

CRITERIA FOR TREATMENT WITH THE WESTERN HSC TRUST CONSULTANT ORTHODONTIC SERVICE

These referral guidelines are based on “The Role of the Hospital Consultant Orthodontist” published by the British Orthodontic Society and take into account the high level of provision of specialist orthodontic care within the Northern Ireland General Dental Services.

Under normal circumstances patients will only be accepted for treatment in the Consultant Orthodontic Service in the Western Health and Social Care Trust (WHSC) if they meet one of the following criteria:

- **Patients with severe skeletal problems** requiring treatment by means of combined orthodontic and orthognathic surgical treatment approaches.
 - Patients may remain under review in order to allow facial growth to be completed before making a definitive treatment plan. In some cases, when growth is complete, patients will be referred back to the referring high street Specialist Orthodontic Practitioner for orthodontic treatment.
 - Due to increased morbidity risks, patients’ BMI will be taken into account when offering treatment which involves orthognathic surgery. For the same reason, patients who smoke will not be offered treatment.

- **Patients with complex multidisciplinary dental problems** requiring a combined orthodontic and restorative approach (*severe hypodontia*) where close liaison is required with hospital restorative dentistry specialists.
 - Complex can be defined as the *congenital* absence of more than one tooth in a quadrant leading to residual spacing of more than one unit.
 - In those cases which are not being treated by the Restorative Department in the Belfast Dental Hospital, it will be the responsibility of the patient’s General Dental Practitioner/Community Dentist to provide restorative replacement of teeth and to inform the patient if this is to be provided under GDS regulations or private contract.
 - Less complex cases in this category (for example isolated absence of individual incisors or premolars) will be referred back to high street Specialist Orthodontists & General/Community dentist with appropriate orthodontic and restorative treatment plans.

- **Patients requiring coordinated care for cleft lip and palate** and other congenital dento-facial anomalies.

- **Severe problems of un-erupted, displaced or malformed teeth**, or the effects of trauma and pathology in the dento-alveolar structures of the child and young adult.
 - Less complex cases in this category (for example isolated palatally ectopic canines) will be referred back to high street Specialist Orthodontists with appropriate treatment plans.

- **Children with growth related problems or syndromes** who also have a malocclusion.
 - Most children and adults with medical problems or special needs can be treated in high street specialist orthodontic practice and may be referred back with appropriate treatment plans.

- **Patients diagnosed with mild to moderate obstructive sleep apnoea** (diagnosed by Respiratory Physicians/ENT /sleep study).
 - Patients deemed appropriate will only be accepted for fabrication of a single Mandibular Advancement Splint. Monitoring of the appliance and any replacements will be the responsibility of the General Dental Practitioner.

- We are unable to accept patients for treatment on financial grounds or where patients do not qualify for Health Service orthodontic treatment with local high street specialist orthodontists.

- We currently only accept referrals from patients resident within the Western Health and Social Care Trust area. Patients who reside outside of the Western area or those residents of ROI should be referred to the Consultant Orthodontists in the relevant area. **Patients resident in the ROI and attending school in Northern Ireland are *not* eligible for orthodontic treatment under the Health Service , even if one or both their parents work in NI.**

- **Patients with poor oral hygiene will not be accepted for orthodontic treatment** even if they meet the above criteria. Poor oral hygiene and orthodontic treatment inevitably leads to tooth damage and gum disease. Patients with poor oral hygiene or tooth decay will be asked to return to their General/Community Dentist for the appropriate interventions. The General/Community Dentist can refer the patient back to the orthodontic department when a high level of oral health has been achieved and maintained.

- During any orthodontic treatment, it is expected that the patient's own General/Community Dentist continues to see them for routine examinations and treatment. They will provide all other aspects of the patient's dental care.

Updated: September 2013