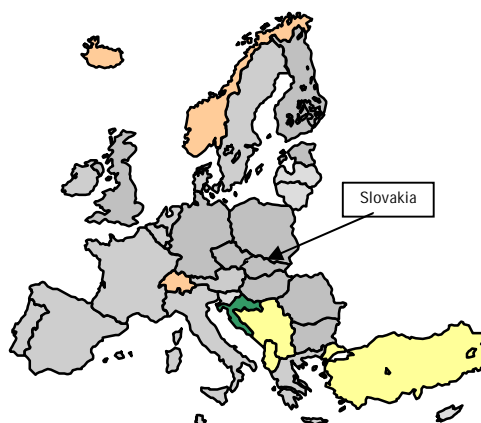


## Slovakia



In the EU/EEA since	2004
Population (2008)	5,400,998
GDP PPP per capita (2007)	€17,620
Currency	Koruny (SKK)
	32.7 SKK = €1.00 (2008)
Main languages	Slovakian

Slovakia has a system of compulsory health insurance and the constitution guarantees healthcare free of charge for all the citizens. However, in reality this has led to very low fees for oral healthcare. Private care whilst freely available is heavily regulated, however.

Number of dentists:	3,185
Population to (active) dentist ratio:	1,751
Membership of the Dental Chamber::	95%

Specialists are widely used, and the use of clinical auxiliaries is also widespread.

Continuing education for dentists is mandatory, and is administered by the Chamber of Dentists. Membership of the Chamber is voluntary.

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

## Government and healthcare in Slovakia

Slovakia is a small republic, established on January 1<sup>st</sup> 1993, in the geographical centre of Europe.

The land area is 49,035 km<sup>2</sup>. The capital is Bratislava (with a population of about 600,000).

The ethnicity of the population is Slovak (85.8%), Hungarian (9.7%), Romany (1.7%), Czech (0.8%), Rusyn, Ukrainian, Russian, German, Polish and others (2%). Two thirds of the population follows the catholic religion.

Slovakia has been independent – as part of the Republic of Czechoslovakia – since 1918, but separation into the current statehood occurred in 1993. Slovakia is a Parliamentary democracy with unicameral parliament, the National Council of the Slovak Republic (*Narodna Rada Slovenskej Republiky*) as a 150 seat legislative authority elected by proportional representation to serve for 4-year terms and the government as the executive authority. The President of the State is elected for 5 years, in a direct election by the people.

All citizens of the Slovak Republic are compulsorily insured. The insurance benefits do not depend on the level of income or salary. The state and the constitution guarantee healthcare free of charge for all the citizens, to a very wide extent, but the state may not have sufficient resources for this care.

There are 5 insurance companies. The premiums are 14% of income or salary (the self employed pay the whole amount, an employee pays only 4% and the remaining 10% is paid by the employer). The insurance is called "zdravotné poistenie".

	Year	Source
% GDP spent on health	7.1% 2005	OECD
% of this spent by governm't	74.4% 2005	OECD

Despite an increase in incomes over the period, Slovakia has seen a drop in spending on publicly funded healthcare (as a share of all healthcare spending) from over 91.7% in 1997.

## Oral healthcare

### Public compulsory health insurance

There is a principle of unlimited "solidarity" (compulsory insurance cover) for all persons. This means that the state insures non-insurable damages, which are paid by all, including by all patients whether they take care of their teeth or not.

The attempt by the Chamber to harmonise the catalogue of dental services in the compulsory healthcare system, with the requirements of the European Union, as defined by the European Law on Social Security is reported by them to have caused financial difficulties which have led to reductions in public expenditure. So, for example, from July 1<sup>st</sup> 2000, the share of payments for prosthetic dentures changed to 60% paid by the patient and 40% by the insurance company.

