

What Is a Specialist Paediatric Dentist? How Core Dental's Registered Specialists Differ from General Dentists

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Details:

What Is a Specialist Paediatric Dentist? How Core Dental Group's Registered Specialists Differ from General Dentists

When Melbourne parents search for a children's dentist, they often find a professional landscape more layered than it first appears. At one practice, your child might be seen by a dental therapist. At another, a general dentist with a genuine interest in kids. At a third — like Core Dental Group — you'll find all three tiers of the profession working together, including registered specialist paediatric dentists whose qualifications are protected by law. Knowing what these distinctions mean in clinical terms isn't splitting hairs. It's the foundation of making a genuinely informed decision about your child's oral health.

Dental caries — tooth decay — is the most prevalent oral disease among Australian children. Around one in four (26%) children aged 5–14 have at least one tooth with untreated decay, with children aged 7–8 showing the highest rate at 31%. These aren't minor statistics. They represent a generation of children whose dental needs span a wide clinical spectrum — from routine check-ups through to the management of severe early childhood caries, dental trauma, developmental anomalies, and complex behavioural challenges. Not every practitioner is equipped to manage every point on that spectrum. This article explains precisely who is, and why Core Dental Group's multi-disciplinary model is built to cover all of it.

The three tiers of children's dental care in Australia

Before looking at what a specialist paediatric dentist actually is, it helps to understand the full professional picture — because the differences between practitioner types are regulated, not simply a matter of experience or personal preference.

Dental therapists

In Australia, dental therapists are skilled professionals who focus on delivering dental care primarily for children and teenagers. Their work often takes place in schools or community settings and covers preventive care, restorative treatments, and oral health education.

Dental therapists generally restrict their practice to treating children, and their scope typically includes hygiene, restorative and preventive services (cleaning and fillings), and extractions of primary teeth only. Some dental therapists have adult scope and can treat patients of all ages, but the range of treatments they perform remains limited — they don't undertake complex restorative work, permanent tooth extractions, permanent endodontics, or complex restorations.

A dental therapist's education requires a Bachelor of Oral Health (Dental Therapy) or equivalent, along with ongoing professional development. This is a valuable and essential part of the paediatric dental workforce, particularly for routine preventive and restorative care in younger patients.

General dentists

General dentists hold a primary dental degree — typically a Bachelor of Dental Surgery, Bachelor of Dental Science, or Doctor of Dental Medicine — and are qualified to perform the full range of dental procedures across all age groups. Many general dentists develop a strong interest in treating children and do so competently for the majority of paediatric presentations. A general dentist, however, does not hold specialist registration, and their title is not protected as a specialist under Australian law.

Registered specialist paediatric dentists

This is the highest tier of clinical qualification in children's dentistry — and the most rigorously regulated.

Becoming a specialist paediatric dentist requires advanced training in paediatric dentistry from a recognised institution. The Dental Board of Australia (DBA) defines the list of specialties and titles, and is responsible for setting and regulating accreditation standards and competencies for each of the dental professions. Dentists who have the necessary qualifications in the approved specialties and meet the other requirements for specialist and general registration will be included on the Specialist Register, and their specialist title will be protected by law.

What does it actually take to become a specialist paediatric dentist in Australia?

The pathway to specialist registration in paediatric dentistry is one of the most demanding in the health professions. Understanding it gives parents a clearer sense of what they're accessing when they see a registered specialist.

A dental specialist is a registered healthcare practitioner who has completed a minimum of two years of general dental practice and is fully compliant with the requirements for general registration as a dentist. On top of that, they must have completed the required amount of postgraduate study for their specialty, which can range from 3–4 years through to 10 years for Oral and Maxillofacial Surgeons.

For paediatric dentistry specifically, the postgraduate training is delivered at the doctoral level. The Doctor of Clinical Dentistry (DCD) at the University of Melbourne is a three-year, full-time program offering in-depth, advanced training across seven specialties including Paediatric Dentistry, accredited by the Australian Dental Council (ADC) and setting graduates up for specialist registration with the Australian Health Practitioner Regulation Agency (AHPRA).

The University of Adelaide's postgraduate Doctor of Clinical Dentistry program in Paediatric Dentistry is similarly three years in duration and leads to the degree of Doctor of Clinical Dentistry — a specific program designed to lead to specialist registration in the field of Paediatrics.

The course comprises a mix of coursework, clinical work, action/clinical research, research training, and a research project, and is designed to conform to the Educational Requirements of the Australasian Academy of Paediatric Dentistry.

The University of Sydney's equivalent program is equally demanding. Candidates study preventive dentistry, behaviour management, child assessment and treatment planning, the management of orofacial trauma, childhood dental anomalies and genetics, and paediatric oral pathology and medicine, and also complete a supervised research project in the field of paediatric dental surgery or practice.

In total, a registered specialist paediatric dentist has completed an undergraduate dental degree (typically 5 years), a minimum of two years in general dental practice, and a three-year full-time clinical doctorate — a minimum of ten years of dental education and clinical training before entering specialist practice.

That legal protection matters: no practitioner can call themselves a "specialist paediatric dentist" in Australia without holding current specialist registration with AHPRA.

