

THE IMPLANT STANDARD
WE ARE THE STANDARD

Everything we do, written down before you decide.

An information pack on implant treatment: the ten-step method, what each stage costs, and the questions worth asking any clinic before you accept a quote.

PREPARED FOR PATIENTS CONSIDERING IMPLANT TREATMENT

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You are about to compare things that are not comparable.

If you are reading this, you have probably been quoted for implant treatment somewhere, or you are about to be. You may have two or three figures in front of you already, and they may be thousands of dollars apart.

The difficult part is that those figures almost never describe the same treatment. One may include a 3D scan; another may charge for it. One full-arch quote may include the temporary teeth you wear for months; another may not mention them until later. One may be quoting an acrylic bridge and another zirconia, without either using the word.

So this pack does not try to persuade you. It sets out our method in full, publishes what each tier of treatment starts at, and gives you six questions that will make any two quotes comparable — including ours against somebody else’s.

What is inside

01	What this pack is for	Page 2
02	Why implant quotes are hard to compare	Page 3
03	The Standard — steps one to five	Page 4
04	The Standard — steps six to ten	Page 5
05	The Register — what treatment costs	Page 6
06	What is included in every fee	Page 7
07	The Record — your first appointment	Page 8
08	Health funds, payment and super	Page 9
09	Six questions to ask any clinic	Page 10
10	What we will not promise you	Page 11

Six things that make one quote cheaper than another.

None of these are dishonest on their own. They become a problem when they are not written down, because you end up comparing a complete fee against a partial one.

— **Imaging**

A CBCT 3D scan shows how much bone is actually there. Some fees include it; some add it later; some plans are made without one at all.

— **The surgical guide**

A guide is printed from the approved digital plan so the implant is placed where it was planned. Placing without one is a judgment made in the moment.

— **The provisional**

On a full arch you wear temporary teeth for months before the final bridge. Whether that is inside the fee is the single largest variable in full-arch quoting.

— **The material of the final bridge**

An acrylic hybrid and a zirconia bridge are very different in cost, in weight, and in how often they need attention. Both are legitimate. They are not the same purchase.

— **Reviews and maintenance**

Implants need checking and cleaning. Whether that is in the fee, and for how long, changes what you will actually spend over ten years.

— **What happens if something goes wrong**

Ask what is covered, for how long, and on what conditions. A warranty nobody will write down is not a warranty.

Our answer to all six is on page 7.

Not because our fee is the lowest — it is not — but because you should be able to check.

Ten steps, in this order, every time.

This is the whole method. Steps one to five happen before any surgery is scheduled.

01 Triage

Your first call is taken by a treatment coordinator. They will tell you what The Record involves and what it produces. They will not quote you a treatment fee over the telephone, because nobody can responsibly quote one before the scan.

02 The Record

A 60-minute assessment: a CBCT volumetric scan, an intraoral scan, calibrated photography, and a full medical and medication review.

03 Site analysis

Bone volume and density are mapped against the load the site will actually carry. A molar and an incisor are not the same engineering problem.

04 Digital planning

Implant position, angle and depth are planned in software and approved by you before any surgery is scheduled.

05 The dossier

You receive a written plan: the staging, the timeline, the components to be used, the total investment, a health fund estimate against your own policy, and the alternatives we considered and declined, with the reasons.

From the approved plan to the five-year review.

06 **Guided placement**

Surgery is performed through a printed surgical guide produced from the plan you approved, so placement follows the plan rather than being judged freehand.

07 **Recorded stability**

Insertion torque and stability are measured at placement and recorded on your file. If the numbers are not right, we stage the case differently rather than proceeding.

08 **Integration review**

At eight to twelve weeks a radiograph is taken to confirm whether the implant has integrated. Nothing is loaded onto it before that confirmation.

09 **Verified fit**

Occlusion is checked and adjusted, and a photographic record is taken at the fit appointment, against the records taken at The Record.