From 1st February 2000 an amendment of the Law (Medical order) came into effect. This amendment set the extent of the provision of dental care and the payments for dental care. The amendment also means that the patient must pay a part of the payment for dental services. The Law also set the basic group of dental services and prosthetic products ("Part A" of the Catalogue), in which the patient does not contribute to the payment.

The goal is to implement a model of multi-source financing, through the system of basic health insurance and complementary health insurance, with the contribution of the patient and direct payments. This is to develop the existing model of financing, which allows the utilisation of all sources of accessible finances. The regulation of prices is statutorily possible in the Slovak Republic.

	Year	Source
% GDP spent on oral health	0.19% 2004	Chamber
% of OH expenditure private	No data	

### Private Practice

There is a relatively low percentage (about 10%) of private dentists without an agreement with an insurance company in the Slovak Republic. They rent the premises or work in private premises with their own equipment. They are paid directly by the patient (cash) according to their treatment tariffs. The insurance company does not pay for diagnosis or treatment.

Dentists in private practice, without an agreement with an insurance company take a free decision to work like this, but with authorisation from a state authority (see below). They are not assigned any levy, and are not bound by any agreement with an insurance company. They work on the basis of licence, as independent entrepreneurs, who take free decisions on the placement, way and extent of their work – as part of a liberal profession.

Nevertheless, this type of practice exists within Slovakia's economical and social environment – which includes relatively low average wages (€4,000 per annum), and 10.7% unemployment (December 2007).

This original situation was caused, according to the Chamber, by an obligation also to conclude this agreement with dentists who were in the "chain of institutions" assessed by the Ministry of Health. Some dentists remained in the private sector, without an agreement first, after the Ministry of Health assessed this chain.

Dentists without the agreement are able to take free decisions on the placement of their practice and the type of treatment they provide, as they are totally responsible for the costs of their practices and the level of their incomes.

The system of compulsory health insurance does not depend on the level of the salary and is said by the Slovak Chamber of Dentists to discriminate against patients of private dentists who have no agreement with an insurance company. Patients attending such dentists voluntarily repudiate the compulsory health insurance. Their motivation is said to be accessibility and increased quality of the treatment. Prices in private practices are different, dependent on the place and region of the provider and also on the overheads of the provider. Before treatment, an informed approval of the choice and way of treatment is obtained.

### The Quality of Care

Patients expect a high-quality and long-lasting functional treatment, but this depends on the personal responsibility, skills and professional knowledge of the dentist.

Dental practitioners may be controlled by *revisory* dentists. These are dentists employed by an insurance company; they control, for example, the invoices that dentists send to the insurance company, from a professional (clinical) point of view.

However, in most cases quality is controlled by patient complaints. A patient can present a complaint to the *revisory* dentist, to the Municipality offices, to the Control Committee of each regional Chamber of Dentists, to the Section of state supervision and control of the Ministry of health or directly to a court. A control body had been established by 2008 (the Health Care Surveillance Authority) which is responsible for control of professional misconduct of provided health care. Patients who are not satisfied with provided oral care can contact the Authority with a written complain directly.

A Slovakian dentist will see on average 1,689 patients, who attend every one to two years for their oral examinations. According to the Law, one yearly oral examination for adults and two for children under 18 is permitted. Pregnant women are entitled to visit the dentist for examinations twice in pregnancy period.

### Health data

	Year	Source
DMFT at age 12	2.80 2003	OECD
DMFT zero at age 12	50% 2004	OECD
Edentulous at age 65	No data	

"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 is no water fluoridation, or fluoridation of milk. Only fluoridated salt is available. There are no free toothpaste for children schemes.

## Education, Training and Registration

### Undergraduate Training

To enter dental school students have to pass a state school-leaving examination (GCE) and pass a dental studies entrance examination. The undergraduate course lasts 6 years.

There are 3 medical faculties within Slovakian universities, all which are state owned and financed. Only two have dental schools, which are known as *lekárska fakulta*. These are at the universities of Bratislava and Košice.

