

Guidance on Remobilisation of NHS Dental Services Practitioner Services

Revised Statement of Dental Remuneration Determination I – Amendment 145

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2. Background

PCA(D)(2020)9 issued by Scottish Government on 15 June 2020 is centred on preparing practices to resume treating patients on a phased basis.

Phase 1: Increasing capacity in Urgent Dental Care Centres (UDCCs);

Phase 2: All NHS dental practices will open to face-to-face consultation with patients who require urgent dental care that can be provided using non-aerosol generating procedures (AGPs);

Phase 3: As phase 2, but in addition practices will see patients for routine care, including examination and treatments that can be provided using non-AGPs;

Phase 4: Introduction of some AGPs to dental practices.

3. Document purpose

This document provides guidance on the treatment that can be carried out by NHS general dental practitioners and Urgent Dental Care Centres, along with details of the new triage codes within SDR145 that should be recorded.

It also provides information on other areas, including the suspension of patient and patient representative signatures, prior approval and your supplier making their new software available.

4. Where are we now?

Phase 3 is the immediate focus and from Monday 13 July 2020, NHS dental practices will be able to open more than one surgery to see NHS patients for routine care, but still without the use of aerosol generating procedures (AGPs). Practices must have certification from their NHS Board that they have all the necessary arrangements in place to move to Phase 3.

A new restricted Amendment to Determination I of the Statement of Dental Remuneration (SDR) will be published with details of the treatments that can be carried out. SDR145 will be effective from 13 July 2020 and will be available to view on <http://www.scottishdental.org/>.

For all claims with an acceptance date on or after 13 July 2020, the guidance within this document must be followed. As with SDR144, SDR145 also has a monetary value of zero for all items and patient charges.

5. NHS general dental practices

5.1 Triage of patients

When patients contact the practice and triage is carried out, this activity must be recorded and added to each claim.

The triage codes, under item 80 in SDR145, should be used to record 'Triage Activity' and the code appropriate to the result of the patient's triage must be added to each claim.

Where one dentist carries out the triage and a different dentist carries out the treatment, you should submit both the triage codes and treatment codes on the same submission.

It is possible that an item 80 code will be the only item on a submission, as you may not be able to carry out the treatment necessary within your practice.

The 'Triage Activity' codes that can be used by NHS General Dental practices are listed and explained in [Appendix A](#).

Please see below for a few examples of how to use the item 80 codes:

Scenario 1

A patient telephones the practice with a problem, but through discussion it is decided no face-to-face treatment is necessary. The patient has not been seen, they just telephoned. This is practice activity and should be recorded.

What you should do

Open a new activity record to record the activity, use the code 8001, along with any other codes necessary, eg, code 8011 for advice only, then close and transmit. If the patient has answered 'yes' to any of the questions to determine their covid status, this should be managed by the dentist through telephone triage initially.

Scenario 2.1

A patient telephones the practice complaining of pain from a broken tooth which has kept them up all night. Previously an activity record was transmitted for initial triaging and advice, with codes 8001 and 8011, but although the tooth was broken, it was asymptomatic. Discussions around current treatment options are discussed between the dentist and patient. The patient is keen to save this tooth and is prepared to wait for AGPs to become available again.

What you should do

Another activity record is created to record the activity with codes 8001 for initial telephone triaging and 8021 for advice and issuing a prescription, the case is closed and the activity record transmitted.

Scenario 2.2

The following morning the patient from scenario 2.1 contacts the practice again. The pain has become unbearable and after discussions with the dentist around treatment options currently available, the decision is made to extract the tooth. A covid assessment identifies the patient is not in the red covid pathway so they can come to the practice.

What you should do

A new activity record is created to record the activity with codes 8001 and 8061, as well as the code for an extraction. The case can be closed and the activity record transmitted.

Scenario 2.3

A covid assessment identifies from scenario 2.2 is in the red pathway so they can have to be referred to a UDCC.

What you should do

The patient is referred to a UDCC. A new activity record is created to record the activity with codes 8001 and 8031, activity record is closed and submitted.

