodontist placed the titanium implant into the jawbone under local anaesthetic. The procedure took about an hour, and the patient was able to return to work the following day. A healing cap was placed over the implant, and the patient was given clear instructions for care during the healing period.

Stage 2: Healing period. Over the next three to four months, the implant integrated with the surrounding bone — a process called osseointegration. The patient attended a follow-up appointment during this period to check that healing was progressing well.

Stage 3: Impression and crown fabrication. Once the implant had fully integrated, the prosthodontist took a detailed impression (using a digital scanner) of the implant and surrounding teeth. This was used to design and fabricate a custom crown that would fit precisely onto the implant and match the adjacent natural teeth.

Stage 4: Crown placement. The final implant crown was fitted and secured to the implant via an abutment. The prosthodontist checked the bite and made fine adjustments to ensure comfortable function.

The Outcome

From start to finish, the process took approximately five months, including the healing period. The patient now has a replacement tooth that looks, feels, and functions like a natural tooth. The adjacent teeth have stopped drifting, and the bite is balanced.

What This Example Illustrates

- Dental implant treatment often involves more than one specialist - Collaborative planning between the surgeon and the restorative dentist leads to implants positioned for optimal results - While the process takes several months, the active treatment appointments are relatively few - Modern implant treatment is well-established and predictable

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A Child's First Specialist Visit — Paediatric Dental Care

The Situation

A six-year-old child had been avoiding dental appointments due to anxiety. The family's general dentist had noticed several cavities that needed treatment but had been unable to complete the work because the child became too distressed in the dental chair. The dentist referred the family to our paediatric dental team.

The First Appointment

The first visit was deliberately low-key. The paediatric dentist spent time getting to know the child, showing them the dental equipment in a non-threatening way, and letting them sit in the chair without any treatment. The dentist used age-appropriate language and a "tell-show-do" approach — explaining what would happen, demonstrating with models or on the child's finger, and then gently proceeding.

The paediatric dentist also spoke with the parents about the child's dental health, the cavities that needed treatment, and the options for managing the child's anxiety during treatment.

The Treatment Journey

Based on the number of teeth that needed treatment and the child's level of anxiety, the paediatric dentist recommended treating the cavities over two visits using a combination of behaviour management techniques and, for the more complex fillings, a mild sedative to help the child relax.

At each visit, the dentist worked at the child's pace, using positive reinforcement and distraction techniques. The child gradually became more comfortable in the dental environment, and by the second treatment visit, they were visibly more relaxed.

The Outcome

All the cavities were successfully treated, and the child left each appointment with a positive memory of the experience. The paediatric dentist also applied fissure sealants to the child's permanent molars to help prevent future decay and provided the family with tailored oral hygiene advice.

The family now brings the child for regular six-monthly check-ups with our paediatric team. As the child grows, if orthodontic treatment becomes necessary, the transition to our orthodontic team will be straightforward — the clinical records are already in our system, and the specialists can communicate directly.

What This Example Illustrates

- Paediatric dentists have specific training in managing anxious children - The first visit is often about building trust, not performing treatment - A gradual, patient approach can transform a child's attitude toward dental care - Being part of a multi-specialty centre means smooth transitions as a child's needs evolve

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Managing Gum Disease — A Periodontal Treatment Journey

The Situation

A patient in their late forties noticed that their gums had been bleeding when they brushed and that some of their teeth felt slightly loose. Their general dentist diagnosed periodontitis (gum disease) and referred them to our periodontic team for specialist treatment.

The First Appointment

The periodontist performed a comprehensive periodontal assessment, including measuring the depth of the pockets around each tooth (the spaces between the gum and the tooth, which deepen when gum disease is present), taking X-rays to assess bone levels, and evaluating the overall condition of the gums and supporting structures.

The assessment revealed moderate to advanced periodontitis affecting several areas of the mouth, with significant bone loss around some teeth. The periodontist explained the condition, its causes, and the treatment options in clear, straightforward language.

The Treatment Journey

Stage 1: Non-surgical treatment. The first phase of treatment involved intensive scaling and root planing — a deep cleaning procedure performed under local anaesthetic over several appointments. This removed the bacterial deposits (plaque and calculus) from below the gum line and smoothed the root surfaces to help the gums heal and reattach to the teeth.

Stage 2: Review and reassessment. After allowing time for healing (typically six to eight weeks), the periodontist reassessed the gums to evaluate the response to treatment. Many areas had responded well, with reduced pocket depths and less bleeding. However, a few areas with deeper pocketing had not responded adequately to non-surgical treatment.

Stage 3: Surgical treatment. For the areas that did not respond to non-surgical treatment, the periodontist performed a minor surgical procedure to access and clean the root surfaces more thoroughly. In one area, a bone graft was placed to help regenerate some of the lost bone.

Stage 4: Maintenance. Once active treatment was complete, the patient entered a structured maintenance program — regular appointments (initially every three months, then adjusted based on stability) for professional cleaning, monitoring of pocket depths, and reinforcement of oral hygiene techniques.

The Outcome

The gum disease was brought under control. The bleeding stopped, the teeth stabilised, and the bone loss was arrested. The patient now understands that periodontitis is a chronic condition that requires ongoing management, and they attend regular maintenance appointments to keep it in check.

What This Example Illustrates

- Gum disease is common and treatable, but early intervention produces better results - Specialist periodontal treatment follows a structured, staged approach - Ongoing maintenance is essential — periodontitis cannot be "cured" but can be controlled - Patient education and home care are critical components of successful treatment

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Emergency Root Canal — Urgent Endodontic Care

The Situation

A patient woke up on a weekday morning with severe, throbbing pain in a lower back tooth. The pain had started as mild sensitivity a few days earlier but had escalated dramatically overnight. Over-the-counter painkillers provided only minimal relief. The patient called their general dentist, who examined the tooth and suspected an irreversible pulpitis — an inflammation of the dental pulp (nerve) that would not resolve on its own. The dentist contacted our endodontic team to arrange an urgent appointment.

