



Removal of Wisdom Teeth

Removal of wisdom teeth (third molars) **WILL NOT** be routinely funded

Surgical removal of impacted third molars **WILL ONLY** be funded where there is significant associated pathology such as unrestorable caries, non-treatable pulpal and/or periapical pathology, cellulitis, abscess and osteomyelitis, internal/external resorption of the tooth or adjacent teeth, fracture of tooth, disease of follicle including cyst/tumour, tooth/teeth impeding surgery or reconstructive jaw surgery, or when a tooth is involved in or within the field of tumour resection.

	Clinical Effectiveness	Cost Effectiveness
Strength of evidence	Inadequate	Inadequate
Comments	This policy seeks to limit funding for wisdom tooth removal to patients who will achieve significant clinical benefit from the procedure.	

Summary of evidence

National Institute of Health and Care Excellence, Guidance on the Removal of Wisdom Teeth (TA1, 2000)

<https://www.nice.org.uk/guidance/ta1>

(Note: NICE had scheduled TA1 for review with expected publication of revised guidance in June 2017. Due to competing priorities this review is currently delayed and confirmation of revised timeline is awaited [<https://www.nice.org.uk/guidance/indevelopment/gid-tag525>, accessed 6 June 2017])

Reason for Requesting a policy recommendation:

Reviewed as part of the Effective Use of Resources Project.

Where a patient is considered to have exceptional need for and capacity to benefit from a treatment that is not routinely funded, a request for individual funding may be made to the Individual Funding Requests Panel. The patient must be made aware that the Panel may not support the request and must not be given any expectation that they will be able to have the treatment until a decision to fund has been received in writing from the Panel.

For further information contact:

Tel: +44 (0)1624 642646
Email: clinicalcommissioning.dhsc@gov.im
Website: www.gov.im/dhscclinicalcommissioning