Year of data:	2008
Number of schools	2
Student intake	101
Number of graduates	45
Percentage female	60%

In 2008 it was reported that there had been a previous increase in student intake, hence the big discrepancy between intake and the number of graduates..

The responsibility for quality assurance in the faculties is by an accreditation commission of the Ministry of Health.

### *Qualification and Vocational Training*

#### *Qualification*

Upon qualification, until 2003, the title was MUDr – *Medicinae Universae Doctor*. A new title MDDr. was introduced for undergraduates who entered dental school from 2004. The first graduates with the title MDDr. will be in the year 2009. After 2009 graduates with MDDr. will be entitled to open their own practice, they will not need to do the 3 years vocational training.

*Vocational Training (VT) – known as "Stomatology" in Slovakia.*

Following qualification, there is a programme of vocational postgraduate training for 36 months, under the guidance of skilled dentists, which is a prerequisite for obtaining a licence (the right to practise the profession of dental surgeon). After the training the dentist has to pass an interview in front of a Commission which has three members, to obtain a practice certificate. Only then may a dentist lead his own dental practice, as a fully licensed dentist. During this training the dentist is a salaried employee.

This post-qualification training has a medical part - the participant has to work in a hospital. The dentist works 2 months in anaesthesiology and intensive medicine, 2 months in surgery, 2 months in internal medicine, 1 month in hygiene and epidemiology and 1 month of optional specialisation. There is a theoretical part of training (compulsory attendance at recommended courses and lectures).

This VT will cease, with effect from the graduations in 2009.

### Registration

All dentists in the private sector work under a licence issued by the state authority, after completing the "1st grade attestation", (3-years' preparation after graduation). The dentist has to be registered in the register of the Slovak Chamber of Dentists and he has to substantiate to the state authority the confirmation of his professional and ethical eligibility, issued by the Slovak Chamber of Dentists. For the graduates in 2009 the "1st grade attestation" will not be compulsory anymore.

The steps are as follows:

1. Recognition of the diploma – this must be done by sending a request, together with an authenticated copy of the diploma, an official translation and a copy of the syllabus studied, to the Ministry of Education, department for diploma recognition.

2. Pass a linguistic examination of knowledge of the Slovak language, controlled by the Ministry of Education. One of the conditions needed for registration in the Chamber for foreign dentists is confirmation on language test. The language tests are ensured by the Comenius University, department for foreign languages. The dentist must be able to communicate with the patient.

For the regulations related to practising please see the later section.

#### *Language Testing*

As stated above, a potential registrant must pass an examination of the ability to speak and understand the Slovak language. The Ministry of Education is responsible for issuing of the certificate on language tests for foreign dentists, which is one of the conditions needed for registration with the Chamber.

However, language knowledge is only a prerequisite for obtaining a licence which entitles independent practise of dentistry and is not necessary for employees or for registration. Language testing is not compulsory for every overseas applicant, but it may be ordered for those about whom there are serious doubts about the language knowledge. The dentist must be able to communicate with the patient.

Cost of registration (2008)	€ 15
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### Further Postgraduate and Specialist Training

#### *Continuing education*

Dental surgeons are under a statutory obligation to take part in continuing education. Control over continuing education is responsibility of the Chamber which supervises and provides the Quality Assurance.

The schemes are provided by universities, the Chamber and the employers. A dentist who does not complete the continuing education requirement breaks the rules and the duties of a member of the Chamber, which will be announced to the responsible authorities (the Health Care Surveillance Authority). In continuing education, credit is the basic unit set for evaluation of continuing education in Slovakia. Generally it is a time period of 45 minutes the medical employee has to spend in the process of continuing education.

All medical employees have to prove the continuing education to their Professional Association that is responsible for maintenance of the Register, update and maintenance of their competences on the level required by the law and this must be done in a written form to the employees responsible for Register of appropriate medical profession.

