



Council of European Dentists

MANUAL OF DENTAL PRACTICE 2014

Romania

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The revised EU Manual of Dental Practice (Edition 5) was commissioned by the Council of European Dentists¹ in April 2013. The work has been undertaken by Cardiff University, Wales, United Kingdom. Although the unit had editorial control over the content, most of the changes were suggested and validated by the member associations of the Committee.

About the authors²

Dr Anthony Kravitz graduated in dentistry from the University of Manchester, England, in 1966. Following a short period working in a hospital he has worked in general dental practice ever since. From 1988 to 1994 he chaired the British Dental Association's Dental Auxiliaries' Committee and from 1997 until 2003, was the chief negotiator for the UK's NHS general practitioners, when head of the relevant BDA committee. From 1996 until 2003 he was chairman of the Ethics and Quality Assurance Working Group of the then EU Dental Liaison Committee.

He gained a Master's degree from the University of Wales in 2005 and subsequently was awarded Fellowships at both the Faculty of General Dental Practice and the Faculty of Dental Surgery, at the Royal College of Surgeons of England.

He is an Honorary Research Fellow at the Cardiff University, Wales and his research interests include healthcare systems and the use of dental auxiliaries. He is also co-chair of the General Dental Council's disciplinary body, the Fitness to Practise Panel.

Anthony was co-author (with Professor Elizabeth Treasure) of the third and fourth editions of the EU Manual of Dental Practice (2004 and 2009)

President of the BDA from May 2004 until May 2005, he was awarded an honour (OBE) by Her Majesty The Queen in 2002.

Professor Alison Bullock: After gaining a PhD in 1988, Alison taught for a year before taking up a research post at the School of Education, University of Birmingham in 1990. She was promoted to Reader in Medical and Dental Education in 2005 and served as co-Director of Research for three years from October 2005.

She took up her current post as Professor and Director of the Cardiff Unit for Research and Evaluation in Medical and Dental Education (CUREMeDE) at Cardiff University in 2009. With a focus on the education and development of health professionals, her research interests include: knowledge transfer and exchange; continuing professional development and impact on practice; workplace based learning.

She was President of the Education Research Group of the International Association of Dental Research (IADR) 2010-12.

Professor Jonathan Cowpe graduated in dentistry from the University of Manchester in 1975. Following training in Oral Surgery he was appointed Senior Lecturer/Consultant in Oral Surgery at Dundee Dental School in 1985. He gained his PhD, on the application of quantitative cyto-pathological techniques to the early diagnosis of oral malignancy, in 1984. He was appointed Senior Lecturer at the University of Wales College of Medicine in 1992 and then to the Chair in Oral Surgery at Bristol Dental School in 1996. He was Head of Bristol Dental School from 2001 to 20004.

He was Dean of the Faculty of Dental Surgery at the Royal College of Surgeons in Edinburgh from 2005 to 2008 and is Chair of the Joint Committee for Postgraduate Training in Dentistry (JCPTD). He has been Director of Dental Postgraduate Education in Wales since 2009. His particular interest now lies in the field of dental education. He was Co-ordinator for an EU six partner, 2-year project, DentCPD, providing a dental CPD inventory, including core topics, CPD delivery guidelines, an e-learning module and guidelines (2010-12).

Ms Emma Barnes: After completing a degree in psychology and sociology, Emma taught psychology and research methods for health and social care vocational courses, and later, to first year undergraduates. Following her MSc in Qualitative Research Methods she started her research career as a Research Assistant in the Graduate School of Education at the University of Bristol, before moving to Cardiff University in 2006, working firstly in the Department of Child Health and then the Department of Psychological Medicine and Clinical Neurosciences.

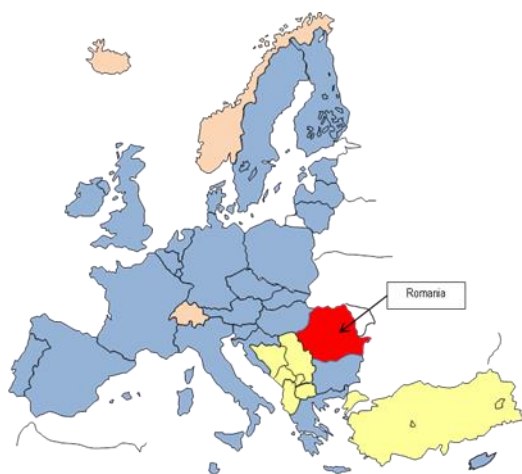
In 2010 Emma joined Cardiff Unit for Research and Evaluation in Medical and Dental Education (CUREMeDE) as a Research Associate. Working in close collaboration with the Wales Deanery, (School of Postgraduate Medical and Dental Education), her work focuses on topics around continuing professional development for medical and dental health professionals, and knowledge transfer and exchange.

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Romania



In the EU/EEA since	2007
Population (2011)	20,057,458
GDP PPP per capita (2012)	€9,796
Currency	Romanian New Lei (RON) 4.44 RON = €1.00 (2013)
Main languages	Romanian

Romania has a healthcare system which depends on the compulsory membership of each insured citizen in the Social Health Insurance System. It provides a legally prescribed standard package of general and oral healthcare. Most dental care is provided under private arrangements.

