

Orthodontic Referral Form (HSE Guidelines 2007)

Referral Forms should be forwarded to the orthodontic department by 5th day of the month.

Forms not approved by the Principal Dental Surgeon will be returned.

Please complete in **BLOCK CAPITALS**

Name	DOB			
Address	Telephone	Mobile		
		Home		
		Work		
PPS Number				
Medical card Number	Significant Medical History / Social History			
Date Screened				
National School				
Dental Area				
Referring Clinic	Padiographs in	adudad Van Na		
Referring Dentist	Radiographs included Yes No OPG Maxillary occlusal			
Signature				
P.D.S	Periapicals			
Signature	Bitewings R			
HSE Eligibility Score (please circle) (PTO for guid	dance notes)			
El El E E E E U	4d 4e 4f	4I 4m HSE Care Special needs		
Clinical notes or specific query				
	••••••			
For orthodontic departments use only				
Date received in orthodontic unit Date patient data entered on OrthoTrac		Initials		

Guidelines for completing assessment

1. Is the patient caries free and does he/she have good oral hygiene? Refer only if Yes

2. Does the patient have any missing teeth?

<u>Yes</u> Due to impeded (impacted) eruption of teeth (Apart from 3rd molars) due to crowding, displacement, supernumerary teeth, retained primary teeth or pathology. *5i refer*

<u>Yes</u> Due to extensive hypodontia (2 or more teeth missing in any quadrant) (not due to extractions), requiring pre-restorative orthodontics. Also includes amelogenesis imperfecta and other dental anomalies which require pre-prosthetic orthodontic care. Incisors lost due to trauma will be assessed on a case by case basis. **5h refer**

3. Does the patient have an overjet greater than 9mms?

Yes 5a refer

4. Does the patient have a reverse overjet greater than 3.5mms?

Yes with speech or masticatory problems
Yes without speech or masticatory problems
4b refer

Does the patient have a reverse overjet greater than 1mm but less than 3.5mms with speech or masticatory problems?

Yes 4m refer

5. Does the patient have submerged deciduous teeth? (orthodontic treatment may not be necessary in every case)

Yes 5s refer

6. Does the patient have an anterior or posterior crossbite with greater than a 2mm slide between RCP and ICP?

Yes 4c refer

7. Does the patient have severe crowding of the anterior teeth (3-3) with contact point displacements greater than 4mms and have an aesthetic component score between 8 and 10?

Yes 4d refer (do not refer 4d with aesthetic component scores below 8)

- 8. Does the patient have an extreme lateral or anterior open bite greater than 4mms?

 Yes 4e refer
- 10. Does the patient have an increased and complete overbite with gingival or palatal trauma?
 Yes 4f refer
- 11. Does the patient have a posterior lingual crossbite with no functional occlusion in an entire buccal segment?

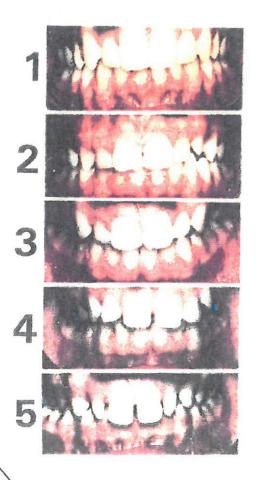
Yes 41 refer

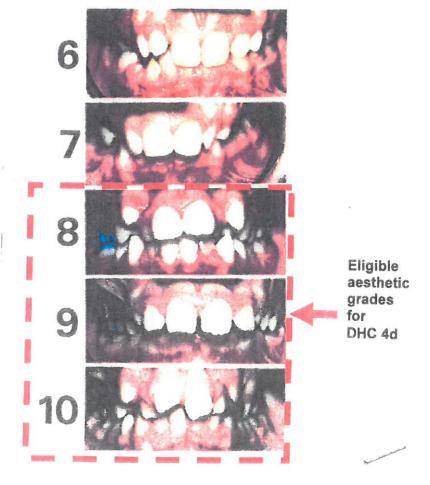
Additional eligibility criteria

- 1. Children who are in care of the HSE and do not fall under any of the other eligibility criteria.
- Children with special needs who are referred by the primary dental care special needs service or a paedodontic consultant (please provide details above, including wheel chair access needs).

