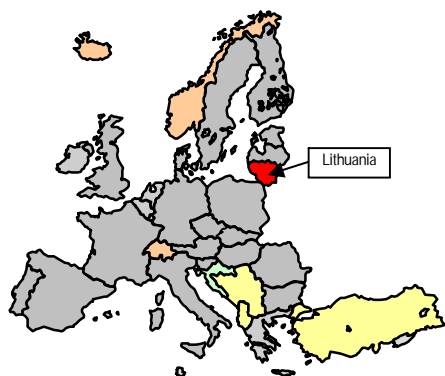


## Lithuania



Date of last revision: 1<sup>st</sup> October 2008

In the EU/EEA since	2004
Population (2008)	3,366,357
GDP PPP per capita (2006)	€15,373
Currency	Litas (LTL)
	3.45 LTL = €1.00 (2008)
Main language	Lithuanian

The system of the State Social Insurance in Lithuania covers nearly all residents: as the insurers, the insured, or the beneficiaries. The system is based on the principle of *solidarity* of generations. Some patients (children, the elderly and the disabled) may receive some or all of their oral healthcare free but adult patients must pay part or all of the cost of their treatment. Most of this dental care is undertaken in general practice.

Number of dentists:	3,010
Population to (active) dentist ratio:	1,118
Membership of Dental Chamber:	100%

There is a well developed use of specialists for advanced dental care, and there are also dental hygienists as clinical auxiliaries. Continuing education for dentists is mandatory.

## Government and healthcare in Lithuania

The Republic of Lithuania lies on the eastern shores of the Baltic Sea, as one of the "Baltic States". With the Gulf of Finland in the north, and the Baltic Sea in the west, Lithuania shares land borders with several countries – Latvia, Russia, Belarus and Poland. The Lithuania Republic is a small country in terms of population and land area coverage (65.3 sq km). The capital is Vilnius.

The State of Lithuania gained its independence in 1990 (having also been independent from 1918 to 1939) and is a democratic republic. The powers of the State are exercised by the Parliament (*Seimas*), the President of the Republic and Government, and the Judiciary. The Seimas is unicameral, with 141 seats (71 members are directly elected by popular vote and 70 by proportional representation). Members serve for four-year terms. The President is elected by popular vote, for five-year terms of office.

The country is administered by 10 counties (*apskritis*).

In 2007 (3rd Quarter), average monthly earnings were 1949 litas (€565) and unemployment was about 4.3% of the workforce.

The system of the State Social Insurance in Lithuania covers nearly all residents: either as the insurers, the insured, or the beneficiaries. The system is based on the principle of *solidarity* of generations. The employed population supports pensioners, the disabled and unemployed persons by paying social insurance

contributions. Hence, the budget of the State Social Insurance Fund depends contributions, whereas the rate of contributions relies on the general economic capacity of the state, the number of working people, the amount of the work income and, finally, on the honesty of those who pay the contributions.

In Lithuania, there is a distinction in the social security system between social insurance (covering working people), social assistance (for all residents) and special state schemes (covering privileged groups such as servicemen and some scientists). The two main principles of social policy in Lithuania are universality and solidarity. Universality means that all residents are entitled to services/benefits provided by social security. Solidarity is a principle based on solidarity between workers and pensioners, and between workers and those individuals who are unable to work because of illness, disability or other reasons. Approximately 15.5% of the population was over 65 years in 2008.

	Year	Source
% GDP spent on health	5.9% 2006	HIC
% of this spent by governm't	72.4% 2006	HIC

"HIC" is the Lithuanian Health Information Centre

The social insurance system is administered by a number of organisations:

#### The Ministry of Social Security and Labour

The main function of MSSL is in the area of social policy, including social insurance, employment and labour relations, and consists of analysing the current social situation, drafting laws and governmental decrees, presentation of these to the Seimas and the Government and the maintenance of international and public relations.

#### The State Social Insurance Fund Council

The State Social Insurance Fund Council supervises the State Social Insurance Fund (SSIF). The Council (established by agreement in 1995) is a tripartite governing board chaired by the Minister of Social Security and Labour.

The responsibilities of the Council include monitoring of legislation, advice and recommendations to the government, annual reviews and advice on operational issues.