10 **The Standard Commitment**

Reviews at 6, 12, 24, 36, 48 and 60 months are scheduled before you leave. The fixture warranty is conditional on attending them, because maintenance is a large part of how long an implant lasts.

Step ten is the one that does the most work. An implant is not something you buy once. Six appointments across five years are booked before you leave the chair, and the fixture warranty is conditional on attending them.

What treatment costs, before you ring us.

Implants are not a good-better-best ladder. You do not pick a tier by budget — you arrive at one determined by how much has been lost.

00	The Record EVERY PATIENT BEGINS HERE CBCT scan, intraoral scan, photographic records, medical review, site analysis, digital plan, a written health fund estimate, and a treatment dossier issued to you on the day.	\$295 CREDITED IN FULL
I	The Single Standard ONE MISSING OR FAILING TOOTH One fixture, custom abutment and an all-ceramic crown. Guided placement, integration review and entry to the Standard Commitment.	from \$5,500 PER TOOTH
II	The Span THREE OR FOUR ADJACENT TEETH An implant-supported bridge carried on two fixtures, planned and priced as one restoration. Two adjacent teeth are quoted as two Single Standards instead.	from \$12,000 PER SPAN
III	The Anchor EXISTING DENTURE WEARERS An implant-stabilised overdenture on two to four fixtures. Your denture stops moving; the treatment stays removable.	from \$13,500 PER ARCH
IV	The Full Arch Standard ONE ARCH, FAILING OR ABSENT DENTITION Four to six fixtures carrying a fixed prosthesis, with the provisional included. The definitive bridge is an acrylic hybrid at this fee; zirconia is quoted as an upgrade inside your dossier.	from \$25,000 PER ARCH
V	The Complete Standard BOTH ARCHES, PLANNED AS ONE CASE Full reconstruction under a single surgical and prosthetic plan. Both arches are placed in the same session, so the fee is not simply double the single-arch figure.	from \$46,000 BOTH ARCHES

Starting fees for the treatment described. Grafting, sinus elevation and extractions are staged where required and quoted inside your dossier, never added afterwards. These are not a quotation; your own fee is confirmed in writing at The Record.

What is inside every fee on the previous page.

— **The CBCT scan and the surgical guide**

Both are part of the method, so neither appears as a line item.

— **The provisional, on every full-arch case**

The temporary teeth you wear between surgery and the final bridge.

— **Five years of scheduled reviews**

Six appointments at 6, 12, 24, 36, 48 and 60 months, booked in advance.

— **The written dossier**

Yours to keep, and yours to take to another clinic if you want a second opinion.

— **A health fund estimate against your own policy**

Not a published range — an estimate based on your cover and the item numbers your case will actually use.

And what is not.

Bone grafting, sinus elevation, extractions, sedation or general anaesthetic, and eventual replacement of the visible prosthesis are quoted separately where your case needs them. They appear in your dossier at the outset, not afterwards.

One hour, and you leave knowing the whole plan.

\$295, credited in full against treatment commenced within 90 days of the assessment. The dossier is yours either way — including if you take it to another clinic for a second opinion.

01 **A CBCT 3D scan**

A volumetric image of your jaw, taken here.

02 **An intraoral scan**

A digital model of your mouth as it is now. No impression trays.

03 **Photographic records**

Calibrated, repeatable, and kept on your file as the baseline every later review is measured against.

04 **A medical review**

Medications, conditions and healing factors that change how a case should be staged.

05 **Site analysis and a digital plan**

Where each implant would go, and why there rather than somewhere else.

06 **A health fund estimate**

What your own policy will rebate on your own plan, in writing.

07 **A written dossier**

Staging, timelines, components, your total figure, and the alternatives we considered and declined.

Why is there a fee when other clinics consult for free? Because a free consultation cannot include a 3D scan, an hour of assessment and planning, and a written dossier — somebody pays for those either way, usually inside the treatment fee after you have said yes. We would rather charge for it, credit it back to you, and have the appointment be an assessment rather than a sales meeting.

