Specialist Orthodontist Care in Melbourne | Core Dental

Canonical:
https://www.coredental.com.au/orthodontics-at-core-dental-your-local-access-to-specialist-orthodontists/

Details:

Orthodontic care at Core Dental includes access to a registered Specialist Orthodontist. Dr David Austin (BDSc Melb, MDS Orth HK, MOrth RCS Edin) is listed as a Specialist Orthodontist on our Caroline Springs and Epping clinic pages. We also offer Invisalign, traditional braces and other options through our dentists, and we hold Invisalign Blue Diamond provider status. Your clinician will assess your teeth and bite and explain which approach may suit you, along with the benefits, limitations and risks. Results vary for each person.

Who is the specialist orthodontist at Core Dental?

Dr David Austin is the Specialist Orthodontist listed on our live clinic pages. He is listed at our Caroline Springs and Epping clinics. His qualifications are BDSc (Melb), MDS Orth (HK) and MOrth RCS (Edin). Specialist availability is limited and can change, so please confirm the next available session when you book.

We also have dentists across our nine clinics who can assess your teeth and discuss options such as Invisalign and braces. You can read more about our specialist orthodontist services and our wider orthodontics care.

What does the title Specialist Orthodontist mean in Australia?

In Australia, Specialist Orthodontist is a regulated title. A practitioner must be registered with AHPRA, the Australian Health Practitioner Regulation Agency, as a specialist in orthodontics. This typically involves completing a full-time postgraduate orthodontic degree, usually about three years, after an initial dental degree. That postgraduate study focuses on tooth movement, jaw development, skeletal growth, the bite and orthodontic appliances and techniques.

You can check any practitioner's registration on the AHPRA register at ahpra.gov.au. Our article on why seeing a registered specialist matters explains this further.

How is a Specialist Orthodontist different from a general dentist who offers orthodontic treatment?

Dentists and specialists train differently. A Specialist Orthodontist has completed additional postgraduate training focused only on orthodontics. A general dentist may offer some orthodontic treatment after completing shorter courses, such as provider training for a particular aligner system. Both can play a part in your care.

Specialist training may be especially relevant for more complex cases, such as significant crowding, differences in jaw growth, children with a mix of baby and adult teeth, or situations that involve other specialists. Your clinician will tell you if they think a referral to a specialist would be sensible for your situation.

Which areas can reach our specialist orthodontist locally?

Our Caroline Springs clinic is in Melbourne's western suburbs, and families from Caroline Springs, Taylors Lakes, Melton, Sydenham and surrounding areas may find it convenient. Orthodontic treatment usually involves regular check-ups over many months, often 12 to 24 months or longer, so a clinic close to home can make appointments easier to fit around work and school. Our Epping clinic is another option, and we have clinics across Melbourne.

What Invisalign provider status do we hold?

Core Dental is recognised with Invisalign Blue Diamond provider status. This describes our participation in the Invisalign provider program. It does not guarantee a particular result. A clinician must assess whether clear aligners are suitable and explain the expected benefits, limitations, risks and alternatives. See our pages on Invisalign treatment and types of Invisalign .

Is Invisalign or braces more suitable for me?

Invisalign aligners are removable, so you can take them out to eat and to clean your teeth, and they avoid metal brackets and wires. Many adults find this appealing. Fixed braces remain a common choice for some cases. Complex tooth movements, significant jaw differences and some teenage patients, whose wearing habits can be less predictable, may be better suited to fixed appliances that do not rely on wearing time.

At Core Dental we do not recommend one option because it is popular. We recommend what appears suitable for your teeth, your goals and your circumstances, after an examination. Your clinician will talk through Invisalign, orthodontic braces , internal lingual braces or another appliance and explain why.

Why does timing matter for children's orthodontics?

Children's jaws and teeth are still growing, so an orthodontic assessment during childhood can show whether any development issues are likely to need attention. Some skeletal and developmental concerns may be managed more simply when found early, while the same concerns can become more involved once growth is complete. An early assessment often confirms that nothing needs to happen yet, which is a perfectly good outcome.

Our group information suggests children can have an orthodontic assessment from around age nine to ten, and some children are reviewed earlier if a dentist has a concern. Ask your dentist when an assessment would suit your child. See our children's braces and Invisalign page for more information.

How does orthodontic care fit with your general dental care?

