

University Hospitals of Leicester NHS Trust Department of Restorative Dentistry Glenfield Hospital

PROSTHODONTIC GUIDELINES (Please read these guidelines prior to completing the RMS referral form)

General Principles:

- General Dental Practitioners have a right to refer any patient for an opinion and advice. These guidelines are designed to ensure that referrals are appropriate.
- It is the referring dentist's responsibility to inform the patient of the exact purpose of the referral. The patient should understand that he/she will be advised of any prosthodontic problem(s) but may not necessarily be accepted for treatment at the hospital.

The following patient groups will be accepted for consultation:

- 1. Patients with cleft lip & palate or hypodontia who require multi-disciplinary care.
- 2. Head and Neck Cancer patients who require complex fixed or removable prosthodontic care as part of MDT management., or tooth loss due to non -cancer pathology of the jaws
- 3. Patients who have lost 1 or more teeth as a consequence of recent trauma where conventional approaches have been explored and unsuccessful.
- 4. Patients with complex diagnostic needs, undiagnosed dental pain or TMD.
- 5. Patients requiring pre-prosthodontic surgery such as tuberosity reduction or surgical crown lengthening.
- 6. Edentulous patients where recent attempts at complete denture construction have proved unsuccessful. Patients will only generally be accepted for treatment when they have extensive anatomic resorption or a medical condition complicating denture construction e.g. Parkinson's disease or a previous stroke.
- 7. Dental developmental disorders such as amelogenesis imperfecta and dentinogenesis imperfecta in patients over 16 years of age
- Patient's with complicating factors, such as severe toothwear, severe gagging or gross skeletal discrepancies, where decision making and treatment planning is required.
- 9. Situations where major occlusal reorganisation is required and stability cannot be achieved easily without multiple fixed restorations.
- 10. Patients who are eligible for NHS funded dental implant treatment in line with the Royal College of Surgeons of England (2019) guidance.

The following categories **will not** be considered for treatment:

- Patients with poor oral hygiene the referring dentist must confirm that the patient has a plaque score <20% on referral.
- Patients with untreated periodontal disease or endodontic disease.
- Patients with dental caries any dental caries should be stabilised prior to referral.
 This would normally involve the removal of existing carious crown and bridgework and temporisation of any teeth that are deemed restorable.
- Teeth that do not have a good prognosis, i.e. limited coronal tooth structure remaining (less than 3-4mm circumferentially)
- Patients unwilling to meet financial costs in practice, including long-term maintenance costs.
- Non-complex composite restorations, resin bonded bridgework or conventional crown and bridgework
- Dentally anxious patients requiring general anaesthesia, inhalational or intravenous sedation.
- Complex dental treatment that has been provided abroad or under private contract in the UK.

All referrals must be accompanied by up-to-date, diagnostic quality periapical radiographs of all key teeth. This includes any heavily restored teeth and/or teeth of dubious vitality. Periapical radiographs should be a maximum of 1 year old on the date of referral.