Scenario 3

A patient has fallen and fractured an upper central incisor. They contact the practice, who complete a telephone triage and a covid assessment is completed. The patient is on the green pathway but requires an appropriate AGP.

What you should do

The patient is referred to a UDCC. A new activity record is created to record the activity with codes 8001 and 8041, activity record is closed and submitted.

Red and Green Patient Pathways

The red and green pathways referenced within Section XV of SDR 145 are intended to differentiate between the patient group where covid 19 is or may be a management issue (red Covid pathway) and where no obvious covid 19 risk factor has been identified (green Covid pathway). This relates solely to the patient's Covid status.

The decision as to which pathway the patient follows will determine whether the patient should be seen at the practice or referred to, and managed by, an Urgent Dental Care Centre (UDCC).

Note: a green pathway patient will then require a dental clinical triage to determine the appropriate options from those available. If the treatment required involves an AGP then a green pathway patient requires referral to a UDCC.

5.2 What treatments can be carried out by NHS general dental practitioners in a practice setting?**5.2.1 Patients registered within your practice**

Only the treatments listed within the following sections of SDR145 may be carried out by NHS dental practitioners treating patients who are registered with them or another dentist in their practice. Not all codes for these items have been included in SDR145, see [Appendix B](#) for full details.

Item 1 - Examination and Report

Item 2 - Procedures to Assist Diagnosis and Treatment Planning

Items 6 and 7 - Intensive Instruction in the Prevention of Dental Disease

Item 10 - Non-surgical Treatment

Item 14 - Fillings

Items 17 and 18 - Inlays and Crowns

Items 21 and 22 - Extractions
 Item 23 - Post-Operative Care
 Item 27 - Provision of Dentures
 Item 28 - Repairs and alterations to dentures
 Item 29 - Obturators, Splints and Similar Appliances other than Orthodontic Appliances
 Item 32 - Orthodontic Treatment
 Item 36 - Miscellaneous Treatments
 Item 37 - Treatment Urgently Required for Acute Conditions
 Item 41 - Capitation Payments
 Item 44 - Treatment Special to Minors
 Item 46 - Treatment on Referral:
 Item 80 - Recording of Triaging Activity

5.2.2 Patients NOT registered within your practice

Only the treatment listed within the following section of SDR145 may be carried out by NHS dental practitioners treating patients who are **NOT** registered with them or another dentist in their practice. Not all codes for these items have been included in SDR145, see [Appendix C](#) for full details.

Item 47 - Assessment and Advice
 Item 48 - Issue of a Prescription Only
 Item 49 - Radiographic Examination, Radiological Report and Colour Photographs:
 Item 50 - Dressing and palliative treatment
 Item 51 - Inlays, Crowns and Bridges
 Item 52 - Extractions of Teeth
 Item 53 - Post Operative Care
 Item 55 - Repairs and Alterations to Dentures and other Appliances
 Item 56 - Treatment Urgently Required for Acute Conditions
 Item 58 - Conservative treatment
 Item 59 - Appliances
 Item 60 - Treatment special to minors
 Item 80 - Recording of Triaging Activity

5.3 Recording treatment and submissions for SDR145

All the items within SDR145 have a monetary value of £0.00, however, all treatment carried out must still be recorded in your practice system. You must also submit electronic claims to Practitioner Services for all treatment carried out, including the new 'Triage Activity' codes.

5.4 What should I do with open courses of treatment?

Open courses of treatment started under SDR143 (or earlier SDR) can be resumed if the outstanding items of treatment are listed in SDR145 and are allowed to be performed by a NHS dental practitioner in a practice setting (see section 5.2). Patients should only be charged for treatment commenced under SDR143 (or earlier SDR).

Other open courses of treatment where the outstanding items of treatment are not allowable under SDR145 should be closed off and marked as Patient Failed to Return (PFTR) before being submitted. Treatment that has not been carried out should be removed from the submission and only the treatment carried out under SDR143 (or earlier SDR) should be submitted. If a patient has paid upfront for all planned treatment, you must provide a refund for the treatment not carried out. If a patient is due to pay, but treatment cannot be completed, they are only required to pay for treatment carried out under SDR143 (or an earlier SDR).