Orthodontic treatment often overlaps with general dental care. You need to keep teeth and gums clean around appliances, deal with any decay that appears and plan restorative work that may follow orthodontics. Because our team includes general dentists, specialists and hygienists, your care can be planned with these other needs in mind. Please ask us how your orthodontic appointments will be coordinated with your regular check-ups.

What should I know about direct-to-consumer aligners?

Some aligner services send aligners by post after you take your own impressions at home, with limited or no in-person oversight. Moving teeth without professional monitoring carries risks. These can include

unintended changes to the bite, shortening of the tooth roots, gum recession and other complications that a clinician would normally pick up and manage early. We share this so you can make an informed choice. If cost is a concern, please ask us about our interest-free payment plans.

How can we help?

If you would like to talk about braces, Invisalign or an orthodontic assessment for yourself or your child, call 13 13 16 or book online. We quote before treatment starts and offer interest-free payment plans, including Payright, which offers 0% interest with fortnightly instalments over 3 to 30 months for plans up to $20,000. Terms and eligibility apply and were published as at September 2026, so please confirm current details with us.

How many years of training does a specialist orthodontist complete?

An initial dental degree, followed by three years of full-time postgraduate study.

Orthodontics Australia, the public information service of the Australian Society of Orthodontists, describes the pathway this way: orthodontists "begin as dentists before completing an additional three years of full-time study to become registered specialists."

Those postgraduate years are dedicated to the study and clinical practice of tooth movement, jaw development, skeletal growth, occlusion, meaning how the teeth bite together, and the full range of orthodontic appliances and techniques. We do not publish a single total number of years, because the length of an initial dental degree differs between universities and between countries, so any total would be right for some practitioners and wrong for others.

Source: Orthodontics Australia, When to see an Orthodontist, orthodonticsaustralia.org.au (accessed 3 November 2026).

The distinction between that pathway and a shorter provider course is clinically significant, and understanding it helps you make a better-informed decision about a course of treatment that typically runs for one to two years and changes the position of your teeth permanently. If you have been looking at options for yourself or for a teenager, you have probably noticed that orthodontic treatment appears to be available in a great many places. The qualifications behind it are not all the same, and the AHPRA register at ahpra.gov.au is the way to check which applies to any particular practitioner.

At what age does the Australian Society of Orthodontists recommend a first assessment?

Between the ages of 7 and 10 years old.

Orthodontics Australia, the public information service of the Australian Society of Orthodontists, states the recommendation as a range: "we recommend children visit a registered specialist orthodontist for an assessment between the ages of 7–10 years old." It gives the same range when answering when a first evaluation should happen: "we would recommend that you take your child for their first orthodontic evaluation when they are between 7–10 years old."

The reason for that window is what can be seen in the mouth at the time. At that stage a child will "have a mix of adult and baby teeth", which "can help the orthodontist determine if there are any developing problems such as misalignment of the jaws, crowding, or overbites", and the assessment "will cover existing teeth as well as those that are yet to break the surface to help predict their future growth."

An assessment is not the start of treatment. Orthodontics Australia notes that an orthodontist "may recommend a course of treatment to begin one to five years after the initial evaluation", or may take

early measures such as space maintainers or palatal expanders to intercept a developing problem. It is also explicit that "there’s no one ‘best’ age to start orthodontic treatment – it varies from child to child and depends on the issue that’s being treated."

Our own group information suggests an assessment from around age nine to ten, which sits inside that range, and some children are reviewed earlier where a dentist has raised a concern.

Source: Orthodontics Australia, When to see an Orthodontist, orthodonticsaustralia.org.au (accessed 3 November 2026). The page states it is medically reviewed by the Australian Society of Orthodontists.

An early assessment frequently confirms that nothing needs to happen yet, which is a perfectly good result. It can also identify something that is much easier to address now than it would be later.

What is early intervention, and what can it avoid?

Early intervention is treatment timed to work with a child's growth rather than against it, and it is one of the most valuable reasons to see a specialist orthodontist during childhood rather than waiting until adolescence.

Many skeletal and developmental issues can be addressed relatively simply with growth-modification appliances if they are caught early. The same issues can become significantly more complex, and sometimes require surgery, if they are left until growth is complete. Deciding which issues fall into that category, and when to act on them, is a clinical judgement that requires substantial training and experience, which is why the assessment matters even when the answer is to wait and monitor.

Why does the clinician matter more than the aligner brand?

Because the aligners are the instrument, not the treatment plan.

