

Referral Guidelines – Non third molar exodontia

Key Points

- For use on the Heatherwood Hospital and Wexham Park Hospital sites

Version: 3
Date Issued: 21 October 2021
Review Date: August 2024
Key words: extraction, root, teeth

This is a controlled document. If you are using a printed copy, check it against the version on the intranet to ensure you are using the latest edition.

The department does not provide a service for “routine” extractions in healthy patients, anxious patients, those with a history of difficult extractions or those with anticipated difficult extractions. If a surgical approach is obviously necessary (e.g., retained roots) then referral should be made.

Indications for referral include:

- Associated pathology that needs to be submitted for histological examination (e.g., cysts).
- Extractions from abnormal or diseased bone (e.g., patients who have received therapeutic doses of irradiation to the jaws).
- Surgical complexity such as a general anaesthetic may be indicated.

If there is no surgical indication for general anaesthetic, it is more appropriate to manage anxious patients under local anaesthesia as a staged procedure in primary care. A previous history of a difficult extraction is a less reliable indicator of surgical difficulty than accurate clinical and radiographic examination. Most of these patients will have had a bad experience from poorly managed previous extractions.

It is rare for a patient’s medical history to complicate the extraction to such an extent that it needs to take place within the hospital setting.

Please ensure that relevant radiographs accompany all requests so that we can help to avoid unnecessary radiation exposure to patients. These radiographs will be returned once treatment has been completed.

If you are referring a patient because they request treatment under general anaesthesia, please ensure that the GDC guidelines with regard to risk counselling have been followed and that evidence of this is provided in your letter.

If a referral is made outside these guidelines, please give the reasons why treatment cannot be undertaken in primary dental care.

Full version control record

Version:	3
Guidelines Lead(s):	Mr. Michael Amin, Consultant Oral & Maxillofacial Surgeon
Contributor(s):	
Lead Director / Chief of Service:	Lt. Col. Nnaemeka Okpala, Chief of Service
Library check completed:	12 August 2021
Ratified at:	Oral Surgery Clinical Governance Group 19 October 2021
Date Issued:	21 October 2021
Review Date:	August 2024
Pharmaceutical dosing advice and formulary compliance checked by:	N/A
Key words:	extraction, root, teeth

This guideline has been registered with the trust. However, clinical guidelines are guidelines only. The interpretation and application of clinical guidelines will remain the responsibility of the individual clinician. If in doubt contact a senior colleague or expert. Caution is advised when using guidelines after the review date. This guideline is for use in Frimley Health Trust hospitals only. Any use outside this location will not be supported by the Trust and will be at the risk of the individual using it.

Version Control Sheet

Version	Date	Guideline Lead(s)	Status	Comment
1.0	27/08/15	Mr Michael Amin	Final	Approved - Oral Surgery Clinical Governance Group
2.0	21/08/15	Mr Michael Amin	Final	Approved for re-issue (unchanged) Oral Surgery Clinical Governance Group
3.0	19/10/21	Mr Michael Amin	Final	Approved - (unchanged) Oral Surgery Clinical Governance Group

Related Documents

Document Type	Document Name