

Primary Care Endodontic Specialist Service

Referral Protocols

A primary care specialist endodontics service has been developed and commissioned by **Tower Hamlets Primary Care Trust**. Any dentists located in Tower Hamlets Primary Care Trust may refer to the service as long as the patient is resident in Tower Hamlets or registered with a medical practitioner in Tower Hamlets.

Under General Dental Council guidance, it is the referring dentists' responsibility to ensure that any patient referral for care is appropriate.

Only referrals conforming to the criteria below and detailed in the specification and made on the designated referral form will be accepted. All other referrals will be returned to the referring dentist.

To prescribe endodontic treatment relevant radiographs will have been taken. These **must** be included with the referral or it will be returned. This will avoid unnecessary further exposure to ionising radiation for the patient and will expedite the referral process.

In addition, an FP17 RN must be completed as part of the referral process.

Referrals for routine endodontic treatment will not be accepted as these should be undertaken by a general dental practitioner.

Patient Criteria

- Must be a resident in Tower Hamlets (post codes E1, E2, E3, and E14) OR
- must be registered with a GENERAL MEDICAL PRACTITIONER in Tower Hamlets

SUBMISSION CRITERIA

A fully completed referral form AND a clear LCPA of tooth/teeth must be received. This can be emailed or posted to the service see service detail below.

CLINICAL CRITERIA

- Single/multiple root canals with curvature greater than 40°
- Single/multiple root canals that are **NOT** considered negotiable from radiographic or clinical evidence through their entire length

- Periradicular surgery where:
 - There is presence of periradicular disease in a tooth where iatrogenic or developmental anomalies prevent non surgical root canal treatment being undertaken There is presence of periradicular disease, with or without symptoms in a root filled tooth, where non surgical root canal re-treatment cannot be undertaken or has failed, or where conventional re-treatment may be detrimental to the retention of the tooth, for example, obliterated root canals or small teeth with full coverage restorations where conventional access may jeopardise the underlying core. Non-surgical root canal treatment is the treatment of choice in most cases
 - A biopsy of periradicular tissue is required.
 - Visualisation of the periradicular tissues and tooth root is required when perforation, root crack or fracture is suspected.
 - Procedures are required that require either tooth sectioning or root amputation.
 - It may not be expedient to undertake prolonged non surgical root canal re-treatment because of patient considerations.

- Teeth with iatrogenic damage or pathological resorption
- Teeth with difficult root morphology
- For retreatment of root canal treatment in teeth of complexity two in the Restorative Dentistry Index of Treatment Need, excluding third molar teeth.
- Persistent signs and symptoms following root canal therapy
- Difficult root morphology- this includes obliterated canals, long, curved roots, open apices
- Fractures or cracks in teeth, root resorption, perforations
- Complicating medical history e.g. restricted mouth opening , arthritis

Any case not meeting the above approved criteria should not be referred as the patient will be referred back to the referring practice.

An initial assessment appointment will be provided. Following completion of the treatment, the patient will be returned to the referring practice for continuing care, this will include restoration of the root filled tooth/teeth.

Treatment will not be carried out if the clinician is of the opinion that the prognosis will not significantly be improved.

Service Location and details

Waterside Dental Health

1 Raleigh House

Admirals Way

London

E14 9SN

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www.watersidedentalhealth.co.uk