If you carry out treatment after 13 July 2020 for a course of treatment started under SDR143 (or earlier SDR) and the patient is liable to pay the statutory charge, normal patient charges will apply. Please see examples below:

Scenario 1

The treatment plan was created under SDR143 (or earlier SDR), with a total cost of £100 and all items of treatment are allowable from 13 July 2020 (the equivalent of those items of treatment in Amendment No.145).

The dentist completed 50% of the treatment prior to lockdown and plans to do the remaining items on or after 13 July.

What you should do

The patient can be invited back to the practice to complete the remaining items of treatment. Once treatment is completed, the case should be closed and submitted in the normal way.

If the patient is fee paying, they should pay the appropriate patient charge for the treatment completed under SDR143 (or earlier SDR), which in this example would be £80.

Scenario 2

The treatment plan was created under SDR143 (or earlier SDR), with a total cost of £200, and the dentist completed some of the treatment prior to lockdown. Some of the treatment completed prior to lockdown is **NOT** allowable from 13 July 2020 (not included in the list of treatment items in Amendment No.145)

What you should do

Crowns are **NOT** allowable from 13 July 2020 (not included in the list of treatment in items Amendment No 145), but as this treatment had already been completed, it can be included in the submission.

The remaining items of treatment that were not done prior to lockdown are allowable from 13 July 2020 (the equivalent of those items of treatment in Amendment No 145), so the patient can be invited back in to the practice to complete the treatment.

Once treatment is completed, the case should be closed and submitted in the normal way.

If the patient is fee paying, they should pay a patient charge for the treatment completed under SDR143 (or earlier SDR), which in this example would be £160.

Scenario 3

The treatment plan was created under SDR143 (or earlier SDR), with a total cost of £150, and the dentist completed some of the treatment prior to lockdown. Of the outstanding treatment items, some are allowable from 13 July 2020 and some are not.

What you should do

You can invite the patient in to carry out the treatment that is allowable from 13 July 2020 (the equivalent of those items of treatment in Amendment No.145). The treatment not allowable from 13 July should be removed from the submission before marking as PFTR and submitted in the normal way. If the patient is fee paying, they should pay a patient charge for the treatment completed under SDR143 (or earlier SDR). In this example, the completed treatment has a total cost of £100, therefore the patient charge would be £80.

Scenario 4

The treatment plan was created under SDR143 (or earlier SDR). The dentist completed an examination and took radiographs prior to lockdown but still had some additional items to complete. The additional items to complete are not allowable from 13 July 2020 (not included items of treatment in Amendment No.145), so cannot be carried out.