Continuing education in dentistry is evaluated by the Chamber in a five year period. The first evaluation is done after five years after registration of the dentist in the Chamber and every consecutive evaluation is done after five years from the last evaluation. The condition of continuing education is fulfilled, if the dentist can proof 250 credits for the evaluated period.

#### *Specialist Training*




Slovakia has 3 main specialties:

-  Orthodontics
-  Paediatric Dentistry
-  Oral Maxillo-facial Surgery

Dental surgeons are also entitled to specialist education and training. Study is for 3 years in Orthodontics and Paedodontics. Maxillo-facial surgery lasts 4 years.

Specialist training is conducted according to a given specialisation programme, determined by the Medical University of the Ministry of Health. This institution also determines the form, length and course of the studies. The education is also supervised by this institution. The dentist's participation in study is recorded by the Medical University in the cooperation with the Chamber. The co-ordinating role in continuing education is undertaken by the Chamber together with the educational institutions and associations of specialists. Training takes place at dental clinics, or at the Slovak Medical University, or in dental practice under supervision of a specialist.

The titles upon completion of the courses are:

-  Specialist in orthodontics (celustný ortopéd)
-  Maxillofacial surgeon ("maxilofaciálny chirurg")
-  Specialist in paedodontics ("pedostomatológ")

Since 2003 training for periodontics and prosthodontics has ceased (it was 3 years), but those who have already qualified in these specialties and those entering Slovakia from abroad are recognised as such.

Registration of specialists, like all dentists, is by the Slovak Chamber of Dentists.

## Workforce

### Dentists

Year of data:	2007
Total Registered	3,185
In active practice	3,085
Dentist to population ratio*	1,751
Percentage female	61%
Qualified overseas	0

Over 80% of active dentists work in private practice (90% with an agreement, and 10% with no agreement with insurance companies).

The Chamber expects that the active dental workforce will decrease. In 2008, more than half of all active dentists were over 50 years and it is presumed that during the early years of the century more dentists will leave their practices due to reaching retirement than will join the profession.

#### *Movement of dentists across borders*

The Chamber registered 73 requests for a "certificate of good standing" from dentists planning to leave Slovakia to work, during the period 2004 – 2008. This certificate is among the conditions to be registered abroad.

#### *Specialists*

There is a specialist register held by the Chamber.

Patients do not go directly to specialists and are always referred.

Year of data:	2007
Orthodontics	198
Endodontics	
Paedodontics	74
Periodontics	95
Prosthodontics	64
Oral Radiologists	
Oral Surgery	89
OMFS	26
Dental Public Health	
Stomatology	2,614

"Stomatology" is described in Slovakia as "specialisation", but in most countries it would be described as "mandatory vocational training", as the training does not follow the usual specialisation model in the EU. The training will cease from 2009.

### Auxiliaries

There are two kinds of clinical auxiliaries in Slovakia – Dental Hygienists and Dental Technicians. Additionally, there are dental nurses and receptionists.

Every medical employee has a lawful obligation to undertake continuing education.

Year of data:	2007
Hygienists	148
Technicians	1,461
Denturists	0
Assistants (estimated)	4,000
Therapists	0
Other	0

If auxiliaries are employed at public establishments they are full-time employees; in private establishments and in the case of private practice they may either be a full-time or part-time or in other forms of employment provided for by the law. The provisions of the labour code are binding.

In non-public establishments various forms of employment envisaged by the law occur. This means that whether work is full-time or part-time, there must be prior agreement on the execution of a work and the working activity.

#### *Dental Hygienists*

The training for dental hygienists is conducted at state medical schools. There are two schools in Slovak Republic, in Bratislava and in Prešov. After high school (and obtaining of A level) they may study in a 2-year specialised course in dental hygiene at the supra-structural school in Bratislava or a 3-years study for dental hygienists in Prešov (see below) - graduation degree is Bc (bachelor). Then the dental hygienist obtains a professional title, Diploma of Dental Hygienist. They are registered at the Association of Dental Hygienists.

