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An audit on planning First Permanent Molar extractions in Paediatric patients

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**Background:** Children often present with one or more first permanent molars (FPM) of poor prognosis requiring enforced extraction. Multidisciplinary planning with regards to extraction timing and the need for elective extractions is often required. The Royal College of Surgeons England (RCS) offers guidance on FPM extractions in children.

**Aim:** To evaluate whether treatment-planning of FPM extractions performed at our department are in accordance with the RCS guideline.

**Standards:** Treatment planning of FPM extractions should include clinical, radiographic, and orthodontic assessment in 100% of planned FPM extractions and performed in line with RCS guideline.

**Method:** The dental records of children who had extraction of one or more FPM on GA exodontia lists were examined in two 6-month cycles. Recording of key indicators of full assessment according to the RCS guidelines were analysed. Results dissemination and education were provided between the cycles.

**Results:** Analysis of 52 dental records (20 first cycle; 32 second cycle) highlighted poor documentation and compliance with RCS guidelines in both cycles. No records demonstrated 100% compliance of all the standards.

**Discussion/Recommendations/action plan:** The guidelines may be challenging to apply in a busy clinical setting; especially where junior staff are likely to be involved in planning of such cases. A FPM treatment-planning proforma aiming to help clinicians record and plan FPM extractions was developed, piloted and introduced. Auditing FPM extraction following use of the new proforma is planned.

**Conclusion:** This audit highlights the need for clinicians to improve assessment and planning of children requiring FPM extractions.