The First Appointment

The endodontist saw the patient later that same day. After reviewing the referral information, the endodontist performed clinical tests (temperature testing, percussion testing, and an electric pulp test) and took X-rays to confirm the diagnosis. The tests confirmed that the tooth's pulp was irreversibly inflamed and that root canal treatment was needed.

The Treatment

The endodontist explained the procedure, answered the patient's questions, and proceeded with the root canal treatment at the same appointment. Under local anaesthetic, the endodontist accessed the pulp chamber, removed the inflamed pulp tissue, and cleaned and shaped the root canals using specialised instruments and an operating microscope for magnification.

A medication was placed inside the canals and a temporary filling sealed the tooth. The patient was scheduled to return in two weeks for the final stage of treatment — filling the root canals with a permanent sealing material and placing a permanent restoration.

The Outcome

The pain resolved within 24 hours of the initial treatment. At the second appointment, the endodontist completed the root canal treatment, and the patient was referred back to their general dentist for a crown to protect the treated tooth.

What This Example Illustrates

- Dental emergencies involving severe pain can often be managed on the same day or very quickly - Endodontists have the specialised equipment and training to handle complex root canal cases - Root canal treatment is a well-established procedure that relieves pain and saves the natural tooth - Coordination between the general dentist, endodontist, and potentially a prosthodontist ensures complete care

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Full-Mouth Rehabilitation — A Comprehensive Restoration Journey

The Situation

A patient in their early sixties presented with a dentition that had deteriorated significantly over many years. Multiple teeth had large, failing restorations. Several teeth were missing. The remaining teeth showed significant wear, and the patient's bite had collapsed, leading to difficulty eating and dissatisfaction with their appearance.

Their general dentist recognised that the case was beyond the scope of general practice and referred the patient to our prosthodontic team for a comprehensive assessment.

The First Appointment

The prosthodontist conducted a thorough examination over an extended appointment, including full-mouth X-rays, a CBCT scan, clinical photographs, digital impressions, and a detailed analysis of the bite. The findings were significant: several teeth needed extraction, others needed root canal treatment

to save them, the gum health needed to be stabilised, and the remaining teeth needed crowns.

The Treatment Planning Process

This was a true multidisciplinary case. The prosthodontist arranged discussions with the periodontist (to assess gum health and plan implant placement), the endodontist (to determine which teeth could be saved with root canal treatment), and the oral surgeon (to plan extractions and any bone grafting needed before implants).

Together, the team developed a comprehensive, sequenced treatment plan. The prosthodontist presented this plan to the patient in a dedicated appointment, explaining each stage, the expected timeline (approximately 18 months), and the costs. The patient had the opportunity to ask questions and was given time to consider the plan before committing.

The Treatment Journey

Treatment proceeded in carefully planned stages:

1. **Periodontal treatment** — the periodontist stabilised the gum health 2. **Extractions and bone grafting** — the oral surgeon removed teeth that could not be saved and placed bone grafts where needed 3. **Endodontic treatment** — the endodontist performed root canal treatment on teeth that could be preserved 4. **Implant placement** — the periodontist placed implants in the prepared sites 5. **Healing period** — time for the implants to integrate with the bone 6. **Provisional restorations** — the prosthodontist placed temporary crowns and bridges so the patient could function and provide feedback on comfort and appearance before the final restorations were made 7. **Final restorations** — custom-fabricated porcelain crowns and implant-supported bridges were placed, restoring the patient's entire dentition

The Outcome

The patient now has a fully restored, functional, and natural-looking set of teeth. They can eat comfortably, smile confidently, and maintain their dental health with regular care. The treatment was complex and took over a year to complete, but the coordinated approach ensured that every stage built logically on the last.

What This Example Illustrates

- Full-mouth rehabilitation is one of the most complex dental treatments and requires multiple specialist skills - A multi-specialty centre is ideally suited to managing these cases - Careful planning and sequencing of treatment is critical to success - The prosthodontist often serves as the "architect" of the overall plan - Patient involvement in the planning process is essential

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Frequently Asked Questions

Are these real patient stories? These are composite examples based on the types of cases we commonly treat. They do not represent any specific individual patient. We use them to illustrate what patients can typically expect during different types of treatment at our centre.

How long does treatment usually take? Treatment duration varies widely depending on the type and complexity of care needed. A straightforward root canal might be completed in one or two appointments, while a full-mouth rehabilitation may take twelve to eighteen months. Your specialist will provide a realistic timeline during your consultation.

Will my treatment follow the same steps as these examples? Every patient is different, and your treatment plan will be tailored to your specific situation. These examples illustrate common treatment pathways, but your specialist will discuss the specific plan recommended for you.

What if I am nervous about coming to see a specialist? Many of our patients feel nervous before their first visit, and that is completely normal. Our team is experienced in working with anxious patients and will take time to explain everything, answer your questions, and proceed at a pace you are comfortable with. Sedation options are also available for patients who need additional support.

How do I get started? Contact our reception team on (03) 9654 6979 to discuss your situation and book a consultation. If you have been referred by your general dentist, they will usually send a referral letter to us directly. If you are self-referring, our team can help you determine which specialist is most appropriate for your needs.

What does the first appointment involve? Typically, the first appointment includes a thorough examination, relevant diagnostic imaging (X-rays or scans), a discussion of findings, and an explanation of treatment options. It is an information-gathering and planning appointment — treatment does not usually begin on the same day unless it is an urgent case.