Dental hygienists cannot work alone – they must work only under the supervision of the dentist. They must be employed by a dentist. They can diagnose, but only to the extent of the nature of their work. So, they can diagnose periodontal diseases, by assessing PBI, CPITN, the status of loose teeth, the level of inflammation of the gingivae and so on, but they cannot assess whether the extraction of a tooth should be made (and other such cases) that only a dentist would assess.

They cannot give local anaesthetics, nor can they accept monies from patients, although they may sell oral healthcare products such as toothbrushes.

It is not possible to estimate how many registered hygienists are actively working.

#### *Dental Technicians*

Training for dental technicians is conducted at secondary schools. The length of the course is 4 years and the student gains the title Dental Technician. Without this title they cannot open their own laboratory.

For opening their own laboratory a technician has to pass 2 years' of specialised study after completion of general A-level study and obtain the title *Diploma Dental Technician*. He or she then has to register at the Slovak Chamber of Dental Technicians.

Technicians can work in commercial laboratories, or be an employee of a dentist or of a clinic. In 2007, it was reported that about three quarters of registered technicians were actively working – half in independent dental laboratories dental technicians, and a quarter employed by the public dental service.

The independent practice of denturists is illegal in Slovakia.

### *Dental Assistants (Nurses)*

They are educated at secondary schools for 4 years, with a leaving examination - baccalaureat. They work at the chairside, as employees of dentists. A dentist may not undertake treatment without the presence of a dental assistant.

The training of dental nurses is formal and lasts for 4 years. The dental nurses (chair-side assistants) are registered in the section for Nurses working in Dentistry of the Chamber of Nurses and Midwives. This section is very new – it was created in 2007.

## Practice in Slovakia

Year of data:	2007
General (private) practice	2,563
Public dental service	622
University	93
Hospital	29
Armed Forces	24
General Practice as a proportion is	83%

### Working in Liberal (General) Practice

About 90% of private dentists have an agreement with an insurance company. The insurance company and the district are assigned by a public dentist. These dentists work mostly in former public institutions, where they rent the premises, and sometimes also the dental equipment. They are paid from the health insurance according to their output, paid fully or partly by the insurance company (depending upon the patient's co-payment). The insurance company does not pay for treatment if there is no agreement between the dentist and the patient.

Payments from insurance companies are up to the limit of a budget. After depletion of the limit, the insurance company does not pay anything. In other words, the free choice of dentist is circumscribed by the agreement between the patient and the dentist. The patient has to have an agreement with a dentist. He can then change dentist after 6 months.

### *Fee scales*

As fees paid by the insurance companies are low and these may not cover the expenses of the practice in providing the prosthesis. Treatments that are not in the Medical Order must be paid for in full by the patient. This (supplementary) payment is calculated in a free market, but according to the operating costs of the practice.

"Liberal" practitioners calculate their own prices (a price list must be displayed on the wall of the practice). Net profit can be a maximum of 30% (according to Law No. 18/1996 on prices). This is checked by the fiscal bureau/office. A dentist whose profit is more than 30% breaks the law on prices, which may lead to a fine or other sanctions.

### *Joining or establishing a practice*

There are three steps towards establishing general practice:

1. Registration at the Slovak Chamber of dentists. Documents needed by the registration: education (verified diplomas and certificates on education and specialisation), criminal record check, payment of the registration fee.
2. A Licence for individual execution of the dental profession is issued by the Chamber. Documents needed for the license: health fitness, education, respectability (criminal records), no disciplinary measures within the last 2 years, payment of the fee.
3. Permission issued by the municipality office according to the regional competence. For the permission following documents are needed: copy of the license from Chamber, copy of the premises rental or ownership confirmation, copy of the payment order of the administrative fee, hygiene institution report.