What you should do

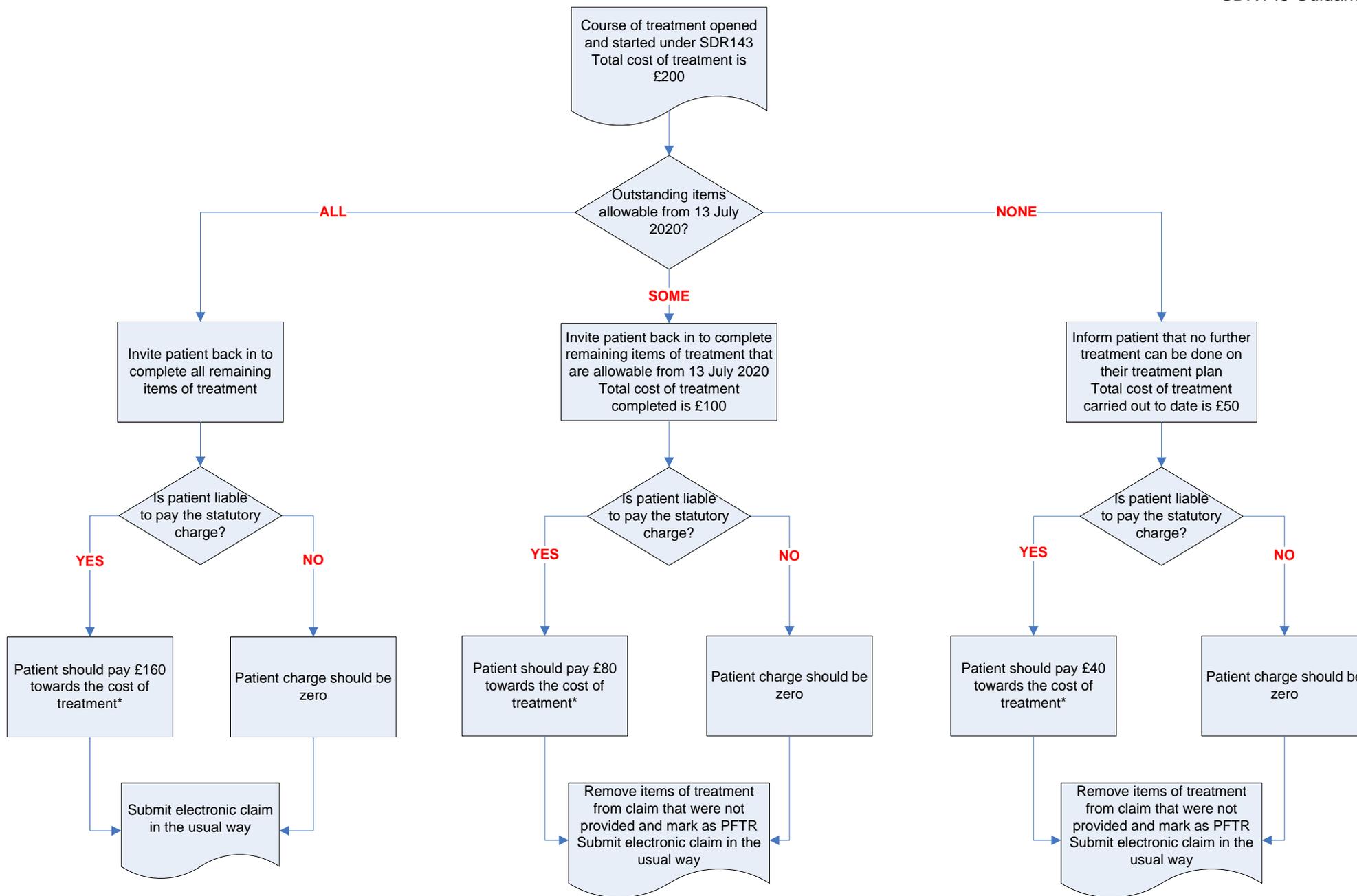
The case should be closed on the basis of the items carried out, marked as PFTR and submitted in the normal way with only the exam and radiographs claimed. The completion date entered should be the date the patient last attended for treatment prior to 23 March 2020.

The patient is liable to pay statutory charges and had not paid for the work done to date. In this scenario, the dentist should attempt to collect the patient charge.

Scenario 5

An orthodontic treatment plan was created under SDR 143 (or earlier SDR) and treatment is in progress. As long as the items of treatment are in SDR145, the patient can be invited in to continue treatment, which on completion can be submitted in the normal way. If a patient charge happens to apply this should be indicated in the submission in the usual way and normal patient charges will apply.

Please see below for a flow chart explaining what to do for various open courses of treatment:



*If patient has an HC3 certificate, the amount payable will be affected by this

5.5 Patient's signature

In order to avoid any unnecessary contact, patients are not required to sign for their treatment. This includes both the paper and electronic versions of the GP17(PR) and GP17(PR)(O) forms. You should complete the patient's signature on their behalf, marking 'Covid 19' in the signature box.

5.6 Patient exemption/remission status

You are expected to record the patient's exemption/remission status as usual, irrespective of the fact the item of service charge and patient charge in SDR145 are zero.

