

Kent Orthodontic Referral Proforma

Date:

Insert Address of Orthodontist Here:

**Broad Street Orthodontist,
54 Broad Street,
Canterbury,
Kent CT1 2LS**

<u>Referring Practitioner</u>	
Name:.....	
Address:.....	
.....	
Contact No:.....	
Fax No:	

Patient Details IN BLOCK CAPITAL LETTERS please	<u>Patient has been given information letter</u> <input type="checkbox"/>
Name.....	Male/Female
Address.....	
.....	NHS No.....
Postcode (Essential).....	Date of Birth.....
Telephone Number (Daytime).....	(Mobile).....

GDP (If not referrer) Name..... Practice.....

GP Name..... Practice.....

Please tick one or more reason(s) below for your referral. Then check your selection overleaf to decide the most suitable provider. Further descriptions for each reason are available overleaf.

- | | |
|---|---|
| Non palpable, unerupted, permanent canines in patient aged 10 years (<i>see note 9</i>) | <input type="checkbox"/> |
| 1) Overjet >6mm <10mm <input type="checkbox"/> >10mm <input type="checkbox"/> | 8) Presence of supernumerary teeth <input type="checkbox"/> |
| 2) Reverse overjet -1mm <input type="checkbox"/> >-1mm <input type="checkbox"/> | 9) Impacted teeth inc canines <input type="checkbox"/> |
| 3) Traumatic overbite <input type="checkbox"/> | 10) Submerged deciduous teeth <input type="checkbox"/> |
| 4) Open bites > 4mm <input type="checkbox"/> | 11) Aesthetic impairment <input type="checkbox"/> |
| 5) Ant/Post x-bite with displacement <input type="checkbox"/> | 12) Possible surgical case <input type="checkbox"/> |
| 6) Crowded / Malaligned teeth <input type="checkbox"/> | 13) GDP would like an opinion <input type="checkbox"/> |
| 7) Missing teeth <input type="checkbox"/> | 14) Over 18 for private assessment <input type="checkbox"/> |

Relevant Medical History.....

Additional Comments/Information

Please send relevant radiographs and models if available

FOR DATA PROTECTION PURPOSES, ELECTRONIC REFERRALS MUST BE SENT TO AND FROM SECURE NHS.NET ACCOUNTS ONLY. IF NHS.NET UNAVAILABLE, PLEASE SEND BY POST

NHS Orthodontic Referral Guidelines

This orthodontic referral proforma is to help you decide which patient needs a referral for NHS orthodontic treatment and which provider is the most suitable. All NHS referrals must be on this form, although you may attach a letter providing further details if you wish. This proforma is based around the “need” of the patient for orthodontic treatment.

S = Specialist practice (may include DwSI) **H = Hospital service** (see provider sheet)

- 1) **Overjet:** measured from the most prominent of the four incisors.
Action- if >6mm but <10mm, refer to **S**. If >10mm refer to **S** or **H**
- 2) **Reverse overjet:**
Action - Edge to edge to -1mm refer to **S**. If > -1mm, refer to **H**
- 3) **Traumatic overbite:** increased complete overbite with signs of trauma to the labial or palatal tissues.
Action- refer to **S** or **H**
- 4) **Open bites Ant/Post:** >4m.
Action - if linked to a digit habit refer to **S**. If not, refer to **H**
- 5) **Ant/ Post X bite with displacement:** mandibular displacement from RCP to ICP greater than 2mm.
Action - refer to **S**
- 6) **Crowded / Malaligned Teeth:**
Action - refer to **S**
- 7) **Missing teeth:** this relates to:
 - a) Hypodontia congenitally absent teeth commonly, upper laterals or second premolars (third molars do not count)
 - b) Avulsed teeth or inappropriate extractions (e.g. space remaining due to early loss of one or more first molars)Action - refer to **S** unless severe hypodontia, then refer to **H**
- 8) **Presence of supernumerary teeth:** Extra teeth causing a problem.
Action - refer to **S** or **H**
- 9) **Impacted teeth:** a) simple tipped teeth causing food packing b) moderate /severe impactions, including impeded eruption – not enough room for a tooth to erupt c) impacted or palatal canines - if the maxillary canines cannot be palpated in the buccal sulcus by age 9-10 years, they may be ectopic and further investigations should be carried out.
Action - if a) refer to **S**, if b) refer to **S** or **H**, if c) refer to **S** or **H**
- 10) **Submerged deciduous teeth:** adjacent teeth grossly tipped towards each other, premolar impacted or missing.
Action - refer to **S**
- 11) **Aesthetic impairment:** in a select number of cases treatment may be justifiable on grounds of “aesthetic impairment”. If you feel this is the case then the patient should be referred for a specialist opinion, but warned that treatment may not be available on the NHS.
Action - refer to **S**
- 12) **Possible surgical case:** for severe skeletal discrepancy, defects of cleft lip palate, craniofacial anomalies.
Action - refer to **H**
- 13) **GDP opinion:** where a GDP has real concerns regarding an individual patient then a referral for a specialist opinion remains entirely appropriate.
Action- refer to **S**
- 14) **Patient over 18 :-**
Action - for orthodontics only refer to **S** (private) or if for (9b), (12) above then refer to **H** (NHS).

In addition, patients referred for orthodontic treatment should be dentally fit and have good oral hygiene.