1.1 ELIGIBILITY
Patients must meet the requirements of the Index of Treatment Need (IOTN) 4, 5 and 3 with an aesthetic component of 6 or above (SCAN) to be eligible for NHS treatment.

The patient should be less than 18 years of age on the date the referral form is signed by the referrer. To clarify, patients aged 17 years and 364 days or below are eligible for treatment. For those patients that are not eligible for treatment, if deemed appropriate by the referrer the case can be referred to an Area Referral Panel for consideration. Please see additional guidance for further details.

1.2 GENERAL INSTRUCTIONS
Referrals can only be made by General Dental Practitioners and associated dental clinical professionals. Please note that General Medical Practitioners cannot refer a patient for NHS orthodontic treatment and GPs should advise patients to see a General Dental Practitioner in the first instance.

The Hampshire NHS Orthodontic Referral form must be completed for all patients seeking NHS orthodontic treatment within the Hampshire locality. For NHS treatment, patients should not be referred directly to individual Providers. If a referral is submitted to the Central Referral Centre without the appropriate referral form, the referral will be returned and the patient’s treatment may be delayed. Similarly, if a General Dental Practitioner refers directly to an individual Provider this referral will not be accepted and will be returned which may cause a delay in the patient’s treatment.

All sections of the referral form must be completed, including the dental health component of the IOTN by ticking the appropriate box.

If an OPG radiograph is available a copy should be included with the referral form. Where possible an OPG should be taken as this information will support the patient’s assessment. Please note all sections of this form must be completed. If all sections are not completed, the form will be returned and the patient’s treatment may be delayed.

1.3 PROCESS
Following submission of the referral form to the Central Referral Centre the referral will be sent to either a Primary or Secondary Care provider based on the IOTN identified, to assess the patient to establish eligibility for treatment.

Should the patient be assessed and deemed eligible in line with National criteria. The Provider will assess the complexity of treatment needed and either accept the patient for treatment or refer back to the Central Referral Centre for the patient to be seen by an alternative Provider.

Should the patient be assessed and not deemed eligible in line with National criteria, the referrer and patient will be advised in writing. The referrer should contact the patient concerned to address any queries or concerns. Please refer to the “PCT Panel – Cases for Review Guidance” where appropriate.

1.4 ADVICE TO PATIENTS
Due to eligibility criteria and other considerations, the PCTs cannot guarantee treatment to all patients referred. Patients need to be assessed as to their eligibility and suitability for treatment. It is therefore essential that you inform patients that a referral does not guarantee treatment.

Please advise patients that should they be assessed as eligible for treatment, they will be offered an appointment with an appropriate Provider of NHS orthodontic treatment who can provide the complexity of the treatment needed. This may be either within a Hospital or within Primary Care. The
patient will be placed with an appropriate provider with a reasonable wait for treatment. The Central Referral Centre will take account of demographics and will work to accommodate patients that request specific providers. If the patient does not express a preference, the patient will be allocated to an appropriate Provider with capacity at that time. Please note that if the patient has expressed a preference this Provider may not be suitable and it will therefore not be possible to meet the patient’s request. In addition, should the preference of Provider have a wait in excess of 18 weeks the patient may be contacted to discuss other alternative Providers.

2. GUIDELINES FOR ORTHODONTIC REFERRAL

Most orthodontic patients will benefit from referral at or just before the completion of their permanent dentition (excepting second and third molars). Please note that the patient should be less than 18 years of age on the date of the referral to be eligible for NHS orthodontic treatment. This will be based on the date the referral form is signed by the referrer. To clarify, patients aged 17 years and 364 days or below are eligible for treatment. Patients aged 18 years or over at the date the referral is received by the PCT are not eligible for NHS orthodontic treatment.

Early Referrals

Early referrals will be accepted for orthodontic assessment as follows:

1. Where there is obvious **Hard or Soft tissue trauma** resulting from the malocclusion, for example: wear to incisal edges in the case of a cross-bite; localised gingival recession resulting from labial displacement of a lower incisor.
2. Where there is significantly **delayed eruption**
3. Where it is known that there are **missing teeth**, this will allow the earliest possible planning of the complete dentition.
4. **Class III malocclusion in the mixed dentition.** Baseline records should be taken for growth monitoring especially if an underlying Skeletal II exists. Also it may be wise to remove a cross-bite if there is an anterior displacement (Please note 21/12 should also be erupted before attempting this).
5. **Class II/I malocclusion** where there is an **underlying Skeletal II pattern**. (This can quite easily be detected when the patient postures the mandible forwards keeping the teeth lightly in contact. If the profile improves then Functional Appliance treatment may well yield benefits). Most Functional appliances are easiest to wear when upper 4/4 are fully erupted. Such a patient entering his or her pubertal growth spurt should be seen without delay.
6. **Class II/ii patients** who have a **definite Skeletal II pattern**. Many of these would benefit from conversion to a Class II/I then treatment with a functional appliance.
7. Where a patient is seeking **compromised treatment**, e.g. if an acceptable result looks possible by single extraction with or without simple appliance treatment to follow. In this situation the referrer may wish to have this plan checked.

Urgent Referrals

Urgent referrals will be accepted for orthodontic assessment as follows:

1. Where a **Dental Impaction** exists especially canines.
2. Where there are **Permanent teeth with poor prognosis**; e.g. first molars, which are being considered for early removal, an orthodontic opinion might be sought if there is a co-existing malocclusion.

General Considerations

Patients who have inadequate oral hygiene or significant sugar intake in their diets render themselves unsuitable for active appliance treatment. If such a patient is referred for advice regarding treatment options, the referrer should explain to them that whilst a Provider may be happy to assess them, treatment will not be available until these issues are addressed.

Patients who are reluctant for treatment will present a poor prospect for success. Whilst we can advise and encourage a patient who would benefit from treatment, ultimately it is their choice and not the Provider, referrer or indeed the patient’s parents. In many such cases it is far more desirable to wait for the child to come round to the idea of treatment in their own time rather than in any way coerce them.