Employees – graduates of the Medical faculty, clinical employees, who work in this field also have to be registered in the register of the Slovak Chamber of Dentists, but they do not need the licence issued by the state authority.

There are no limitations as to the building type, but there is a limitation as to the minimum size of the floor area. There is no regulation relating to the number of partners (employees) or the number of patients. The minimum requirements (personnel, space, and equipment) are set by the Act 428/2006.

The state does not subsidise the costs of opening an individual practice or establishment.

Once established, the dentist must be registered in the Chamber. They may form a company or register their own establishment or clinic. They may not start their own practice until 3 years have passed from the moment of completion of their study and obtain the right to practice in the profession. After 2009, graduates with MDDr. will be entitled to open their own practice; they will not need to do the 3 years vocational training.

Patient lists must be kept - this means that the dentist has to have a *written* agreement with all patients and must retain the documentation for all the patients.

## Working in Public Clinics

There are public polyclinics in the Slovak Republic. These are clinics which include a number of health professionals (including dentists) who supply health services in the same venue. They do not supply hospital-type services. They may be owned by the municipality or even private individuals. The number of these health care professionals is set by the government in the Act on minimum net.

Every insured person may benefit from attending them, but they may also provide services paid directly by the patient. All clinical controls are the same, but the responsibility for the facilities lie with the owner of it.

Persons employed at public establishments receive a fixed remuneration (salary).

## Working in Hospitals

Hospitals are public property. They tend to be clinics and university hospitals and certain hospitals in larger cities. There are a number of private hospitals run, for example by the Church, municipality offices or individuals.

Procedures tend to be maxillofacial surgery, undertaken by maxillofacial surgical specialists.

## Working in Universities and Dental Faculties

There are two medical faculties which include dentistry as part of their teaching. The dentists who work in these dental schools are normally full-time salaried employees of the university. They may be allowed the combination of part-time teaching employment and private practice (with the permission of university).

The titles of university teachers are:

- ✚ Academic (for teachers): Doc. (Docent), Prof. (Professor)
- ✚ Scientific: CSc. (Candidate of Science), DrSc. (Doctor of Science), PhD

This involves a further degree (publication activities and a record of original research).

## Working in the Armed Forces

There are dentists working in the armed forces. Some are professional soldiers but the majority are employees in army institutions.

# Professional Matters

## Professional associations

The main dental association is the Slovak Chamber of Dentists. The endeavour of the Chamber is to reach an independent, equitable and serious evaluation of the work of dentists, and to create an environment and conditions for a high-quality provision of dental services for patients on an international level, in all the dental practices in Slovakia, and to move the development of Slovak dentistry towards a modern Europe. Membership of the Chamber is voluntary, except for the licensing referred to previously.

	Number	Year	Source
Slovak Chamber of Dentists	3,200	2008	FDI

The Slovak Chamber of Dentists has 8 Regional Chambers. The chambers are not self-governing organisations, they are one body with the Chamber. The important constituent parts are:

Statutory body: The President

Bodies of the Chamber:

- ✚ Assembly (highest body, meetings are held minimum once a year, usually twice a year)
- ✚ Council (meets 4 times a year)
- ✚ Presidium (once a month)
- ✚ Control Committee
- ✚ Honourable Council – name changes into Disciplinary committee

## Ethics and Regulation

### *Ethical Code*

Dental surgeons are bound by the ethical code. The ethical code is a part of the Act No. 578/2004. This act defines the duties regarding membership of the Chamber and the duties concerning the provision of services.

According to the ethical code, a dental surgeon must not impose his service, or gain patients, in a manner inconsistent with ethical and deontological principles, and the rules of loyalty to fellow practitioners.

### *Fitness to Practise/Disciplinary Matters*

The sanctions against dentists who break the ethical code are defined in the Act. This may lead to an admonishment. If he repeatedly fails to respect the admonishment, then a fine of up to SK 10,000 (€300) or up to SK 50,000 (€1470) from breaking the obligations of a member of the Slovak Chamber of Dentists repeatedly may result.

