Orthodontic treatment criteria

Why a new referral process for Orthodontics?

Greater Manchester Area Team commission Orthodontic services based on treatment need. In order for this valuable resource to be used effectively we have worked with clinicians from General and Specialist Orthodontic Practice to refine the referral process to help ensure as many of the referrals as possible are appropriate for case start. Every referral which does not meet the IOTN criteria, or where the oral hygiene is poor and/or the commitment to the prolonged treatment is not understood uses the specialist resource i.e 1 UOA for assess & refuse. A robust referral process allows us to collectively direct these UOAs to assess & accept for treatment start for as many patients as possible.

A new referral form and guidance has been developed to help you assist us and Orthodontic Providers make the most effective use of the UOAs we have to benefit your patients.

Guidance to assist you

IOTN

The need for treatment and severity of the malocclusion is measured using IOTN. This is a rating system consisting of 5 grades, ranging from ‘no need for treatment’ (Grade 1) to ‘severe need for treatment’ (Grade 5). In order to accurately grade a malocclusion using IOTN the clinician should be trained and calibrated to use the Index.

Not all dentists making referrals are calibrated to use IOTN so an orthodontic referral guide has been developed by British Orthodontic Society to make the referral process easier for dentists not familiar with IOTN. This form can be laminated and kept in the surgery as a handy guide.

You can download your copy of the BOS referral guide using the link at the bottom of this page: http://www.bos.org.uk/Information-For-Dentists/Making-an-Orthodontic-Referral/Is-my-Patient-Eligible-for-NHS-Treatment.

NHS treatment is available for grade 4 and grade 5 cases. Grade 3 cases are usually judged on an individual basis. Treatment may also be made available if the appearance of a person’s teeth, jaws or face are of concern, and fulfil aesthetic component of 6 or above.
**BPE**

Scrupulous oral hygiene and dietary control are essential during fixed appliance therapy to avoid possible damage to the teeth caused by plaque collecting around the brackets and acid erosion from soft “fizzy” drinks.

From the face to face triage carried out in Manchester upwards of 30% of referrals triaged had oral hygiene too poor to be considered for orthodontic treatment, as risk or damage could be caused.

For every referral a BPE needs to be completed in order for the triager to be confident that the patient is ready for orthodontic treatment.

Referrals should only be made if the total BPE score across all sextants is below 4.

BPE scores should be accurate at the time of referral, however, an urgent referral may be considered if there is an oral health plan to address this.

**Age**

Most orthodontists working in primary care can only provide orthodontic treatment for patients under the age of 18. Patients over 18 with severe malocclusions who require multidisciplinary care will be eligible for orthodontic treatment in the Hospital Orthodontic Service (secondary care).

Early referrals, before the age of 10, may be accepted in the following cases:

1. Anterior crossbite with displacement, especially if there is gingival recession and/or mobility of lower incisor tooth or wear of incisor teeth.

2. Large overjet under exceptional circumstances will be accepted. In these cases it is essential that the referring dentist records the overjet.

4. Advice is required on early extraction of permanent teeth due to caries or hypoplasia. Probably these cases are not going to be suitable for appliances but advice could be given on management.

5. Significantly delayed eruption of incisor teeth.

If you are not sure whether your patient is eligible for NHS orthodontic treatment you should make the referral with as much information as possible in order for the triager to make an informed decision.