5.7 Patient registration

There is no change to how the patient registration details should be entered, you should still select the patient's registration details in the usual way.

New patients will be able to be registered at a practice from the effective date of Amendment 145, 13 July 2020.

Patients who are not registered anywhere can attend a NHS general dental practice and be treated under SDR 145 as an occasional patient, assuming the practice is able to see them. If the patient and dentist both agree, the patient can become registered with that practice.

5.8 Summary of changes in SDR145

- New items under item 80 to record triage activity;
- New item 14(e): stabilisation filling provided without the need of an aerosol generating procedure;
- New items 18(l)(1) and 18(l)(2): replacement of temporary bridge without use of aerosol generating procedure;
- Changes in the narratives and provisos for some items;
- Extractions have changed to 'per tooth', as there is no payment associated with the codes;
- This also affects some codes for fillings, which have changed from 'per filling' to 'per tooth', ie code 1426.
- Items 32(A)(3) and 32(A)(5) require prior approval

5.9 Updates to your practice management system (PMS)?

PMS suppliers are aware and are working on the changes.

Visit the [Covid-19 section](#) of our web site to see when your supplier has indicated they will make the update available to you. You will only be able to submit claims for treatment carried out under SDR145 when your supplier has either updated your system or made the update available to you to update your system.

If you get system updates from a download or from a disc, you will need to do this as soon as your supplier informs you the update is ready. Please note any action noted on the web site that you may need to take if there is a gap between the implementation date of SDR145 and the date and time you install the update.

5.10 Web form users

The web form has been updated with the new SDR145, so all codes within SDR145 are available for use.

5.11 Prior Approval

The only items within SDR145 that require prior approval are:

- | | |
|------------------|------------------|
| - 32(A)(3) Upper | - 32(A)(5) Upper |
| - 32(A)(3) Lower | - 32(A)(5) Lower |

6. Urgent Dental Care Centres (UDCC)

6.1 New list number

Dentists working within a UDCC will have a new list number and must record activity against this new list number when treating patients within the UDCC. This list number can be used for any claims with an acceptance date on or after 8 June 2020.

View the [guidance](#) on how the data captured prior to the UDCC list numbers being set up should be submitted.

6.2 Prisons

Activity undertaken at prisons will require that each prison is designated as a UDCC for the purposes of AGPs. Additional UDCC list numbers will need to be set up for any NHS Board with a prison and will be attached to the prison site ID (Location Number) where one has already been set up or the existing HUB site used currently.

These list numbers can only be used for claims with an acceptance date on or after 22 June 2020.

If any activity was undertaken between the start of lockdown and 22 June 2020, this will be resolved at a later date.

The status 'PDS non GDS' cannot be used with this list number type, so use 'fee paying' until further notice, as SDR144 and SDR145 both have £0 patient charge. When selecting the patient registration status, as patients are not registered to the prison dentist, the only options are 'Occasional' because the patient is not registered or 'Registered with another dentist at another practice' where the patient is registered at a general dental practice elsewhere.

6.3 Public Dental Service (PDS) routine care

Where the patient is receiving routine care, all items listed in SDR145 can be carried out.

For the foreseeable future, please ensure that routine care is submitted under the UDCC list number and not the PDS list number.

Where the treatment is of an emergency nature, for example, referred by a general dental practitioner, only treatments listed under 'Section XII(b) – Occasional Treatment – Urgent Dental Care Centre Only' can be provided, see section 6.6, below.

6.4 Patient's exemption/remission status

When recording the patient's exemption/remission status, do not use 'PDS non GDS' against this list number or your claim submissions will be rejected, the patient's correct status should be recorded.

There is no change to how the patient registration details should be entered, for example, if the patient is registered with the Public Dental Service and is seen in a UDCC, you would select 'Patient is registered with another dentist in the same practice'.

6.5 Patient registration

In the scenario where a patient is registered within the PDS service, and they are being treated at an Urgent Dental Care Centre, the claim would ordinarily be marked as 'Registered with another dentist at this practice' because all list numbers are attached to the one HUB site. We have been made aware that this causes R4+ users an issue because this does not allow the range of occasional treatments available to UDCC to be selected.