#### The State Social Insurance Fund Board (SoDra)

The State Social Insurance Fund Board is the central institution that administers the State Social Insurance Fund and whose main task is to manage the funds and accounts of the State Social Insurance Fund, ensure the collection of contributions and allocation of benefits and their delivery to beneficiaries.

SoDra, which employs over 3,300 people, is responsible for the administration of the SSIF through its central office in Vilnius and 52 territorial offices.

#### Voluntary social insurance

There is also voluntary social insurance which includes pension and sickness/maternity allowances.

## Oral healthcare

### Regulation of healthcare

Dental care (aid) practice, as other medical practice, is regulated by the main general laws which are passed by the Parliament of Lithuania. That is the "Law on Health System", the "Law on Health Care Institutions" and the "Law on Patients' Rights and Damage". The legislation allows for dentistry being a specific medical area, so special laws have been passed – that is the "Law on Dental Practice" and the "Law on the Dental Chamber". Dental care (aid) is also regulated by legal acts passed by the Minister of Health and the Lithuanian Dental Chamber (see later for the Dental Chamber).

	Year	Source
% GDP spent on oral health	0.19% 2006	Chamber
% OH expenditure private	No data	

There are no available data for how much of the expenditure on dentistry is private.

Notwithstanding the relatively high number of dentists, the state of oral health of the citizens of Lithuania is described by the Dental Chamber as "not quite satisfactory". This is not related to the quality of the dental service, but to the socio-economic situation. The greatest problems are caries, periodontitis and malocclusions.

Many in the population suffer from periodontal diseases. Despite the better living conditions, economic progress, increased information, periodontitis remains one of the most problematic issues of dentistry. According to the research in thirteen Lithuanian towns and districts, it is estimated that plaque induced gingivitis prevails among children – in about 69 % of 6-14 years old children. Most adults suffer from chronic periodontitis – about 92 % of the citizens aged among 25-64 years old have gingivitis and periodontitis. And one third of Lithuanians needs complex treatment of it.

The prevalence of malocclusion is widely spread in Lithuania. Among examined schoolchildren aged 9-11 years about 80 % needs correction.

### Public compulsory health insurance

The national health insurance system scheme offers reimbursement of the cost of some dental treatment. In 2007, 147.1 million Litass (€42.7 million) from the compulsory health insurance fund (SSIF) were allocated to dental care. About two thirds of this was for primary dental care.

In 2007 there were 195 public and 1,011 private clinics (registered with the Chamber). However, the Chamber believes that in reality there are up to 800 more clinics. Only 377 clinics had contracts with the SSIF; the other clinics were outside the state system

Dental care expenses may be reimbursed from state or municipal funds, mandatory health insurance funds, and supplemental health insurance funds and from (voluntary) contributions by patients. Only the essential dental care services are provided free of charge.

Patients have the right to a free choice of dentist. Public oral health care is free of charge, for children and teenagers under the age of 18 years, and prosthodontic care for pensioners and the disabled. For adults between 18 and 65 dental care in the public dental service, if the dental office is contracted with the SSIF, dentistry is partly financed by the fund and partly (for expenditure on dental materials) by co-payments by patients.

Due to the lack of financial resources "free of charge" prosthetic treatment is very limited.

### Private insurance for dental care

This does not exist in Lithuania.

### The Quality of Care

The quality of dental care is monitored by the Lithuanian Dental Chamber in different ways and emphasis is placed on quality improvement and assurance. Quality improvement is achieved through continuing education and the development of standards and certification.

The *State Inspectorate of Medical Audit* (SIMA) is the institution of health care services inspection. SIMA's main functions are to represent and defend patients' rights to effective, accessible and safe health care, and to implement state inspection and examination of accessibility, usability and efficiency of health care services in health care institutions independently of their subordination and property. SIMA receives its regulatory authority from state laws and is a government agency under the Ministry of Health. The Chamber is involved with patient complaints about the quality of care.

### Health Data

	Year	Source
DMFT at age 12	2.40 2001	OECD
DMFT zero at age 12	16% 2001	OECD
Edentulous at age 65	11% 2001	OECD

"DMFT zero at age 12" refers to the number of 12 years old children with a zero DMFT. "Edentulous at age 65" refers to the numbers of over 64s with no natural teeth

### Fluoridation

There are no fluoridation schemes and distribution of free fluoride toothpaste to children.