The ultimate sanction is to be excluded from membership of the Slovak Chamber of Dentists. This fact will be announced to the responsible authorities (Health Care Surveillance Authority).

*Data Protection*

Act No. 428/2002 on the Protection of Personal Data regulates the use of information. This act is based on the EU Directive.

*Advertising*

Dentists may inform the public of the dental service they provide but the content and form of such information must also be exempt from the features typical of commercial advertising.

Information may be placed in the press. The dentist can present medical themes in front of the public, in TV, radio, or press but cannot act unworthily by using this to augment the number of patients.

Every dentist may run his own website. However, in 2008, the ethical code did not yet contain a chapter on the regulations following from the Electronic Commerce Directive.

*Indemnity Insurance*

It is compulsory for dentists to have malpractice insurance. Insurance is concluded with insurance companies active on the insurance market. The amount covered is for claims up to SKK 1,000,000 (€24,000). When the dentist provides surgical services also, it can be over SKK 1,000,000. A patient is entitled to lodge a complaint and demand compensation before a court. Every dentist has to be insured against civil liability for the practice of his profession.

Insurance is concluded with insurance companies active on the insurance market. The Chamber has a collective contract of insurance covering members and also the secretariat of the Chamber. Very often the insurance packages include other types of insurance as well (such as surgery, flat, house, car, etc.). The insurance rate is not conditioned by the form of practice, whether it is under employment contract or private. But it does depend on the value of the equipment. Slovak dentists combine both forms and work both under employment contract and pursue private practice. If there are claims on the part of the patient and a public establishment is involved, the establishment is liable. Nevertheless, if a dentist's fault is proven, the establishment may claim return of the incurred costs. The cost of cover up to SKK 1,000,000 for a non-specialist would be about SKK 6,000 (€140) for 1 year.

This does not cover a Slovak dentist's practise abroad.

*Corporate Dentistry*

Dentists in Slovakia may form companies. A non-dentist can be a shareholder, member of the board, or even the owner of the company, but when he is an owner he has to have a professional guarantor.

*Tooth whitening*

In Slovakia, tooth whitening is a medical procedure, under Medicinal rules. It can be undertaken by dentists only.

**Health and Safety at Work**

All employees have to be checked and examined regularly by the specialist in preventive and occupational medicine ("pracovná zdravotná služba"). The risk-holder is the employer.

*Ionising Radiation*

The Public Health Authority of the Slovak Republic issues permission for the running and operating of ionising radiation equipment. For this permission the applicant must undergo a training course and pass an exam every 5 years.

*Hazardous Waste*

The EU Hazardous Waste Directive is incorporated into law and actively enforced. Amalgam separators are legally required.

**Regulations for Health and Safety**

<i>For</i>	<i>Administered by</i>
Ionising radiation	Institut of public health (Urad verejného zdravotníctva)
Electrical installations and Electrical devices	Revisory technicians authorised by the State testing institution
Waste disposal	Ministry of environment
Medical devices	Institut of public health (Urad verejného zdravotníctva)
Infection control	Institut of public health (Urad verejného zdravotníctva)

## Financial Matters

### Retirement pensions and Healthcare

The normal retirement age is 62 for a man and variable (according to the following table) for a woman:

	man	woman				
Number of children	Always 62	0	1	2	3-4	5 - more
Retirement age		57	56	55	54	53

A dentist may work beyond normal retirement age. The pension depends on the number of years that the dentist has worked, and also on the salary or profit through his life.

### Taxes

There is a flat rate of national income tax of 19%

### VAT

The general rate of VAT in Slovakia is 19% and for drugs and medicines it is 10%.