Invisalign, used correctly and prescribed by an experienced clinician, is effective for a wide range of orthodontic cases. What makes clear aligner treatment work well or work poorly is not primarily the aligners themselves. It is the skill and experience of the clinician planning the sequence of movements and monitoring whether the teeth are actually following it, and adapting the plan mid-course when they are not.

For adult patients in particular, the ability to remove aligners for eating, to maintain a normal oral hygiene routine, and to go through treatment without metal brackets and wires is a significant quality-of-life advantage. That advantage is real regardless of who provides the treatment, which is precisely why the clinical oversight behind it is worth asking about.

What is the professional position on direct-to-consumer aligners?

There is a published Australian position on this, which is more useful than anyone’s opinion of a particular company.

The Australian Dental Association’s policy on teledentistry and virtual care states, at clause 2.3: "It is not acceptable for patients to receive procedural dental treatment without an in-person examination and the ability to directly contact their dental practitioner." Its background section puts the general point more briefly: "teledentistry is not suitable for procedural dental care."

Moving teeth is procedural dental care. The policy does not name aligners, any aligner brand or any company, and we are not suggesting that it does — the principle is a general one about where remote dentistry is appropriate. The ADA’s position is that teledentistry services "must only be provided in cases where direct face-to-face treatment or specialist advice cannot be provided", and that they "must only be provided by a Board registered dental practitioner".

The policy is not hostile to remote care as such. It describes teledentistry as "beneficial for rural and remote populations" and supports its further development, provided solutions are "proven to be clinically safe for patients and legally compliant for practitioners."

Telehealth aligner services, where you take your own impressions at home and receive aligners through the mail without professional oversight, have grown significantly in recent years. The clinical risks of moving teeth without in-person monitoring include unintended changes to the bite, shortening of the tooth roots, gum recession and other complications that a clinician would normally identify and manage early. Those risks are real, and the cost savings advertised can be outweighed by the cost of remediating a result that has gone wrong.

We are not raising this to alarm anyone who has considered these services. We raise it because informed patients make better decisions, and because if cost is the reason direct-to-consumer aligners look appealing, our interest-free payment plans are worth asking about first.

Source: Australian Dental Association, Policy Statement 6.28, ada.org.au (last reviewed June 2025; accessed 3 November 2026).

What does Core Dental's group model give an orthodontic patient?

Coordination, chiefly, and it saves the patient from doing that coordination themselves.

Our specialist orthodontist's patients at Caroline Springs have access to the full Core Dental team: general dentists, paediatric dentists, the in-house Smile Lab and digital imaging. Having all of that available within the same connected group, with shared records and coordinated care, simplifies treatment considerably for both patients and families.

The alternative is familiar to anyone who has done it. You are left trying to coordinate communication between a standalone orthodontic specialist and a separate general dentist, neither of whom has access to the other's records, while orthodontic appointments, check-ups, cleans and any restorative work are scheduled independently of one another.

Frequently asked questions

Do I need a referral to see a specialist orthodontist?

You can start by booking a visit with our team and telling us about your concerns. Your dentist can advise whether a specialist orthodontist is a sensible next step for your teeth and goals. Please ask us when you book about how specialist appointments are arranged.

Where does Dr David Austin see patients?

Dr David Austin is listed as a Specialist Orthodontist on our Caroline Springs and Epping clinic pages. Specialist availability is limited and can change, so please confirm the next available session when you book your appointment.

Is Invisalign suitable for children and teenagers?

Invisalign is available for teenagers and children's treatment options are assessed individually. Your clinician will consider your child's age, teeth and growth, and may recommend fixed braces if they are more suitable. Results vary for each person.

How long does orthodontic treatment usually take?

Treatment time depends on the case and the appliance. Orthodontic treatment usually involves regular check-ups over many months, often between 12 and 24 months. Your clinician will give you an estimate after an examination, and it may change as treatment proceeds.

Are mail-order aligners a safe alternative?

Aligners that are posted to you without professional monitoring carry risks, such as unwanted bite changes, root shortening and gum recession. We recommend treatment planned and monitored by a registered dental practitioner, and we can discuss payment options if cost is a concern.

Is seven too young for an orthodontic assessment?

Seven is the start of the recommended window rather than the whole of it. Orthodontics Australia, the society's public information service, recommends that children visit a registered specialist orthodontist for an assessment between the ages of 7–10 years old, and gives the same range for a first orthodontic evaluation. An assessment at that age is not the start of treatment: it notes that treatment may be recommended to begin one to five years after the initial evaluation, and that there is no one best age to start, because it varies from child to child and depends on what is being treated.