## Education, Training and Registration

### Undergraduate Training

The original title for dentistry, *stomatology*, was changed to *odontology* in 2003.

For admission to an odontology course the completion of a General Certificate of Secondary Education is the minimum required. All persons having secondary, higher or high education and able to prove it with documents recognised in the Republic of Lithuania have right to be admitted to the first year of basic and continuous studies. Admission to the study programme is carried out according to joint regulations of the Faculties of Odontology in the two universities: Vilnius University and Kaunas Medical University. Admission takes place by competition, and priority is given to those who have higher ranking in competition queue. There are no entrance examinations, students are selected according to the grades of the secondary education final examinations, and annual marks averages. Each year the admission system is updated and upgraded.

The undergraduate training programme is for 5 academic years. Teaching languages are English and Lithuanian. Teaching is undertaken by academic staff full or part time university teachers who hold contracts with the university and the National Health Service (usually it is a contract with the university hospital).

The new programme of basic training of odontologists was developed according to the best practices of Western universities in 1991-1994, after Lithuania became independent.

Year of data:	2006
Number of schools	2
Student intake	118
Number of graduates	117
Percentage female	74%

The responsibility for quality assurance in the faculties is by the Ministry of Education, the Chancellor of the University and the Dean of the Faculty.

#### *Qualification and Vocational Training*

##### *Primary dental qualification*

The professional title is *odontologist*, which is written down in the graduation Diploma.

##### *Vocational Training (VT)*

Graduates of the Faculties of Odontology are required to complete one-year training, *primary residency*, in order to be registered for independent practise. During the training, the dentist is a salaried employee.

This post-qualification training has a practical part (participant has to fulfil a list of prophylactic, diagnostic and treatment items) and a theoretical part (compulsory attendance on recommended courses and lectures). Graduates of primary residency obtain the qualification of

*Odontologist of General Practice*, and are granted a license to practice.

Theoretical training - during the course of practical training - is provided in a number of different ways and establishments: in particular in specialised training courses organised (mainly) by the universities, dental associations, and on a daily basis in approved training posts.

The criteria for recognition of training establishments cover the service facilities available, the degree of supervision, the range of experience offered and the availability of time and facilities to study. The method of this training is apprenticeship, (occupation of a general practice odontologist post (dental unit) at a State Health Service hospital or a private dental clinic).

The teachers are normally experienced odontologists in General Practice. They are employed by the University; and therefore belong to the public service; very few are employed in private dental clinics. The majority are part-time teachers.

The University appointed teachers in the State Health Service hospitals and private clinics are responsible for the theoretical and practical training. At the end of the primary residency, the theoretical knowledge and practical skills are evaluated during the State Exam.

### Registration

Access to the profession is regulated by the statutes and is restricted to the holders of the *Licence to practice* - odontologist of General Practice or odontologist specialist. (endodontologist, orthodontist, paedodontist, periodontologist, prosthodontist, Oral surgeon, Maxillofacial surgeon).

The Licensing Committee at the Lithuanian Dental Chamber is the official unit, responsible for organising and giving Licences to professionals. It maintains a register containing the dentists' data, including qualifications and professional performance data.

Cost of registration (2008)	€ 17
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There is also an annual fee of 150 Litass (€43.5) for subscription to the Chamber, which is mandatory.

#### *Language Requirements*

There is a requirement to have a general knowledge of the Lithuanian language before registration. For non-EU/EEA qualified dentists language tests are carried out by the National Centre of Examination and Teacher Professional Development. The test is general (rather than dentistry specific), written and oral. A certificate from a university or language institute is an acceptable alternative, if knowledge of language is B1 as set by the European Council for knowledge of languages.

## Further Postgraduate and Specialist Training

### *Continuing education*

The Lithuanian Dental Chamber coordinates the continuing education of dentists and oral care specialists. This function is performed by the Commission on Informal Education. It sets up main principles of the qualifying courses and the basic requirements for organisers.

In order to remain registered a dentist needs to attend the courses and obtain a certain number of professional training hours, which are 120 hours in 5 years for dentists and dental specialists.