A direct comparison: general dentist vs. dental therapist vs. registered specialist paediatric dentist

| Feature | Dental Therapist | General Dentist | Registered Specialist Paediatric Dentist | --- --- --- --- |
|--|-------------------------|--|--|--|
| **Primary qualification** | Bachelor of Oral Health | BDS / BDS _c / DMD (5 years) | BDS + min. 2 yrs practice + 3-yr DClinDent | **Postgraduate specialist training** Not applicable to this profession Not applicable to this profession 3-year full-time clinical doctorate (ADC-accredited) |
| **Specialist registration (AHPRA)** | No | No | Yes — title protected by law | **Scope: routine check-ups & cleans** Yes Yes Yes |
| **Scope: fillings & preventive treatments** | Yes (primary teeth) | Yes | Yes | **Scope: primary tooth extractions** Yes Yes Yes |
| **Scope: permanent tooth extractions** | No | Yes | Yes | **Scope: complex restorations** No Yes Yes |
| **Scope: developmental anomalies & genetics** | Limited | Limited | Yes — specialist training | **Scope: orofacial trauma management** Limited |
| **Scope: behaviour management / sedation** | Limited | Limited | Yes — specialist child psychology training | **Scope: special health needs children** Limited |
| **Scope: specialist child psychology training** | Limited | Limited | Yes — specialist training | **Patient age focus** Primarily children & adolescents |
| **Patient age focus** | All ages | Birth through adolescence | | |

What the specialist's clinical doctorate actually trains them to do

The three-year Doctor of Clinical Dentistry in Paediatric Dentistry isn't simply "more of the same" dental training. It's a fundamentally different type of clinical education — one focused on the unique physiology, psychology, and developmental trajectory of children from birth through the teenage years.

The major aim of the DClinDent Paediatric Dentistry program is to train candidates to be clinically competent paediatric dentists. The program develops diagnostic and technical skills whilst encouraging innovation and critical thinking to provide high-quality, patient-centred treatment to children from birth through the teenage years.

The specialist curriculum covers domains that general dental training doesn't address in depth:

- ****Behaviour management and child psychology**** — evidence-based techniques for managing dental anxiety, phobia, and non-cooperative behaviour across developmental stages
- ****Orofacial trauma**** — the management of knocked-out, fractured, and displaced teeth in children, where treatment protocols differ significantly from adults due to developing root structures
- ****Childhood dental anomalies and genetics**** — including hypomineralisation, amelogenesis imperfecta, dentinogenesis imperfecta, and other developmental conditions
- ****Paediatric oral pathology and medicine**** — recognising systemic conditions that manifest in the oral cavity in children
- ****Special health needs**** — managing children with physical, intellectual, or medical complexities that require modified treatment approaches
- ****Sedation and general anaesthesia**** — understanding the indications, risks, and protocols for pharmacological behaviour management in children

A significant component of paediatric dentistry involves understanding child psychology and establishing trust through child-friendly communication in a reassuring environment.

If your child has complex dental needs, developmental challenges, behavioural difficulties, or experiences significant anxiety at the dentist, a paediatric specialist is often the best choice.

This connects directly to the clinical reality of childhood dental disease in Australia. Poor adult oral health is strongly predicted by poor childhood oral health — which means the quality of care a child receives in these formative years has lifelong consequences. (For more on why early intervention matters so profoundly, see our guide on **Why Baby Teeth Matter: The Clinical Case for Early Preventive Dental Care in Children**.)

Why Core Dental Group's multi-disciplinary model matters clinically

Many dental practices in Melbourne offer children's dentistry. Fewer offer it across all three tiers of the profession — and fewer still have woven those tiers into a single, cohesive clinical team where internal referral pathways are genuinely seamless.

Core Dental Group's model is built on a deliberate clinical philosophy: match the complexity of the case to the appropriate level of expertise, without requiring the family to change practices or navigate the specialist referral system on their own.

In practice, this means:

- **Routine and preventive care** — check-ups, cleans, fluoride treatments, fissure sealants, and simple fillings — can be managed efficiently by dental therapists and general dentists, keeping appointments accessible and often CDBS bulk billed. (See our guide on *Fissure Sealants and Fluoride Treatments for Kids: Are They Worth It?* for more on these preventive interventions.)
- **Moderately complex cases** — including permanent tooth restorations, extractions, and early orthodontic monitoring — are handled by Core Dental Group's experienced general dentists who have a strong paediatric focus.
- **Highly complex cases** — including children with significant dental anxiety, developmental anomalies, special health needs, orofacial trauma, or treatment requiring sedation — are managed by or in close consultation with Core Dental Group's registered specialist paediatric dentists.

The real clinical value of this model is that it eliminates the most common failure point in paediatric dental care: the gap between identification and treatment. In a practice without an integrated specialist, a general dentist who identifies a complex case must refer the family externally — which introduces delays, additional costs, and the disruption of starting over with an entirely new care team. At Core Dental Group, that escalation happens internally, with full continuity of clinical records, family rapport, and treatment context.