INDEX OF ORTHODONTIC TREATMENT NEED (HSE MODIFICATION)

-1		Impeded eruption of teeth (apart from third molars) due to		
M	5i	displacement, presence of supernumeraries, retained deciduous teeth or any pathological cause (NOTE: this is not crowding)		
	5h	Extensive hypodontia (2 or more teeth missing in any one quadrant)		
	5a	Increased overjet > 9mm		
0	5m	Reverse overjet > 3.5mm with speech and masticatory difficulties		
	4m	Reverse overjet 1–3.5 mm with speech and masticatory difficulties		
	4b	Reverse overjet 1– 3.5 mm with no speech or masticatory difficulties		
	5p	Cleft lip and palate		
	5 s	Submerged deciduous teeth (only two cusps above gingiva)		
С	4c	Anterior or posterior crossbites with > 2mm discrepancy between retruded contact position (RCP) and intercuspal position (ICP)		
	41	Posterior lingual crossbite with no functional occlusal contact in one or more buccal segment (must extend from canine to second molar)		
D	4d	Severe displacement of contact points of teeth (i.e. crowding) of >4mm but only if the AC grade is 8, 9 or 10 (see AC grades, below)		
0	4e	Extreme lateral or anterior open bites > 4mm		
V	4 f	Increased and complete overbite with gingival or palatal trauma		





Dental Health Component of the IOTN (full)

GRADE 5 (Great need for treatment)

- 5a , Increased overiet greater than 9mm
- 5h Extensive hypodontia with restorative implications (more than 1 tooth missing in any quadrant) requiring pre-restorative orthodontics
- 5i Impeded eruption of teeth (except for third molars) due to crowding, displacement, the presence of supernumerary teeth, retained deciduous teeth and any pathological cause
- 5m Reverse overiet greater than 3.5 mrn with reported masticatory and speech difficulties
- 5p Defects of cleft lip and palate and other craniofacial anomalies
- 5s Submerged deciduous teeth

GRADE 4 (need for tx)

- 4.a <u>Increased overiet greater than 6mm but less</u> than or equal to 9mm (not elig in HSE version))
- 4.b Reverse overiet greater than 3.5mm with no masticatory or speech difficulties
- 4.c Anterior or posterior crossbites with greater than 2mm discrepancy between retruded contact position and intercuspal position
- 4.d Severe contact point displacements greater than 4mm (in HSE modification, eligible only if AC is 8,9 or 10)
- 4.e Extreme lateral or anterior open bites greater than 4mm
- 4 f Increased and complete overbite with gingival or palatal trauma
- 4.h <u>Less extensive hypodontia requiring</u>
 prerestorative orthodontics or orthodontic
 space closure to obviate the need for a
 prosthesis (one tooth only missing in one
 or more quadrants) (not elig in HSE
 version))
- 4.I Posterior lingual crossbite with no functional occlusal contact in one or both segments*
- 4.m Reverse overiet greater than 1mm but less than 3.5mm with recorded masticatory and speech difficulties*.
- 4 t <u>Partially erupted teeth, tipped and impacted against adjacent teeth</u> (not elig in HSE version)

GRADE 3 (Borderline need - not eligible)

- 3.a Increased overjet greater than 3.5mm but less than or equal to 6mm with incompetent lips.
- 3.b Reverse overjet greater than 1mm but less than or equal to 3.5mm.
- 3.c Anterior or posterior crossbites with greater than 1mm but less than or equal to 2mm discrepancy between retruded contact position and intercuspal position.
- 3.d Contact point displacements greater than 2mm but less than or equal to 4mm.
- 3.e Lateral or anterior open bite greater than 2mm but less than or equal to 4mm.
- Deep complete overbite but with no gingival or palatal trauma.

GRADE 2 (Little - not eligible)

- 2.a Increased overjet greater than 3.5mm but less than or equal to 6mm with competent lips.
- 2.b Reverse overjet greater than 0mm but less than or equal to 1mm.
- 2.c Anterior or posterior crossbite with less than or equal to 1mm discrepancy between retruded contact position and intercuspal position.
- 2.d Contact point displacements greater than 1mm but less thanor equal to 2mm.
- 2.e Anterior or posterior open bite greater than 1mm but less than or equal to 2mm.
- 2.f Increased overbite greater than or equal to 3.5mm without gingival contact.
- 2.g Pre-normal or post-normal occlusions with no other anomalies (includes up to half a unit discrepancy)

GRADE 1 (None – not eligible)

Extremely minor malocclusions including contact point displacements less than 1mm.