### *Specialist Training*

There are 3-year postgraduate specialist training courses (Residency), to obtain the specialist diploma - *License of Odontologist Specialist*:

- *endodontologist,*
- *orthodontist,*
- *pedodontist,*
- *periodontologist,*
- *prosthodontist,*
- *oral surgeon.*

For the oral maxillofacial surgeon specialty, there is 4-year postgraduate training for - *License of Maxillofacial Surgeon*.

Postgraduate specialist training courses are undertaken at the Kaunas University of Medicine or the University of Vilnius. The trainees are paid during training.

## Workforce

### Dentists

The active dental workforce is stable, but increasing slowly (in 2008). There is no reported real unemployment among dentists, although individuals may not be working for short periods.

Year of data:	2008
Total Registered	3,010
In active practice	3,010
Dentist to population ratio*	1,118
Percentage female	83%
Qualified overseas	35

\*active dentists only

### *Movement of dentists across borders*

Approximately 200 dentists asked for a "Certificate of Good Standing" to work abroad through the years from 2004 to the end of 2006, but there is no a reliable source of information how many of them left Lithuania.

### *Specialists*

There are 7 kinds of specialists in Lithuania, as already identified:

Year of data:	2008
Orthodontists	73
Endodontists	31
Paedodontists	56
Periodontists	35
Prosthodontists	285
Oral Radiologists	
Oral Surgeons	75
OMFS	23

Dental specialists comprise about 20% of the total numbers of practising dentists.

There are two ways for patients to access specialists in Lithuania. The first is to ask for referral, from a general odontologist. All expenses in these cases will be covered by the insurance system. However, if patient wishes to go directly for a specialist consultation, this is acceptable, but he would then have to pay the fees himself.

### Auxiliaries

In Lithuania dental auxiliaries are known as *Oral Health Care Specialists*. They must be registered with Lithuanian Dental Chamber and have Licences to practice. All these auxiliaries also need to obtain hours of continuing education.

There are three kinds of these: dental hygienists, dental technicians and dental assistants.

Year of data:	2008
Hygienists	261
Technicians	923
Denturists	0
Assistants	1,722
Therapists	0
Other	0

### *Dental Hygienists*

Hygienists are permitted to work only provided they have a diploma. They are trained at the Collegiums of Panevezys, Utena and Klaipeda for 3 years and Kaunas University of Medicine for 4 years. Graduates of Kaunas University of Medicine receive a bachelor degree and the qualification of Oral Hygienist. The completion of studies at the Collegiums leads only to the qualification of Oral Hygienist.

Hygienists can practice as employee, employer or freelancer. They may accept payments from patients. They have competence to diagnose and plan treatment and their duties include scaling, cleaning and polishing, removal of excess filling material, local application of fluoride agents, the insertion of preventive sealants and Oral Health Education. They may give local anaesthesia.

There is a Lithuanian Dental Hygienist Association.

It was founded in 1999. The aims are: to ensure possibilities to improve qualification, represent its member, cooperate with other analytical organisations, provide preventive work of oral care, inform public about the dental hygienist academic and other achievements.

In 2008 it was reported by the Chamber that about a quarter of hygienists were members of the Dental Hygienists' Association.

#### *Dental Technicians*

Dental technicians train in the Colleges of Kaunas and Utena. In collaboration with the educational institutions, the Chamber endeavors that the curriculum for dental technicians includes more practice, during which the students can improve their skills.

Dental technicians train for 3 years and after studies they receive a diploma.

Technicians normally work in commercial laboratories, only a few are employees of dentists or of clinics. They construct prostheses for insertion by dentists. They have legal responsibility for their work but do not accept payments from patients.

Lithuanian Association of Dental Technicians suspended operation in 2004.

There are no reports of any (illegal) denturism in Lithuania.

#### *Dental Assistants (Nurses)*

Dental assistants (nurses) are permitted to work only when they have a diploma of Dental Assistant, are registered with Lithuanian Dental Chamber and have a Licence to practice. They train for 3 years in a College specifically for dental assistants. The Colleges are in Kaunas, Panevezys, Klaipeda, Utena and Siauliai. Dental assistants need to undertake continuing education. Courses on infection control and emergency care are obligatory.

New protocols on competencies, duties and responsibilities of dental assistants were adopted in the end of the year 2007. Besides assisting the dentist, they are permitted to undertake oral health education.

There is a Lithuanian Dental Assistant Association.