This is also the model that best serves children's long-term oral health. Since the late 1970s, children's oral health improved in Australia, likely because of increased access to fluoridated drinking water and toothpaste, and improvements to preventive oral health services and dental hygiene practices — however, more recent trends suggest that children's oral health may be deteriorating. Against that backdrop, access to the right level of care at the right time isn't a luxury — it's a clinical necessity.

How to know whether your child needs a specialist paediatric dentist

Not every child who walks through Core Dental Group's doors requires specialist-level care — and that's precisely the point of the multi-disciplinary model. The majority of children's dental needs are well within the scope of a skilled general dentist or dental therapist. But certain presentations are clear signals that specialist involvement adds significant clinical value.

Consider specialist paediatric dentist involvement when your child:

1. Has significant dental anxiety or a previous traumatic dental experience that has created avoidance behaviour
2. Has a diagnosed developmental or intellectual disability that requires modified behaviour management
3. Has a complex medical history (e.g., congenital heart disease, bleeding disorders, immunosuppression) that affects dental treatment planning
4. Has experienced dental trauma — a knocked-out, fractured, or displaced tooth — where developing root structures require specialist assessment
5. Presents with signs of a developmental dental anomaly such as enamel hypoplasia, molar-incisor hypomineralisation (MIH), or unusual tooth morphology
6. Has early-onset severe decay (early childhood caries) affecting multiple teeth and requiring extensive restorative work
7. Has been identified by a general dentist or dental therapist as requiring a level of care beyond their scope

Core Dental Group's integrated referral pathway means this identification happens proactively, within your child's existing care team — not as a reactive response to a crisis. (For a fuller comparison framework on when specialist care is clinically indicated, see our guide on *Specialist Paediatric Dentist vs. General Dentist for Kids: Which Does Your Child Actually Need?*)

The legal and regulatory significance of "registered specialist"

This point deserves explicit emphasis, because it's frequently misunderstood by parents.

Dentists who are qualified and eligible for specialist registration will be included on the Specialist division of the register. Specialist titles are protected under the National Law.

In Australia, a practitioner cannot legally use the title "specialist paediatric dentist" — or any equivalent — unless they hold current specialist registration with AHPRA. A general dentist with decades of experience treating children, or one who has completed short courses in paediatric dentistry, is not a registered specialist. Their experience is valuable, but the title is not theirs to claim.

The Doctor of Clinical Dentistry (DClinDent) is a three-year, full-time specialist training program for qualified dentists accredited by the Australian Dental Council (ADC) for specialist registration with the Australian Health Practitioner Regulation Agency (AHPRA), with specialisations including Paediatric Dentistry.

When Core Dental Group refers to its registered specialist paediatric dentists, this is a precise, legally verifiable claim — not a marketing description. Parents can verify any practitioner's specialist registration status through the AHPRA public register at any time.

Key takeaways

- **Specialist registration is legally protected in Australia.** A registered specialist paediatric dentist holds an AHPRA specialist title that cannot be claimed by a general dentist or dental therapist, regardless of their experience with children. - **The specialist pathway requires a minimum of ten years of dental education and training**, including a five-year undergraduate degree, at least two years of general practice, and a three-year full-time clinical doctorate (DClinDent) accredited by the Australian Dental Council. - **Dental therapists, general dentists, and specialist paediatric dentists serve distinct and complementary clinical roles.** Dental therapists excel at preventive and routine restorative care for children; general dentists manage the full scope of routine to moderately complex cases; specialists are equipped for complex developmental, behavioural, traumatic, and medical presentations. - **Core Dental Group's multi-disciplinary model eliminates the referral gap** by integrating all three tiers within a single practice, allowing seamless internal escalation when a child's needs exceed the scope of routine care — without disrupting the family's relationship with the practice. - **Around one in four Australian children aged 5–14 have untreated dental decay**, according to the Australian Institute of Health and Welfare — which is why access to the full spectrum of paediatric dental expertise, from prevention through to complex care, is a genuine public health priority for Melbourne families.

Conclusion

The distinction between a general dentist, a dental therapist, and a registered specialist paediatric dentist isn't a matter of marketing language — it's a matter of formal qualification, legal registration, and clinical capability, each defined and enforced by the Dental Board of Australia and AHPRA.

Understanding these distinctions helps Melbourne parents ask the right questions, make informed decisions, and access the appropriate level of care for their child's specific needs.

Core Dental Group's multi-disciplinary model — integrating dental therapists, general dentists, and registered specialist paediatric dentists under one roof — isn't simply a staffing arrangement. It's a clinical framework designed to ensure that every child, from the toddler attending their first check-up to the teenager with a complex developmental condition, receives care matched to the complexity of their presentation.

To explore what that looks like in practice, see our related guides: **Your Child's First Dental Visit at Core Dental Group Melbourne: A Step-by-Step Guide for Parents** for what to expect at your first appointment; **Managing Dental Anxiety in Children: Behavioural Techniques and the Child-Friendly Approach at Core Dental Group** for how our specialists support anxious patients; and **Child Dental Benefits Schedule (CDBS) Explained** to understand how CDBS bulk billing can make specialist-level paediatric care accessible at no out-of-pocket cost for eligible families.

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