Planning makes perfect

Take time to perform an accurate orthodontic diagnosis, says Andrew McCance, and the patient can be guaranteed a natural smile

As GDPs consider the benefits of offering comprehensive orthodontic treatment to their patients, it is important to highlight the importance of treatment planning.

It is great to see how much assistance is provided for dentists looking to branch out into orthodontic treatment. What makes this doubly pleasing is that this will help to make orthodontic treatment more convenient, accessible and affordable for the UK’s patients.

One system has its own in-house Diagnostic Faculty, which provides a service to the dentist through the specialist orthodontist planning each case, producing a detailed report for the dentist, which will usually include several treatment options.

First of all, the Diagnostic Faculty will require a high-quality impression. The best approach uses a two-part putty and wash Vinyl Polysiloxane material. A heavy putty with a high-shore strength is essential, with a separation sheet provided to ensure there is an even 1mm gap for the wash to flow. The putty should set in the patient’s mouth, which takes approximately two minutes, and then the separator sheet is removed and the wash added. The tray is then returned to the patient’s mouth, while the wash sets. Impressions always need to be accurate and detailed. A suitable bite registration material such as the light body wash is then used to take a bite registration.

Up-to-date records

The Diagnostic Faculty will require comprehensive patient records in order to treatment plan. The dentist must furnish the faculty with photographs and radiographs, including:

- Extra-oral photographs of the patient’s profile, three-quarter profile, full face (relaxed) and full face (smiling).
- Intra-oral photographs of the anterior, left and right buccal, upper and lower occlusal areas.
- Radiographs including an Orthopantomogram and upper and lower occlusal images.

In certain cases, ie with child patients on a Class II or III skeletal base where functional jaw correction is planned, a lateral skull radiograph will be required.

Discussing the options

After the dentist receives the full report and treatment plan, it is then time to discuss options with the patient. Having supplied all of the above information, the dentist has the peace of mind in knowing that treatment will be planned in full light of the facts of the patient’s dentition, and that a full survey of everything from root length and impaction through to unerupted teeth and root fracture will have been taken into account.

With this level of care taken in planning, the patient will also feel confident that everything will be done to make the treatment as successful as possible – resulting in a beautiful, natural smile that will light up the patient’s life.

About the author

Dr Andrew McCance
Since qualifying in dentistry from Glasgow University, Dr Andrew McCance has gained a wealth of experience in multi-disciplinary practices. In the mid 1990s, Dr McCance began to develop the Clearstep brace, based on the demands of the 4,000 patients treated annually in his specialist practices. For more information, call the OPT Laboratory & Diagnostic Faculty on 01342 337910, email info@clearstep.co.uk or visit www.clearstep.co.uk.