

The Importance of good quality control

By [beeverdentaltechnology](#)

Here at Beaver Dental we believe that consistently great results can only be achieved by adhering to strict protocols, keeping up to date with the latest technological advances, communicating and sharing ideas with fellow professionals and listening to our patient's needs as well as our clinicians.

In order to ensure we are performing these duties to the best of our abilities we have a number of quality control stages as part of our everyday working procedures. Every single restoration goes through a final stage inspection by technicians with over 20 years' experience in dental technology.

We hope that these measures stop any restorations we are not happy with leaving the lab.

Sometimes we see work from other laboratories that have obviously not gone through the same quality control protocols we use in the lab.
The latest example of this happened today.

We received a call from a client who has not previously used the lab for Dentures; the call basically went like this. "Hi Phill my denture lab is not performing well at the moment, the latest case I have sent them has just been delivered to the surgery and it's very poor". "I personally called the lab about this case last week and asked them to do a nice job as the patient is very discerning and the last few cases have been not to your usual standard". Our client was told they would keep an eye out for the case arriving and do a "top job". When the denture set up arrived at the lab we were to be frank pretty shocked. We know that sometimes cases can be very hard to get right and sometimes function has an effect on aesthetics however in this case there was no excuse, it was simply a poorly made prosthesis.

In this series of images you can see the denture set up made by a local competitor lab and the denture set up made by us.



Poor Diagnostic set up from a competitor lab



Lateral view illustrating the poor occlusal scheme



New Diagnostic set up by BDT Technician Lee Mullins



Lateral view showing a good occlusal scheme.

As you can see from the images everything about this case was wrong and should have never left the lab.

The teeth used are very basic 2 layered entry level teeth.

The teeth used are also too small.

The teeth are covered in wax.

The wax carving around the teeth is very basic.
The occlusal scheme is completely wrong.

Im sure you would agree this is not a quality PRIVATE standard set up.

The BDT Technician Lee Mullins was responsible for rescuing this case.

As always, all comments greatly appreciated.