

NHS Orthodontic E-referral Guidance

All orthodontic referrals for NHS care will be managed through the online Orthodontic Assessment and Treatment Interactive Form found at <http://www.dental-referrals.org>. Flow charts have been included to provide an overview of the process for patients aged 8-18-years and over 18 years. The system is designed to manage all orthodontic referrals centrally to better understand the need/provision within the region. Referrals are then passed down to the relevant providers as availability exists for new patient assessments.

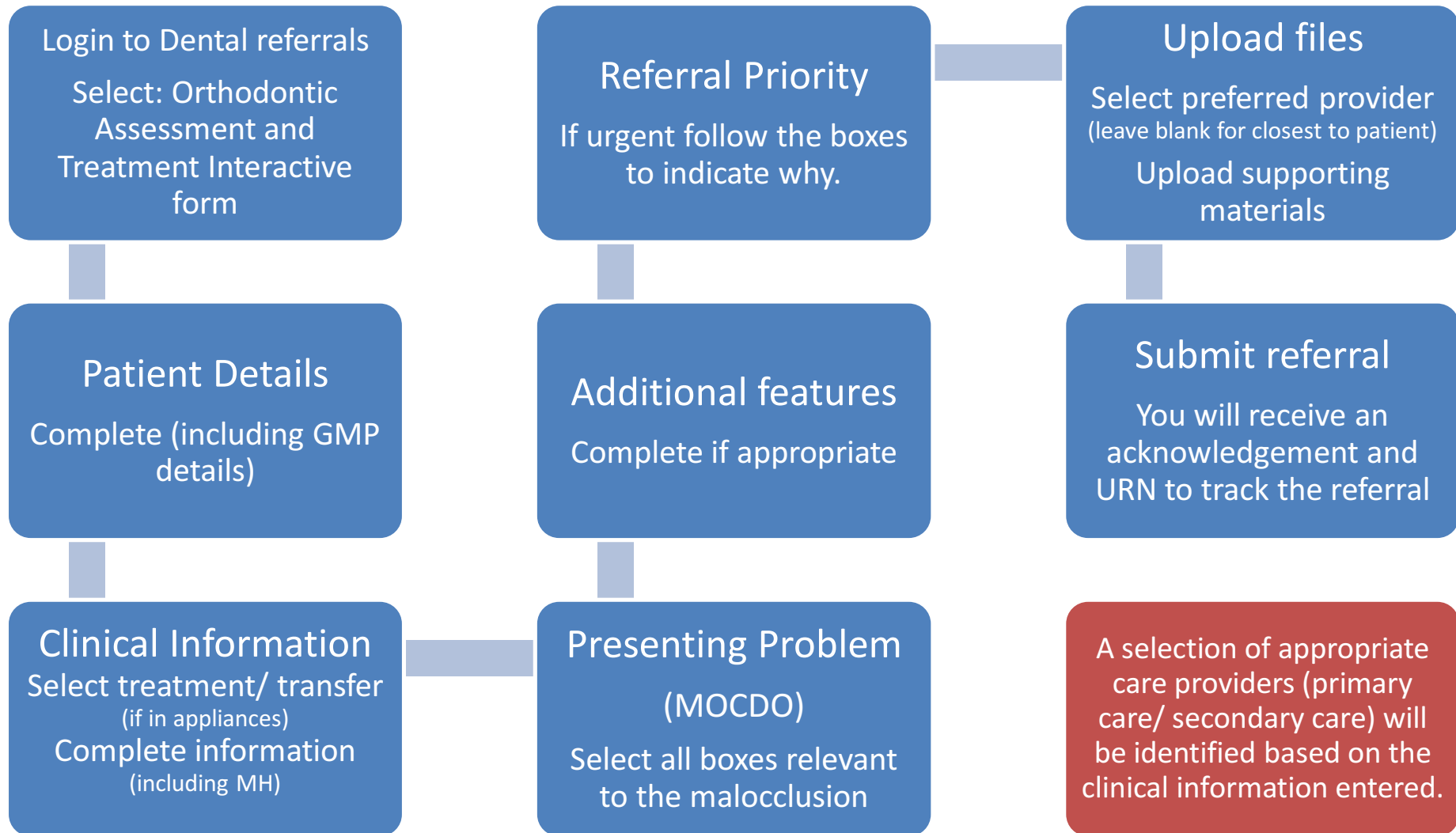
Clinically, the information required is based on the MOCDO method of assessment related to the index of orthodontic treatment need (IOTN). Specific features to record are:

1. Missing Teeth– hypodontia, impactions and unerupted (outside of normal sequence), NOT including 8s
2. Overjet – positive and negative overjet measurements (mm)
3. Crossbites – anterior (how many incisors) and posterior, with or without displacement between retruded contact and intercuspal position
4. Displacements of contact points - crowding
5. Overbite – deep bites (with/without trauma), anterior open bites or lateral open bites (>2mm)
6. Additional specific features (submerged deciduous teeth, supernumerary teeth, etc...)

The online referral form has a built in algorithm that will direct the referral to secondary care only if the severity of the malocclusion reaches thresholds for hospital-based care.

