Birmingham Dental Hospital
General Information for General Dental Practitioner
April 2012

Referral Criteria - Minimum dataset

1.0 Introduction

Referrals for specialist services can be made by a dental practitioner or medical practitioner in primary or secondary care.

Self referrals by patients are not accepted for specialist services, with the exception of the primary care unit which provides a full dental casualty service for the relief of pain.

Patients whose treatment is considered within the scope of a general dental practitioner would only be offered treatment on the undergraduate teaching programme, not with a member of specialist staff.

Referral letters are requested to comply with a minimum data set outlined by Birmingham Dental Hospital to ensure adequate information is available for assessment to support an effective patient pathway. Failure to comply will result in the referral letter being returned with a request for the missing information.

2.0 Referrals for suspected cancer

Any referral for suspected cancer must be faxed directly to the Safe Haven office using the Rapid Access proforma:

Safe Haven Fax: 0121 466 5151

3.0 Making a referral

To facilitate an effective assessment of referrals, the following information must be included as a minimum:

3.1 Referrer details:
- Referring General Dental Practitioner/General Medical Practitioner name
- Referring Dentist Organisation/Practice Code (V Code) and General Dental Practitioner Code (D Code)
- Date of referral
- Telephone number

3.2 Patient details:
- Patient full forename and surname and title (i.e. Miss, Mrs, Mr)
- Full postal address of your patient to include post code
• Patient Gender
• Patient Date of Birth
• Patient Age
• Patient home telephone and mobile telephone
• Patient NHS Number (if known)
• Details of the patient’s General Medical Practitioner.

3.3 Medical History:

• Current medication
• Significant history, including previous consultations for the same condition, name of consultant seen previously
• Active problems

3.4 Clinical Information:

• Referral priority (urgent/routine/2 Week Wait Cancer)
• Reason for referral
• Preliminary investigations and results, as well as management appropriate to reason for referral
• Information regarding special/social circumstances (does patient have hearing, visual, mental health difficulties or mobility impairment? Is an interpreter needed?).

Referrals should be sent to:

Referral Team
Birmingham Dental Hospital
St Chad’s Queensway
Birmingham
B4 6NN