## Practice in Lithuania

Year of data:	2008
General (private) practice	2,219
Public dental service	538
University	80
Hospital	
Armed Forces	16
General Practice as a proportion is	74%

### Working in Liberal (General) Practice

The Ministry of Health establishes the cost of dental care services provided by state, district and municipal institutions.

The cost of dental care services in private practices is established by their owners. For dentists working within the SSIF it is obligatory (by law) that they undertake the treatment from a price list of items fully or partially covered by the insurance system - even for items which are fully paid for by the patient (see below for private practice).

#### *Joining or establishing a practice*

There are no stated regulations which specifically aim to control the location of dental practices. There are also no other factors which effectively restrict where dentists may locate. Any type of building (a house, apartment, shop or clinic) may be used which fulfils the legislative claims to dental practice. However, rules exist which define, for example, the minimum size of rooms for dental practice. There is no limit to the maximum number of partners etc.

The state offers no assistance for establishing a new practice and generally dentists can take out commercial loans from a bank. To establish a new practice private dentists have to gain the approval of the registration of local state authorities and a licence from health authorities. The new practice has to be insured - by any health insurance company.

#### *Fully Private Practice*

Dentists working outside the SSIF, in fully private practice, are not bound by any method of price calculation used in the SSIF. In the same way, private specialists may themselves make decisions about treatment prices. However, normally prices are higher than in general practitioners' clinics.

### Working in Public Clinics

Approximately 20% of dentists work in municipal ambulatory dental departments (2008). These municipal ambulatory dental departments are contracted with the SSIF and adults' treatment is partly financed by the SSIF and partly (for expenditure on dental materials) by co-payments by patients. As mentioned earlier, some public oral health care is free of charge for children and teenagers, pensioners and the disabled. Many public clinic dentists also work part-time in private practice.

Specialists receive higher fees for their work in municipal polyclinics, because there is special index. The Insurance system also pays more to cover a larger proportion of the treatment price.

### Working in Hospitals

The social status and guarantees for odontologists from General Practice, and Specialists, working in public hospitals and private service is the same according to the Lithuanian Law of Labour. It is based on a labour contract between the employee and employer, and the contractual requirements. The social guarantees of the employee do not differ whether the employer is a public or private institution.

Dentists who work in hospitals (university or big regional hospitals) are normally salaried employees. Hospitals usually are publicly owned, and the dental services provided are normally oral and maxillofacial surgery. These dentists will also assist in the education and training of dental undergraduates.

### Working in Universities and Dental Faculties

There are 2 dental schools, in which dentists work. One of them is localized in Kaunas Medical University, as Faculty of Odontology and another is localised in the Faculty of Medicine at Vilnius University. Dentists work as full-time or part-time employees of the University. Their salary range is €300 to €700 per month. Combination of part-time teaching employment and private practice is permitted by the universities.

Staff members are graded as professors (20%), associate professors (30%), lecturers (5%) and assistants (45%). Between 60 and 70% of staff members are full-time teachers. The teacher/student ratio differs: minimum ratio is 1:5, maximum ratio 1:8. The qualified academic dental staff members provide supervision during clinical training.

The titles of university teachers are: assistant (title As.), docent (title Doc.), and professor (Prof.). For the positions of docent and professor it is necessary to pass "habilitation" - this involves a further degree (publication activities and a record of original research) and a public lecture in front of the Scientific Council of University. The study for a PhD is also required.

### Working in the Armed Forces

Dentists serve full-time in the Armed Forces, of whom 75% were female in 2008.

## Professional Matters

### Professional associations

The Lithuanian Dental Association suspended its operation in 2004, when the Lithuanian Dental Chamber was established.

The Dental Chamber:

- ✚ implements self government of dentists and coordinates their activities;
- ✚ pursues the strategic tasks of dental care (aid) within the healthcare system;
- ✚ takes concern in development of dental activities in the Republic of Lithuania, education of patients, professional training of dentists and medical culture;
- ✚ prepares drafts of legal acts on the activities of dentists, dentists specialists and oral care specialists - to present them to the Ministry of Health

Odontologists are members of the Lithuanian Dental Chamber (*Lietuvos Odontologų Rūma*). Membership has been compulsory since July 2004, by law.

