Definitions – Unscheduled Dental Care

Classifications¹

1. Dental emergency classification
Patients who require emergency care are those requiring immediate attention in order to minimise the risk of serious medical complications or prevent long-term dental complications. Their condition means they are most likely to present in Accident & Emergency departments with:
   • Uncontrollable dental haemorrhage following extractions;
   • Rapidly increasing swelling around the throat or eye;
   • Trauma confined to the dental arches.

2. Dental unscheduled (or urgent) classification
Patients who require urgent care are those requiring attention for:
   • Severe dental and facial pain not controlled by over-the-counter preparations;
   • Dental and soft tissue acute infection

3. Non-urgent dental conditions
A number of individuals currently access care from OOH services who are not in pain and present for treatment regarding non-urgent problems. This may include:
   • Patients not in pain;
   • Aesthetic problems (dislodged crowns and bridges);
   • Patients with broken dentures;
   • Patients with hospital referral letters;
   • Patients requiring permanent restorations;
   • Non traumatic problems with orthodontic appliances;
   • Patients who have no significant pathology;
   • Patients requiring a second opinion;
   • Patients using EDS as their regular dentist;
   • Requiring surgical extractions (wisdom teeth) and are not in pain.

¹ Classifications taken from Implementing Local Commissioning for Primary Care Dentistry – Factsheet 7: Commissioning Out-of-Hours Services
Urgent (or unscheduled) treatment: definitions and legislative provisions

1. For the purposes of new GDS contracts and PDS agreements, ‘urgent treatment’ means one or more of the treatments listed in Schedule 4 to the National Health Service (Dental Charges) Regulations 2005 provided to a patient in circumstances where:
   • prompt care and treatment is provided because, in the opinion of the dental practitioner, the person’s oral health is likely to deteriorate significantly, or the person is in severe pain by reason of his or her oral condition; and
   • care and treatment is provided only to the extent that is necessary to prevent that deterioration in oral health or address that severe pain.

2. Where both these conditions apply, one or more of the treatments listed in Schedule 4 of the Regulations may be provided, i.e.:
   • examination, assessment and advice;
   • radiographic examination and radiological report;
   • dressing of teeth and palliative treatment;
   • pulpectomy or vital pulpotomy;
   • re-implantation of a luxated or subluxated permanent tooth following trauma including any necessary endodontic treatment;
   • repair and refixing of inlays and crowns;
   • refixing a bridge;
   • temporary bridges;
   • extraction of not more than two teeth;
   • provision of post-operative care including treatment of infected sockets;
   • adjustment and alteration of dentures or orthodontic appliances;
   • urgent treatment for acute conditions of the gingivae or oral mucosa, including treatment for pericoronitis or for ulcers and herpetic lesions, and any necessary oral hygiene instruction in connection with such treatment;
   • treatment of sensitive cementum or dentine;
   • incising an abscess;
   • other treatment immediately necessary as a result of trauma;
   • not more than one permanent filling in amalgam, composite resin, synthetic resin, glass ionomer, compomers, silicate or silico-phosphate including acid etch retention.

2 Classifications taken from Implementing Local Commissioning for Primary Care Dentistry - Factsheet 7b: Commissioning Out of Hours Services & Urgent Treatment: Update
3. The charge for an urgent course of treatment (if the patient is liable to pay NHS charges) is £15.50. An urgent course of treatment attracts 1.2 Units of Dental Activity (UDAs).

4. These arrangements do not apply where a dentist assesses a patient and this leads to the issue of a prescription, but no other treatment (beyond the assessment and the prescription) is given. In these circumstances, which are likely to be rare, the patient does not pay a charge.