

**Case 200501033: A Dental Practitioner in the Lothian NHS Board area**

**Introduction**

1. On 13 September 2005 the Ombudsman received a complaint from a woman (referred to in this report as Ms C) that her dentist (the dentist) had failed to provide her with dental bridgework which was identical to her original teeth as had been promised and agreed. The complaint which I have investigated concerned the dentist's failure to provide dental bridgework to an acceptable standard. Following the investigation of all aspects of this complaint I did not uphold the complaint (see paragraph 8).

**Investigation and findings of fact**

2. The investigation of this complaint involved obtaining and reading all the relevant documentation, dental records and complaint file. I obtained advice from the dental adviser to the Ombudsman (the advisor). I made a written enquiry of the dentist. I have not included in this report every detail investigated but I am satisfied that no matter of significance has been overlooked. Ms C and the dentist have been given an opportunity to comment on the draft of this report.

**Failure to provide dental bridgework to an acceptable standard as had been agreed**

3. Ms C first raised her concerns (through the Board) about her dental treatment in a letter dated 19 May 2005. She said that the agreement was that the dentist would replace the original bridge, which had been fitted by another dentist, and that it would look identical except that one of the teeth would be slightly smaller. Ms C complained that the replacement bridges provided by the dentist were not acceptable to her. They required excessive drilling and affected her bite. The dentist had not made a tooth smaller as agreed and Mrs C had been left with a badly-fitting, makeshift, misshapen crown at the back. Ms C sent in a further letter of complaint after a consultation on 1 June 2005, when the dentist produced a fourth bridge which also was not acceptable to Ms C. She complained it gave her a 'goofy' appearance and she was still left with the crown which had been destroyed by excessive drilling.

4. The dentist responded to the complaint in a letter dated 4 July 2005. He explained that he had delayed responding to the complaint as he was still treating Ms C on 16 June 2005. He outlined the treatment which had been provided (the fitting of two bridges and the crown to the upper left side) and that Ms C had confirmed she was happy with the appearance of the bridges and crown prior to being cemented in on 10 March 2005. Ms C complained about the upper left canine tooth bridge on 21 March 2005 and he removed it for a replacement to be made at the dental laboratory. The bridge was removed on 19 April 2005, impressions were taken for a new bridge and a temporary bridge was fitted. The dentist stated in his response that Ms C also asked for the upper left canine tooth on the bridge to be a mirror image of the upper right canine tooth. On 4 May 2005 the new bridge was not fitting properly and new impressions were taken so the laboratory could remake the bridge. The dentist indicated that Ms C also complained about the other bridge and some adjustment was made. A subsequent bridge was fitted on 18 May 2005. Ms C was not happy with the appearance and felt the teeth were not prominent enough. It was remade on 1 June 2005. When the dentist had tried to fit it, Ms C said she felt the teeth were too large and sticking out too much. The fifth bridge was fitted on 16 June 2005 and, although an improvement was noted, Ms C complained that her natural teeth were more tapered. The dentist then fitted the bridge with temporary cement and sought a second opinion from a Dental Reference Officer. (Note: Dental Reference Officers are employed by the Scottish Dental Reference Service and part of their role is to provide an opinion on the standard of dental treatment provided by a dentist.)

5. The adviser noted from the dental records that the treatment plan was to provide Ms C with a fixed bridge. Bridgework is fixed and is not removable at will by a patient. There are different designs of bridgework available for different clinical situations and Ms C was provided with two bridges of an appropriate design. If a patient is missing one or more teeth and there is at least one serviceable tooth on either side of the space where the tooth or teeth are missing then a treatment option is for a fixed bridge to replace the missing tooth or teeth. On 15 January 2005 a treatment plan was discussed but it is not possible to establish exactly what was agreed at that visit as no treatment options were recorded on the record card. Treatment was commenced and the final crowns and bridges were fitted on 10 March 2005. The records shows that Ms C returned on 21 March 2005 and that she was unhappy with the appearance of the upper left

canine tooth and the upper left first premolar tooth. The record states that Ms C was advised that to remake the bridge was the only option.

6. The adviser commented that communication is the key to meet a patient's expectation regarding the outcome of a fixed bridge. Prior to the final cementation of the bridge, a patient is given the opportunity to look at the bridge in a mirror and, in his opinion, a dentist would not permanently cement the bridge unless the patient was satisfied with the outcome. Once a bridge has been cemented then the only option is to remake the bridge which is unsatisfactory for both the patient and the dentist. It would appear that, despite all attempts by the dentist to achieve a satisfactory aesthetic outcome, Ms C remained unhappy with the appearance.

7. The adviser also mentioned the Dental Reference Officer's detailed report, which said that the appearance of the quadrant (the side where the bridge was fitted) as seen following restoration was within an acceptable norm. Assessment of the appearance in comparison with the previous appearance cannot be given retrospectively. The extent of the adjustments seen was not considered excessive, even taking into account the patient's concerns that the adjustments felt unnatural. The report noted that the patient had very strong concerns which would have had an impact on the response to treatment provided. In view of this, the practitioner may have wished to consider referring the patient for a specialist opinion to review possible further treatment. The adviser was of the opinion that the dentist tried very hard to provide a bridge that was of acceptable appearance for Ms C and that he did his best but was unable to achieve an outcome that was acceptable to Ms C.

*Failure to provide dental bridgework to an acceptable standard as had been agreed: Conclusions*

8. Ms C was not satisfied with the standard of bridgework which the dentist had provided and complained the appearance did not match what was agreed at the outset. The dentist made numerous alterations to the bridgework provided to Ms C but none were acceptable to her and he arranged for the Dental Reference Officer to provide a second opinion. The Dental Reference Officer's report stated that the appearance of the bridgework was within an acceptable norm and the extent of the adjustments was not considered excessive, even taking into consideration the patient's concerns that the adjustments felt unnatural. The adviser is in agreement

with the Dental Reference Officer's comments and is of the view that the dentist had provided reasonable treatment and had tried hard to please Ms C.

9. I have taken the adviser's advice into account and I have formed the opinion that the standard of the bridgework provided by the dentist was reasonable. However, it is clear that Ms C was not satisfied that the appearance was what was agreed at the beginning of the treatment. It is unfortunate that the dentist has not documented what was discussed at the outset, as that would have provided some clarity. I have drawn this to the dentist's attention. Nevertheless, the dentist has taken action by replacing and adjusting the bridgework on many occasions in an effort to satisfy Ms C. I have, therefore, decided not to uphold the complaint.

27 June 2006

**Explanation of abbreviations used**

Ms C	The complainant
The dentist	The dentist who provided Ms C with dental treatment
The advisor	The dental advisor to the Ombudsman