	Number	Year	Source
Lithuanian Dental Chamber	3,010	2008	Chamber

Also by law, representatives of the Lithuanian Dental Chamber are included in the special commissions, which examine complaints filed against dentists.

### Ethics and Regulation

#### *Ethical Code*

There is an Ethical code, which was updated in 2007, administered by Lithuanian Dental Chamber. Dentists must work within the ethical code, which includes the relationships and behaviour between dentists, conduct with patients, consent and confidentiality, continuing education and advertising.

#### *Fitness to Practise/Disciplinary Matters*

A complaint may be made by a patient. This may be to:

- the health insurance company,
- the Dental Chamber,
- the State Inspectorate of Medical Audit (SIMA).

In case of violation of professional ethics or rules of dental practice, or causing damage to a patient, there is a range of penalties which is normally administered by the Ethical Committee of Dental Chamber - in Regional Departments of the Chamber. The Committee of Reimbursement of Damage at the Ministry of Health, the State Inspectorate of Medical Audit (SIMA) and the Dental Chamber are always involved in the investigation of complaints.

The penalties may include a reprimand, a penalty or even the loss of the license to practice (the dentist cannot be suspended immediately). Any serious break of the law can be referred to court and even result in imprisonment.

#### *Data Protection*

All odontologists must follow the requirement to protect patients' health data, according to the regulations of all the legal Acts and Odontologists' Competence regulating documents.

#### *Advertising*

Dentists are permitted to use press or telephone directories to advertise.

Dentists are allowed to promote their practices through websites, but they are required to respect the Code of Ethics and Code of Electronic Commerce (which embraces the CED Code of Ethics regarding internet sites).

#### *Indemnity Insurance*

Liability insurance is compulsory for dentists and oral hygienists. Insurance is provided by private insurance companies and covers costs up to a predetermined maximum, usually 50.000 Lt (approximately €14,500) in 2008. An average practitioner pays approximately 300 Lt (€87) annually for the insurance (2008).

The insurance does not cover for dentists to work outside Lithuania.

#### *Corporate Dentistry*

Anyone can own a dental practice, but a person, who is responsible for the organisation of the clinical treatment must be a dentist.

#### *Tooth Whitening*

Tooth whitening products are classified as a Medical Devices in Lithuania. However, there are some cosmetic products used for this also and these can be bought in specialised stores.

### Health and Safety at Work

Requirements and regulations are set by the Ministry of Health. Compliance with the requirements is controlled and monitored by the responsible health authorities.

Regulations for Health and Safety:

<i>For</i>	<i>Administered by</i>
Ionising radiation	State Centre for Nuclear Security
Electrical installations	The State accredits electrical technicians
Waste disposal	Local government, Ministry of Health
Medical devices	Ministry of Health
Infection control	Ministry of Health and local authorities

Each employee must undergo periodic medical examination. There is compulsory use of means of protection at work such as facial masks, protective glasses and gloves.

Dentists and auxiliaries are recommended to be inoculated against Hepatitis B and later be checked regularly for sero-conversion.

Infection control is regulated by law and has to be followed by the dentist and his or her team. Non-compliance causes sanctions.

#### *Ionising Radiation*

There is a requirement to have a Licence for using radiation equipment and in every 5 year period persons who work with X-rays (dentists or dental assistants), need to attend 36 hours of courses on ionising radiation.

#### *Hazardous Waste*

The EU Hazardous Waste Directive has been incorporated into Lithuanian laws. It is actively enforced. Amalgam separators are not mandatory. Amalgam is not popular with patients or dentists.

## Financial Matters

### Retirement pensions and Healthcare

The normal age for retirement for women is 60 and for men 62 years, although dentists and their staff can work past then.

There is a state-funded system of pensions, of which dentists and their staff are a normal part. The pension would be about 50% of last declared income. This is the same for employed and self-employed dentists. Any additional insurance pension depends on the individual contract and the amount insured.

### Taxes

There is a national income tax of 24% of income.

#### *VAT*

In the Lithuania Republic the VAT rate is 18%.

The main dental materials: filling materials, impression materials, instruments, gloves, anaesthetics, disinfectants are charged at 5% VAT. Some auxiliary materials, such as radiographic materials, instruments and equipment for laboratories are charged at 18% VAT. The cost of dental health care (and other health care too) is VAT free.