### Various Financial Comparators

Zurich = 100	Bratislava 2003	Bratislava 2008
Prices (excluding rent)	38.3	56.7
Prices (including rent)	38.9	54.8
Wage levels (net)	9.8	19.0
Domestic Purchasing Power	26.2	34.6

Source: UBS August 2003 & January 2008

## EU Manual of Dental Practice: version 4 2008

### Other Useful Information

<i>Competent authority:</i>	
<i>Registration and issuing licences:</i>  Slovenská komora zubných lekárov The Slovak Chamber of Dentists Fibichova 14 821 05 Bratislava 2 Slovakia Tel: +421 2 43 29 31 22 Fax: +421 2 43 41 31 98 Email: <a href="mailto:dent@skzl.sk">dent@skzl.sk</a> Website: <a href="http://www.skzl.sk">www.skzl.sk</a> The Chamber is also the Professional Association	<i>For recognition of a diploma:</i>  Ministerstvo školstva SR Ministry of Education of Slovak Republic Section for education diploma recognition Stromová 1 813 30 Bratislava Tel: +421 2 59 23 81 23 Fax: +421 2 59 23 81 24 E-mail: <a href="mailto:naric@minedu.sk">naric@minedu.sk</a>
<i>Details of indemnity organisations:</i>	<i>Main information centre:</i>
Všeobecná zdravotná poisťovňa The General health insurance Tel: +421 2 67 27 71 11 Fax: +421 2 62 41 26 31 E-mail: Website: <a href="http://www.vszp.sk">www.vszp.sk</a>	Ministerstvo zdravotníctva SR Ministry of health Tel: +421 2 59 37 31 61 Fax: +421 2 54 77 76 59 E-mail: <a href="mailto:ozv@health.gov.sk">ozv@health.gov.sk</a> Website: <a href="http://www.health.gov.sk">www.health.gov.sk</a>
<i>Major Specialist Associations:</i>	<i>Main Professional Journals:</i>
Slovenská ortodontická spoločnosť The Slovak Orthodontic society Tel: +421 2 65 42 23 05 Fax: none E-mail: <a href="mailto:alex1@netax.sk">alex1@netax.sk</a> Website: none President/ contact person: Dr. Gabriela Alexandrová  Name: Slovenská stomatologická spoločnosť Sekcia Maxillo-faciálnej chirurgie Tel: Fax: E-mail:	Name: Zubný lekár The Dentist Tel: +421 2 48 20 40 73 Fax: +421 2 43 41 31 98 E-mail: <a href="mailto:zubnylekar@skzl.sk">zubnylekar@skzl.sk</a> Website: <a href="http://www.skzl.sk">www.skzl.sk</a>  Name: Stomatológ The Stomatologist  Tel./Fax: +421 2 905 360 496 E-mail: <a href="mailto:durovic.eugen@netkosice.sk">durovic.eugen@netkosice.sk</a> Website:

### Dental Schools:

Medical Faculty with specialisation in dentistry:  Bratislava Name of University: Univerzita Komenského Lekárska fakulta Univerzity Komenského Špitálska 24 813 72 Bratislava Tel: +421 25 9357 466 or 52 961 736 Fax: +421 25 9357 201 or 52 925 574 e-mail: <a href="mailto:sd@fmed.uniba.sk">sd@fmed.uniba.sk</a> Website: <a href="http://www.fmed.uniba.sk">www.fmed.uniba.sk</a>  Dentists graduating each year: 28 Number of students: 200	Medical Faculty with specialisation in dentistry:  Košice Name of University: Univerzita Pavla Jozefa Šafárika Univerzita P. J. Šafárika v Košiciach Lekárska fakulta Trieda SNP c.1 040 11 Košice Tel: +421 55 6428 141 Fax: +421 55 6428 151 or 6420 253 e-mail: <a href="mailto:gdovin@central.medic.upjs.sk">gdovin@central.medic.upjs.sk</a> Website: <a href="http://www.medic.upjs.sk">www.medic.upjs.sk</a>  Dentists graduating each year: 17 Number of students: 250
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