Following discussion with Carestream, some investigatory work will be undertaken to determine what would be required to remove this validation going forward. In the interim, where this scenario occurs, NHS Boards should select the option, 'Registered with another dentist at another practice'. This should open up the range of treatment that UDCCs require for selection and therefore allow the claims to be submitted. Once they reach our payment system, Midas, we perform a check to determine if a registration exists, and if so, where the patient is registered. In this scenario, where we find the patient registered to the PDS service, we amend the registration status accordingly. This results in both the payment retaining the items claimed, and ensuring that the patient remains registered with the service.

We will keep you advised of any further developments.

6.6 Triage of patients

When patients contact the UDCC and triage is carried out, this activity must be recorded and added to each claim.

The triage codes, under item 80 in SDR145, should be used to record 'Triage Activity' and the code appropriate to the result of the patient's triage must be added to each claim.

If one dentist carries out the triage and a different dentist carries out the treatment, you can submit the triage codes on the same submission as the treatment codes.

It is possible an item 80 code will be the only item on a claim, as you may not be able to carry out the treatment necessary.

The 'Triage Activity' codes that can be used by a UDCC are listed and explained in [Appendix A](#).

Please see below for a few examples of how to use the item 80 codes:

Scenario 1

A patient telephones a general dental practice and has had pain from a tooth which has kept them up all night. The pain is unbearable and after discussions with the dentist around treatment options currently available, the decision is made to extract the tooth. A covid assessment identifies the patient is in the red pathway and the patient is referred to the UDCC. Patient attends and has tooth removed.

What you should do

Open a new activity record to record the activity with codes 8081 for an aerosol generated procedure and 5212 for the extraction. Close the activity record and submit in the usual way under the UDCC list number.

Scenario 2

A patient has contacted their practice and after initial triaging it is decided they need to be referred to the UDCC for treatment. The patient attends for their appointment at the UDCC and treatment is about to begin but the patient decides at the last minute they do not wish to go ahead with the treatment.

What you should do

Open a new activity record to record the activity with code 8071, unable to deliver case - Phobia/Co-operation/Consent issue, close the activity record and submit in the usual way under the UDCC list number.

Red and Green Patient Pathway

The usage of red and green pathways may have led to confusion due to the usage of similar terminology by NHS Boards in relation to UDCCs to help manage patients' clinical dental needs, to describe the degree of urgency and associated indicative time frame that a patient requires to be seen within.

6.7 What treatments can only be carried out by Urgent Dental Care Centres?

Treatment listed within the following section of SDR145 can only be carried out by Urgent Dental Care Centres. Not all codes for these items have been included in SDR145, see [Appendix D](#) for full details.

Item 50 - Dressing of Deciduous, Permanent or Retained Deciduous Teeth and Other Palliative Treatment:

Item 52 - Extractions of teeth:

Item 57 - Domiciliary Visits and Recalled Attendance:

Item 58 - Conservative treatment:

Item 60 - Treatment Special to Minors:

Item 80 - Recording of Triaging Activity

7. Appendices

Appendix A

Triage codes

Item No.	Item description	Explanation	For use by NHS GDS or UDCC	Code	Suffix
80[A]	Initial telephone call triaging	Patient makes contact by telephone and discussion takes place with patient to determine the issues they are experiencing	Both	8001	01
80[B]	Advice and closing the case	Providing only advice to the patient, treatment is deemed not necessary and the case is closed	Both	8011	01
80[C]	Advice and a prescription - antibiotics and or analgesics Closing the Case	Providing advice to the patient, where face to face treatment is deemed not necessary but a prescription for antibiotics and or analgesics is provided and the case is closed	Both	8021	01
80[D]	Appointment for treatment arranged (further Covid triaging to determine status) Red Covid Pathway	Appointment arranged with an Urgent Dental Care Centre for a patient who has symptoms of Coronavirus or is part of a household where someone has symptoms	Both	8031	01
80[E]	Appointment for treatment arranged (further Covid triaging to determine status) Green Covid Pathway	Appointment arranged for a patient who has no symptoms of Coronavirus, is not quarantined and is in a household where no-one has symptoms	Both	8041	01
80[F]	Appointment visit (treatment) aerosol generating procedure	Appointment visit is required at an Urgent Dental Care Centre due to the need for an aerosol generating procedure, but patient has decided not to accept the appointment	Both	8051	01
80[G]	Non aerosol procedure	Providing a non-aerosol generating procedure	Both	8061	01
80[H]	Unable to deliver case - Phobia/Co-operation/Consent issue	Patient has attended for treatment and staff have donned PPE to carry out treatment, but due to issues with the patient's phobia/ cooperation/consent no treatment was provided	Both	8071	01
80[I]	Aerosol generated procedure	Have treated patient using an aerosol generating procedure	Urgent Dental Care Centres only	8081	01
80(J)	Interpreter Required	The patient requires an interpreter	Both	8082	01
80(K)	Multiple Contact with UDCC Required	Patient has contacted the UDCC a number of times after treatment has been carried out	Urgent Dental Care Centres only	8083	01
80(L)	Any Referral not included in 80[D] or [E]	Any referral to a non-Urgent Dental Care Centre setting, ie secondary care, specialist, etc	Both	8084	01
80(M)	Where the Visors being used for the patient require to be disposed of due to splatter contamination	Each visor should be used for a full session, but if it is contaminated by splatter it should be disposed of and a new visor used	Urgent Dental Care Centres only	8085	01

Appendix B**What treatments can be carried out by NHS general dental practitioners in a practice setting?****Patients registered within your practice****Section II - Diagnosis****Examination and Report:**

1(A)	1(C) (Orthodontic only)	1(D)
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Procedures to Assist Diagnosis and Treatment Planning:

2(A)(1)	2(A)(2)	2(A)(3)	2(A)(4)	2(A)(5)	2(B)	2(C)	3(A)
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Section III –Preventive Care**Intensive Instruction in the Prevention of Dental Disease:**

6	7(B)
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Section IV – Periodontal Treatment**Non-surgical Treatment:**

10(A)	10(B)	10(C)	10(C) Additional
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Section V – Conservative Treatment**Fillings:**

14(C)(2)(1)	14(E)	14(G)(1)
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Inlays and Crowns:

17(G)(1)	17(G)(2)	17(K) Crown	17(K) Inlay	18(G)(1)	18(G)(2)	18(I)(1)	18(I)(2)
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Section VI – Surgical Treatment**Extractions:**

21(1)	21(2)	22(A)(1)	22(B)	22(C) Discretionary (8)
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Post-Operative Care:

23(A)(1)	23(A)(2)	23(B)
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Section VII – Prosthesis, Obturators and Other (Non-Orthodontic) Appliances**Provision of Dentures:**

27(A)(1)	27(A)(2)	27(B)(1)	27(B)(2)	27(B)(3)	27(B)(4) Additional	27(C)(1)	27(C)(2)	27(C)(3)
27(C)(4)	27(C)(5) Additional	27(D)	27(E)	27(F)				

Repairs and alterations to dentures:

28(A)(1)	28(A)(2)	28(A)(4) Additional	28(B)(1)	28(C)(1)	28(C)(2)	28(C)(3)	28(D)(1)	28(D)(2)
28(D)(3)								

Obturators, Splints and Similar Appliances other than Orthodontic Appliances:

29(C)(1)	29(C)(4)	29(C)(5)	29(D)	29(F)
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Section VIII – Orthodontic Treatment**Orthodontic Treatment:**

32(A)(1)	32(A)(2)	32(A)(3)	32(A)(4)	32(A)(5)	32(B)(1)	32(B)(2)(1)	32(B)(2)(2)	32(B)(2)(3)
32(C)(1)	32(C)(2)	32(C)(3)	32(C)(4) Disc	32(C) Additional	32(D)(1)	32(D)(2)		32(E)(1)
32(E)(2)	32(E)(3)	32(E)(4)	32(E)(5)					