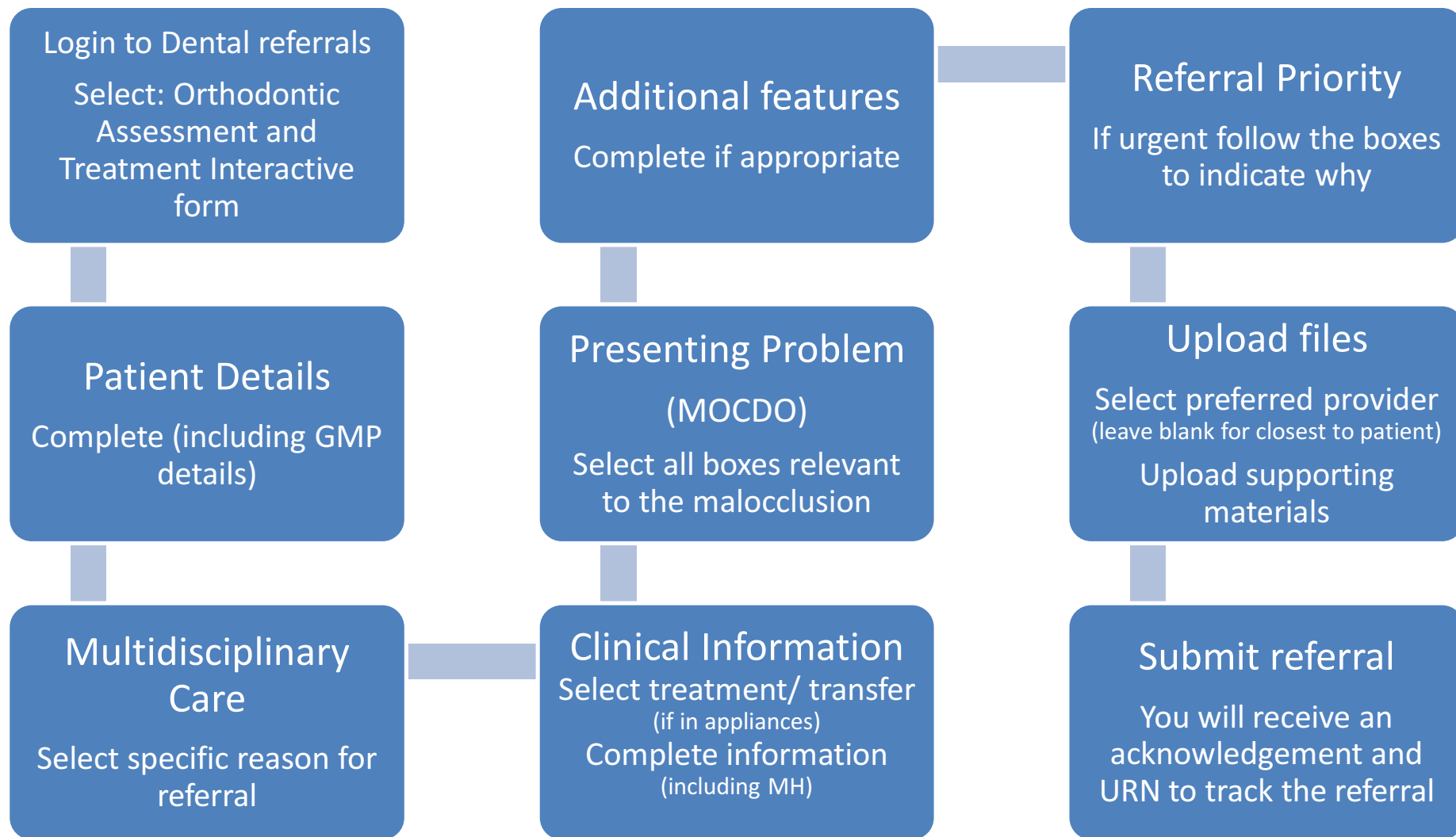
Things to remember:

- Orthodontic treatment is time consuming, sometimes uncomfortable and requires the commitment of the patient and family. Patients with poor oral hygiene or active caries lesions should not be referred until they demonstrate appropriate levels of plaque control and motivation. It is important that you discuss the nature of orthodontic treatment with your patient before making the referral and reinforce the commitment they have agreed to in the patient contract. Orthodontic patients should be considered at risk for caries and practitioners should consider Delivering Better Oral Health when prescribing preventative advice and therapies. The use of high fluoride toothpaste may be indicated (2800ppm for older children 5000ppm).
- The majority of orthodontic treatment can commence in the late mixed / early permanent dentition. If the child needs early interceptive treatment please state the reasons why. Patients should be referred based on the clinical findings and not referred early in an attempt to circumvent the long waiting lists. Patients referred too early will be sent back to the referring practitioner.
- Whilst we expect the majority of referrals to be routine, you can indicate whether the referral requires priority and should be seen without entering the normal waiting list. Specific justification will be required and if not appropriate the patient will be placed back on the routine list.
- Orthodontic referrals should usually be done before the patient is 17-years-old, to allow time for them to move through the waiting lists. If the referral is made later than 17 then reasons/indications for this should be noted.
- Referring to secondary care is possible via the 'supporting features' section by selecting "problems likely to need specialist multidisciplinary input (surgical, restorative, paediatric or special care)". Please note that; malocclusions referred by this route should still meet the eligibility criteria for NHS orthodontic treatment (IOTN DHC at least 3 with aesthetic component >6) and that all referrals made by this route will be screened by a Consultant (so please enclose sufficient information to allow a decision to be made).
- Patients over the age of 18-years-old with routine malocclusions not requiring hospital care will not be accepted for NHS referral.
- Transfer cases are likely to be accepted from outside the region but will not be considered within the Cheshire and Merseyside footprint.



NHS Orthodontic E-referral Process – patient aged over 18 years-old

<https://www.dental-referrals.org>



Only complex malocclusions requiring multidisciplinary input will be accepted into the hospital service for patients aged over 18 years