Staged against the treatment, not against a calendar.

Payment

Implant treatment happens in stages months apart, and payment follows the same shape: a portion at planning, a portion at placement, and the balance at fit.

Payment plans through **Denticare** and **SmileRight** are available if you would rather spread it further. We will set out what each costs you in total before you choose one.

Health funds

Rebates vary by policy and by the item numbers your case actually uses, which is why we put an estimate against your own cover in your dossier rather than quoting a range.

On a single implant that rebate can be a meaningful share of the fee. You should know it before you decide, not after.

Early release of superannuation

Early release of super for dental treatment is decided by the Australian Taxation Office on compassionate grounds. We work with **SuperCare**, who manage the application process, and we provide the clinical documentation it requires.

Approval is the ATO's decision, not ours, and it is not something we can guarantee. We would also encourage you to get independent financial advice before withdrawing superannuation for any purpose, because the money you take out now is money that is not there later.

Six questions to ask any clinic.

Ask these of us too. If the answers are not in writing, they are not answers.

1 Is a CBCT 3D scan included, or charged separately?

Without one, nobody can tell you how much bone is there. If it is extra, add it to the quote before you compare.

2 Will I get the plan in writing before I commit?

A verbal figure is not a plan. Ask what document you leave with, and whether you keep it if you go elsewhere.

3 Is the surgical guide included?

A guide is printed from the approved digital plan. Placing without one is a judgment call made in the moment.

4 On a full arch — is the provisional included, and is the final bridge acrylic or zirconia?

This is the single largest variable in All-on-4 style quoting, and the most common reason two quotes look different.

5 What reviews are included, and for how long?

Maintenance is a large part of how long an implant lasts. Ask how many appointments are in the fee and what happens after them.

6 What is not in this price?

Grafting, sinus elevation, extractions, sedation and replacement prostheses are the usual omissions. Ask for them in writing.

What we will not promise you.

We will not quote you a fee over the telephone.

Not because we are being difficult, but because a responsible figure needs a scan and an examination behind it.

We will not promise you a number of years.

How long an implant lasts depends on the site, your general health and how consistently it is maintained. Anyone who gives you a guaranteed figure is guessing.

We will not discount the treatment to close the decision.

If a fee falls when you hesitate, the first fee was invented. Ours does not move.

We will not change the figure after you have said yes.

What is written in your dossier is what you pay for the treatment described in it.

We will not show you other people's results as though they were a forecast of yours.

Individual results vary with the case. Yours will be discussed against your own scan, not against a gallery.

The risks, stated properly

Implant treatment is surgery, and every surgical procedure carries risk. Implants can fail to integrate, and a small proportion do. Healing is affected by smoking, uncontrolled diabetes, some medications and gum disease. Grafting is sometimes needed and is not always predictable. Prostheses wear, and the part you can see will eventually need maintenance or replacement even when the implant beneath it is sound. None of this is a reason not to proceed — it is the reason we measure, record and review rather than simply place. Your own risks, and what they mean for your case, are set out in your dossier and discussed with you before you consent to anything.

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The method starts with one sixty-minute appointment.

A limited number of Record appointments is released each week, because the number of cases that can be planned and carried at one time is finite. Telephone either practice and we will find you the first one that suits.



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Mon-Fri 9:00am-6:00pm
Sat 9:00am-4:00pm

Any surgical or invasive procedure carries risks. Before proceeding you should seek a second opinion from an appropriately qualified health practitioner. Individual results vary. Fees shown in this pack are starting fees for the treatment described and do not constitute a quotation; your own fee is confirmed in writing at The Record. The \$295 assessment fee is credited in full against treatment commenced within 90 days of the assessment; the fee is payable at the appointment and is not refundable if you do not proceed. Full terms at [\[website/terms\]](#). Implant treatment led by Dr Hyun Soo Yu, MSc Implantology, FICOL. © 2026 The Implant Standard. Version [1.0], [month year].