### Various Financial Comparators

Zurich = 100	Vilnius 2003	Vilnius 2008
Prices (excluding rent)	48.8	52.7
Prices (including rent)	46.1	49.4
Wage levels (net)	10.1	15.0
Domestic Purchasing Power	23.4	29.4

*Source: UBS August 2003 & January 2008*

## Other Useful Information

<i>Competent authority and main associations:</i>	
<p>Lithuanian Dental Chamber K. Sirvydo str. 6, LT- 01101 Vilnius Tel: +370 5 2 12 25 10 Fax: +370 5 2 12 25 10 Email: <a href="mailto:info@odontologurumai.lt">info@odontologurumai.lt</a> Website: <a href="http://www.odontologurumai.lt">www.odontologurumai.lt</a></p> <p>The Chamber in Vilnius manages a part of the database, registers information on temporary provision of the dental practice services, solves formal and informal educational issues, arranges improvement of professional skills and performs other functions provided by the legal Acts of the Republic of Lithuania and the Chamber.</p>	<p>Lithuanian Dental Chamber Eiveniu str. 2-064a LT- 50009 Kaunas Tel. +370 3 73269 41 Mob. +370 6 52222 50 Email: <a href="mailto:licencija@odontologurumai.lt">licencija@odontologurumai.lt</a> Website: <a href="http://www.odontologurumai.lt">www.odontologurumai.lt</a></p> <p>The Chamber in Kaunas is responsible for licences and certification</p>
<p>Lithuanian Dental Hygienists Association Žalgirio str.115, LT-08217 Vilnius Tel: +370 61211514 Email: <a href="mailto:danguole.mieldaziene@fc.kauko.lt">danguole.mieldaziene@fc.kauko.lt</a></p>	<p>Lithuanian Dental Assistants Association Rinktinės str. No 4-13 Vilnius LT-09312 Lithuania Tel/fax: + 370 5 27353 77 Mobile: +370 6 98808 36</p>
<p>Ministry of Health of the Republic of Lithuania Vilniaus str. 33, LT- 01506 Vilnius Tel: +370 5 2 68 5110 Fax: +370 5 2 66 1402 E-mail: <a href="mailto:ministerija@sam.lt">ministerija@sam.lt</a> Website: <a href="http://www.sam.lt">www.sam.lt</a></p>	<p><i>Main journal:</i> Stomatologija – Baltic Dental and Maxillofacial Journal Kanto 4-1, Kaunas LT-44296 Lithuania Phone/fax: +370 7 228307 Mobile: +370 6 1271707 Email: <a href="mailto:zilinskasj@takas.lt">zilinskasj@takas.lt</a> Website: <a href="http://www.sbdmj.com">http://www.sbdmj.com</a></p>
<p><i>Main information centre:</i> Statistics Lithuania Gedimino ave 29, LT-01500 Lithuania Tel: +370 5 2364800 Fax: +370 5 2364845 Email: <a href="mailto:statistika@stat.gov.lt">statistika@stat.gov.lt</a></p>	<p><i>Lithuanian Health Information Centre:</i> WHO Collaborating Centre Kalvariju 153, LT-08221 Vilnius-42, Lithuania Tel: +370 5 2773301 Fax: +370 5 2773302 Email: <a href="mailto:lsic@lsic.lt">lsic@lsic.lt</a></p>

## Dental Schools:

<p>Kaunas University of Medicine Faculty of Odontology A.Lukšos – Daumanto str. 6, LT-50106 Kaunas Tel: +370 3 7 33 83 66 Fax: +370 3 7 33 83 65 E-mail: <a href="mailto:odontologijos.fakultetas@kmu.lt">odontologijos.fakultetas@kmu.lt</a> Website: <a href="http://www.kmu.lt">www.kmu.lt</a></p> <p>Number of students: 656 96 graduated in 2007</p>	<p>Vilnius University Faculty of Medicine Institute of Odontology Žalgirio str. 115, LT - 2042 Vilnius Tel: +370 5 2 72 75 89 Fax: +370 5 2 72 85 69 E-mail: <a href="mailto:mf@mf.vu.lt">mf@mf.vu.lt</a> Website: <a href="http://www.mf.vu.lt">www.mf.vu.lt</a></p> <p>Number of students:114 21 graduated in 2007</p>
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