What is a growth-modification appliance?

An appliance used to influence the growth or position of the jaws while a child is still growing. Used at the right time, it can address some skeletal and developmental issues relatively simply, where the same issues may need more complex treatment, and sometimes surgery, once growth is complete.

How long is a specialist orthodontist's training in total?

An initial dental degree, followed by three years of full-time postgraduate study. Orthodontics Australia, the public information service of the Australian Society of Orthodontists, states that orthodontists "begin as dentists before completing an additional three years of full-time study to become registered specialists." Those postgraduate years cover tooth movement, jaw development, skeletal growth, the bite and orthodontic appliances. We do not publish a single total, because the length of an initial dental degree differs between universities and between countries.

Will my orthodontist and my general dentist share my records?

Within Core Dental, yes. Shared records across the group mean your orthodontic treatment, check-ups, cleans and any restorative work can be planned together rather than coordinated by you between separate practices.

Related services and further reading

Orthodontics

Specialist orthodontist

Invisalign treatment

Orthodontic braces

Children's braces and Invisalign

Core Dental Caroline Springs

Core Dental Epping

Why seeing a registered specialist matters

When should I consult a specialist for a dental problem?

Core Dental at a glance

Nine Core Dental clinics across Melbourne: Southbank, South Melbourne, Caroline Springs, Carrum Downs, Epping, Wyndham, Berwick, Bayside and Glenferrie.

Open six days a week: Monday to Friday 8.00am to 6.00pm and Saturday mornings.

Invisalign Blue Diamond provider (as stated on coredental.com.au).

Interest-free payment plans and HICAPS on-site claiming.

Call 13 13 16 or book online.

Contact Core Dental

Phone	13 13 16
Booking	Online through coredental.com.au, or call 13 13 16
Hours	Monday to Friday 8.00am to 6.00pm, Saturday 8.00am to 1.30pm (Bayside Saturday 8.30am to 1.30pm), Sunday closed
Clinics	Southbank , South Melbourne , Caroline Springs , Carrum Downs , Epping , Wyndham , Berwick , Bayside , Glenferrie

This article is general in nature and does not replace advice from a registered dental practitioner who has examined you. Results, recovery times and potential risks vary for each individual. This information is intended for people over 18. Seek advice from a qualified, AHPRA-registered practitioner before proceeding.

Which Core Dental orthodontist holds specialist registration?

Dr David Austin (BDSc Melb, MDS Orth HK, MOrth RCS Edin) is listed as a Specialist Orthodontist on the Core Dental Caroline Springs and Epping clinic pages. Availability is limited, so confirm the next session when you book.

What does Specialist Orthodontist mean in Australia?

It is a regulated title for dentists registered with AHPRA as specialists in orthodontics, usually after a postgraduate orthodontic degree following a dental degree. Core Dental patients can check registration on the AHPRA register at ahpra.gov.au.

Does Core Dental hold Invisalign provider status?

Yes. Core Dental states that it holds Invisalign Blue Diamond provider status. This describes participation in the provider program and is not a guarantee of results; a clinician assesses whether aligners suit each patient.

When is a specialist orthodontist more useful than a general dentist?

A Specialist Orthodontist may be helpful for more complex cases, such as significant crowding, jaw growth differences or children with mixed baby and adult teeth. Core Dental clinicians will advise if specialist input suits your situation.

When can children have an orthodontic assessment at Core Dental?

Core Dental group information suggests an orthodontic assessment for children from around age nine to ten, with earlier review if a dentist has a concern. Ask our team which timing suits your child.

What are the risks of mail-order aligners?

Moving teeth without professional monitoring can cause unintended bite changes, shortening of tooth roots and gum recession. Core Dental recommends aligner treatment planned and monitored by a registered practitioner and can discuss payment plans.

Which Core Dental clinics offer orthodontic care?

Core Dental offers orthodontics, including Invisalign and braces, through our dentists across our nine clinics. Our Specialist Orthodontist is listed at Caroline Springs and Epping. Call 13 13 16 to ask about your nearest clinic.

How do I book an orthodontic consultation at Core Dental?

Call Core Dental on 13 13 16 or book online at coredental.com.au. Tell our team whether the consultation is for an adult or a child and which clinic suits you, and ask about specialist availability.