Section IX – Other Forms of Treatment**Miscellaneous Treatments:**

36(A)	36(B)	36(D)	36(E)	36(F)	36(G)
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Treatment Urgently Required for Acute Conditions:

37

Section X – Treatment under Capitation

Capitation Payments:

41(A)(ii) (SIMD 1-3)	41(A)(ii) (SIMD 4-5)	41(A)(v) (SIMD 1-3)
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Treatment Special to Minors:

44(A)	44(B)	44(C)	44(D)	44(E)	44(G)
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Section XI – Continuing Care and Patient Management

Treatment on Referral:

46

Section XV – Triage Activity

Recording of Triaging Activity

80(A)	80(B)	80(C)	80(D)	80(E)	80(F)	80(G)	80(H)	80(J)	80(L)
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Appendix C**What treatments can be carried out by NHS general dental practitioners in a practice setting?****Patients NOT registered within your practice**

Only the treatment listed within the following section of SDR145 may be carried out by NHS dental practitioners treating patients who are **NOT** registered with them or another dentist in their practice:

Section XII(a) – Occasional Treatment

Assessment and Advice:

47(A)

Issue of a Prescription Only:

48

Radiographic Examination and Radiological Report:

49(A)	49(B)	49(C)	49(D)
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Colour Photographs:

49(E)

Dressing and palliative treatment:

50(A)(1)	50(A)(2)	50(B)	50(E)(1)	50(E)(2)	50(F)	50(G)(1)	50(H)	50(I)(1)	50(I)(2)
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Inlays, Crowns and Bridges:

51(A)(1)	51(A)(2)	51(C)(1)	51(C)(2)	51(D)(1)	51(D)(2)
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Extractions of Teeth:

52(1)	52(2)	52(B)(1)
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Post Operative Care:

53(A)(1)	53(A)(2)	53(B)
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Repairs and Alterations to Dentures and other Appliances:

55(A)(1)	55(A)(2)	55(A)(4)	55(B)(1)	55(C)(1)	55(C)(2)	55(C)(3)	55(D)(1)	55(D)(2)	55(D)(3)
55(E)(1)	55(E)(2)	55(E)(3)	55(E)(4)	55(E) Additional					

Treatment Urgently Required for Acute Conditions:

56

Conservative treatment:

58(C)(2)(1)	58(E)(1)	58(G)(1)	58(G)(2)
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Appliances:

59(A)(1)	59(A)(2)	59(A)(3)	59(A)(4) Additional	59(B)(1)	59(B)(5) Additional	59(C)	59(D)	59(E)
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Treatment special to minors:

60(A)	60(C)	60(D)
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Section XV – Triage ActivityRecording of Triaging Activity

80(A)	80(B)	80(C)	80(E)	80(F)	80(G)	80(H)	80(J)	80(L)
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Appendix D**What treatments can only be carried out by Urgent Dental Care Centres?**Section XII(b) – Occasional Treatment – Urgent Dental Care Centre OnlyDressing of Deciduous, Permanent or Retained Deciduous Teeth and Other Palliative Treatment:

50(C)(1)	50(C)(2)	50(D)(1)	50(G)(2)	50(G)(3) Additional
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Extractions of teeth:

52(B)(2)(1)	52(B)(2)(2)	52(B)(2)(3)	52(B)(2)(4)
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Domiciliary Visits and Recalled Attendance:

57(A)(1)	57(A)(2)	57(A)(3)
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Conservative treatment:

58(B)(1)	58(B)(2)	58(B)(3)	58(B)(4)	58(C)(1)(1)	58(D)	58(F)(1)	58(F)(2)	58(F)(3)
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Treatment Special to Minors:

60(B)

Section XV – Triage ActivityRecording of Triaging Activity

80(A)	80(B)	80(C)	80(D)	80(E)	80(F)	80(G)	80(H)	80(I)	80(J)	80(K)	80(L)	80(M)
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