

4 Planning periodontal treatment

The SDCEP *Prevention and Treatment of Periodontal Diseases in Primary Care* guidance was amended in November 2025. Advice on the provision of local anaesthesia by dental hygienists and dental therapists (Section 4.6.1) was updated to reflect the amended Human Medicines Regulations (Schedule 17; 2024). The amended text is shown below.

4.6.1 Prescribing and administering local anaesthesia

Local anaesthesia may be beneficial for some patients during non-surgical periodontal therapy and dentists, dental hygienists and dental therapists are allowed, under their scope of practice, to administer it during treatment. As local anaesthetic is a prescription-only medicine, it must be prescribed by a doctor or dentist, or be administered by a dental hygienist or dental therapist trained under exemptions to the Human Medicines Regulations (Schedule 17)*.

Where a dental hygienist or dental therapist is not appropriately trained under the exemptions mechanism, a Patient Specific Direction (PSD), where a dentist prescribes local anaesthetic for use by the dental hygienist or dental therapist, is required.[§] The PSD should be recorded in the case notes by the prescribing dentist and should include:

- type of anaesthesia (i.e. brand or generic name, strength);
- maximum dosage (i.e. maximum number of cartridges);
- frequency (e.g. as required);
- route of administration (e.g. by injection).

* The amended Human Medicines Regulations (Schedule 17; 2024) include an exemptions mechanism that allows for dental hygienists or therapists with appropriate training to independently provide local anaesthetic which can be used whilst treating their patient.

[§] Previously, there was provision for local anaesthetic to be used by a dental hygienist or dental therapist under a Patient Group Direction (PGD), a written instruction which allowed listed healthcare professionals to sell, supply or administer named medicines in an identified clinical situation without the need for a written, patient-specific prescription from an approved prescriber. The introduction of the exemptions mechanism means that PGDs should no longer be used for the supply or administration of the listed medicines (i.e. local anaesthetic). Where a PGD is currently used to supply and administer local anaesthetic, practice owners should put in place plans to transition to working under Patient Specific Direction (PSD) or the exemptions mechanism. PGDs cannot be renewed or replaced for listed medicines once expired (maximum 3 years from authorisation).

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If a patient is referred to a dental hygienist or dental therapist who is not working under direct access:

- Ensure the dental team are familiar with the most recent scope of practice for both dental hygienists and dental therapists.
- Ensure that an individualised treatment plan that is specific to the patient has been provided by the referring dentist.
 - Should treatment needs change or differ from the original treatment plan, the dental hygienist or dental therapist should liaise with the referring dentist to confirm any changes.
 - If local anaesthesia is required and the dental hygienist or dental therapist is not appropriately trained to independently provide this under the exemptions mechanism, the referring dentist should provide a valid prescription in the case notes so that the dental hygienist or dental therapist can administer it.
- Ensure that the patient is aware why they have been referred to the dental hygienist or dental therapist and what to expect during treatment.
- Ensure that arrangements for post treatment reassessment are agreed; reassessment can be performed by the dental hygienist, dental therapist or dentist.