DENTITION:
Primary Dentition: Teeth developed and erupted first in order of time.

Transitional Dentition: The final phase of the transition from primary to adult teeth, in which the deciduous molars and canines are in the process of shedding and the permanent successors are emerging.

Adolescent Dentition: The dentition that is present after the normal loss of primary teeth and prior to cessation of growth that would affect orthodontic treatment.

Adult Dentition: The dentition that is present after the cessation of growth that would affect orthodontic treatment.

All of the following orthodontic treatment codes may be used more than once for the treatment of a particular patient depending on the particular circumstance. A patient may require more than one interceptive procedure or more than one limited procedure depending on their particular problem.

LIMITED ORTHODONTIC TREATMENT:
Orthodontic treatment with a limited objective, not necessarily involving the entire dentition. It may be directed at the only existing problem, or at only one aspect of a larger problem in which a decision is made to defer or forego more comprehensive therapy.

D8010 Limited orthodontic treatment of the primary dentition
D8020 Limited orthodontic treatment of the transitional dentition
D8030 Limited orthodontic treatment of the adolescent dentition
D8040 Limited orthodontic treatment of the adult dentition

INTERCEPTIVE ORTHODONTIC TREATMENT:
Interceptive orthodontics is an extension of preventive orthodontics that may include localized tooth movement. Such treatment may occur in the primary or transitional dentition and may include such procedures as the redirection of ectopically erupting teeth, correction of dental cross bite or recovery of space loss where overall space is inadequate. When initiated during the incipient stages of a developing problem, interceptive orthodontics may reduce the severity of the malformation and mitigate its cause. Complicating factors such as skeletal disharmonies, overall space deficiency, or other conditions may require subsequent comprehensive therapy.

D8050 Interceptive orthodontic treatment of the primary dentition
D8060 Interceptive orthodontic treatment of the transitional dentition

COMPREHENSIVE ORTHODONTIC TREATMENT:
Comprehensive orthodontic care includes a coordinated diagnosis and treatment leading to the improvement of a patient’s craniofacial dysfunction and/or dentofacial deformity which may include anatomical, functional and/or aesthetic relationships. Treatment may utilize fixed and/or removable orthodontic appliances and may also include functional and/or orthopedic appliances in growing and non-growing patients. Adjunctive procedures to facilitate care may be required. Comprehensive orthodontics may incorporate treatment phases focusing on specific objectives at various stages of dentofacial development.

D8070 Comprehensive orthodontic treatment of the transitional dentition
D8080 Comprehensive orthodontic treatment of the adolescent dentition
D8090 Comprehensive orthodontic treatment of the adult dentition

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ORTHODONTIC CODES

MINOR TREATMENT TO CONTROL HARMFUL HABITS:

D8210 Removable appliance therapy - Removable indicates patient can remove; includes appliances for thumb sucking and tongue thrusting.

D8220 Fixed appliance therapy - Fixed indicates patient cannot remove appliance; includes appliances for thumb sucking and tongue thrusting.

OTHER ORTHODONTIC SERVICES AND ANCILLARY CODES:

D8660 Pre-orthodontic treatment examination to monitor growth and development – Periodic observation of patient dentition, at intervals established by the dentist, to determine when orthodontic treatment should begin. Diagnostic procedures are documented separately.

D8670 Periodic orthodontic treatment visit

D8680 Orthodontic retention (removal of appliances, construction and placement of retainer(s))

D8681 Removable orthodontic retainer adjustment

D8690 Orthodontic treatment (alternative billing to a contract fee) – Services provided by dentist other than original treating dentist. A method of payment between the provider and responsible party for services that reflect an open-ended fee arrangement.

D8691 Repair of orthodontic appliance – Does not include bracket and standard fixed orthodontic appliances. It does include functional appliances and palatal expanders.

D8692 Replacement of lost or broken retainer

D8693 Re-cement or re-bond fixed retainer

D8694 Repair of fixed retainers, includes reattachment

D8999 Unspecified orthodontic procedure, by report – Used for procedure that is not adequately described by a code. Describe procedure.

D0150 Comprehensive oral evaluation – new or established patient – Used by a general dentist and/or a specialist when evaluating a patient comprehensively. This applies to new patients; established patients who have had a significant change in health conditions or other unusual circumstances, by report, or established patients who have been absent from active treatment for three or more years. It is a thorough evaluation and recording of the extraoral and intraoral hard and soft tissues. It may require interpretation of information acquired through additional diagnostic procedures. Additional diagnostic procedures should be reported separately. This includes an evaluation of oral cancer where indicated, the evaluation and recording of the patient’s dental and medical history and a general health assessment. It may include the evaluation and recording of dental caries, missing or unerupted teeth, restorations, existing prosthesis, occlusal relationships, periodontal conditions (including periodontal screening and/or charting), hard and soft tissue anomalies, etc.

D0330 Panoramic radiographic image

D0340 2D Cephalometric radiographic image – acquisition, measurement and analysis – Image of the head made using a cephalostat to standardize anatomic positioning, and with reproducible x-ray beam geometry.

D0350 2D oral/facial photographic image obtained intra-orally or extra-orally

D0351 3D photographic image – This procedure is for dental or maxillofacial diagnostic purposes. Not applicable for a CAD-CAM procedure.

D0364 Cone beam CT capture and interpretation with limited field of view – less than one whole jaw

D0365 Cone beam CT capture and interpretation with field of view of one full dental arch – mandible

D0366 Cone beam CT capture and interpretation with field of view of one full dental arch – maxilla, with or without cranium

D0367 Cone beam CT capture and interpretation with field of view of both jaws; with or without cranium

D0368 Cone beam CT capture and interpretation for TMJ series including two or more exposures

D0380 Cone beam CT image capture with limited field of view – less than one whole jaw (image capture only)

D0381 Cone beam CT image capture with field of view of one full dental arch – mandible (image capture only)

D0382 Cone beam CT image capture with field of view of one full dental arch – maxilla, with or without cranium (image capture only)

D0383 Cone beam CT image capture with field of view of both jaws, with or without cranium (image capture only)

D0384 Cone beam CT image capture for TMJ series including two or more exposures (image capture only)

D0470 Diagnostic casts – Also known as diagnostic models or study models.

D7292 Placement of temporary anchorage device [screw retained plate] requiring flap; includes device removal

D7293 Placement of temporary anchorage device requiring flap; includes device removal

D7294 Placement of temporary anchorage device without flap; includes device removal

D7860 Occlusal orthotic device, by report – Presently includes splints provided for treatment of temporomandibular joint dysfunction.

D7881 Occlusal orthotic device adjustment

D9450 Case presentation, detailed and extensive treatment planning – Established patient. Not performed on same day as evaluation

D9450 Occlusal guard, by report – Removable dental appliances, which are designed to minimize the effects of bruxism (grinding) and other occlusal factors.

D9971 Odontoaplasty 1 – 2 teeth; includes removal of enamel projections.