Number of dentists:	15,500
Population to (active) dentist ratio:	1,393
Membership of the Dental Association::	25%

Specialists are widely used, but there are no clinical auxiliaries. Continuing education for dentists is mandatory, and is administered by the Romanian Collegiums of Dental Physicians (RCDP), to which all dentists must belong.

Last amended: 21st December 2013

Warning: this section was prepared with the assistance of a former senior officer of the Romanian Collegiums, and the use of the internet, but without any cooperation from the official authorities or academic institutions. Some of the data may not be entirely consistent with the current (in 2014) situation.

Government and healthcare in Romania

Romania is situated on the Black Sea, between Ukraine and Bulgaria – with a land area of 237,500 sq km.

It is governed as a constitutional republic with an elected parliament with two chambers. The country is administered as 41 counties and 1 municipality, the capital Bucharest.

The statutory health insurance system was established in 1998. General and oral health care depends on the compulsory membership of each insured citizen in the Social Health Insurance System. The National Social Health Insurance House (NSHIH) at national level and County Social Health Insurance House (CSHIH) at county and capital level administrate the system. The whole population is insured and pays monthly a fixed amount of their salaries to the CSHIH, situated in the county where they live. The system of social health insurance provides a legally prescribed standard package of general and oral healthcare.

Financial sources from general taxation (from the national Budget) are only for the general prevention programmes, managed by the Ministry of Health and Family. The budget for NSHIH is directly proportional to the level of the salaries of the population. In every year the budget of NSHIH is estimated according to the previous year's budget, adjusted for inflation.

The administration of the NSHIH establishes at every year-end, by negotiating with the Romanian Collegiums of Dental

Physicians (RCDP), the expenditure for the different medical specialties (hospitals, family medicine, specialties, emergencies, drugs, and dentistry). At the end of 2002 the Government ended the right of the RCDP to be a negotiating organisation, and established that the Ministry of Health and Family together with NSHIH undertook all the activities of social health insurance system.

The funds for NSHIH are met by a 12.5% levy on salaries (employers contribute 7% of salaries and employees 5.5%). The different level of contribution to NSHIH generated by the different levels of salaries does not affect the level of quantity or quality of the health care. The allocation of monies and resources is managed by the NSHIH and CSHIH, which are the legal financing institutions. The main functions of NSHIH and CSHIH are to pay the providers of medical and dental services and to control the quantity and quality of the services.

They represent the interests of the general community of the insured persons. In the original text of the law the Board of the NSHIH and CSHIH must be democratically elected by a general assembly of the insured persons but in practice this does not happen, because they are under Government control and designated by the Government. The legal framework of NSHIH and CSHIH restrict their activities only to social health care.

From the beginning of the social health insurance system, the Romanian Dental Association of Private Practitioners (RDAPP) had many proposals to improve the laws and regulations and to

introduce more rights for dentists who work in the NSHIH. A number of proposals for the improvement of the law of NSHI were made by RDAPP to the Senate and the Deputies' Chambers, when the law was being reviewed by the Parliament. In a new Law in 2002, about Social Health Insurance, many of the proposals of the RDAPP were accepted.

The followings groups are exempt from paying monthly contributions for NSHIH:

- ✚ children and young people until 18 years old,
- ✚ unemployed persons, pregnant (retired) women and after-pregnancy (retired) women,
- ✚ persons who undertake military service, war veterans and seriously war-wounded,
- ✚ political prisoners and 1989 revolutionaries,
- ✚ disabled persons.

The special institutions of the Government (Treasury, Ministry of Work and Social Solidarity, the Secretariat of Government for Disabilities Persons, etc.) are responsible for these special groups.

There is no more up to date available information

	Year	Source
% GDP spent on health	5.8% 2011	World Bank
% of this spent by government	80.2% 2011	World Bank

Oral healthcare

There is no up to date available information

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

Almost 90% of dentists are private; they have fiscal code and all kinds of legal authorisations for liberal practice, with full responsibilities. 60% of dentists are owners of their dental offices. 30% of dentists are not owners, but work in old buildings offered temporarily, for an annual fee of aprox. €50, set by the government, which is the real owner. Since 1994, when healthcare reform began, there have been many proposals by the government to sell their medical and dental offices to their occupants, but these have never been finalised - maybe for political and social reasons. 10% of dentists work as employees in primary schools and dental faculties.

Almost 20% of Romanian dentists, owners or non-owners of their dental offices, work within the CSHIH. The other 80% of

the dentists work in a completely liberal (private) system, with direct payments from patients only. The number of CSHIH dentists is limited by the Social Health Insurance Houses at county level.

Only 1% of the medical funds of the CSHIH are spent on dental treatments - the greatest part of the funds is spent in hospitals (75%), or for family medicine (10%), etc. It is estimated that patients directly pay at least 90% of the costs of dental treatments.

They are major differences between access to medical and dental care in the population: at rural level only 25% of the population access dental treatment; at urban level, 75% of population access it. However, there are some shortages of dentists working in inner city areas and some specific social groups (children, farmers, retired persons) are having trouble accessing dental care at rural level.

Insured patients would normally receive annual prevention control.

Public Compulsory Health Insurance

The social health insurance provides cover for all prevention and treatments for children and young people, until they are 18 years old. For adults, the NSHIH initially covers 10% of the costs of the list of dental treatments. Patients directly pay the difference of 90%

The RDAPP created and proposed to the NSHIH and RCDP the concepts of basic (social) dental care for adults and optional (free) dental care for adults. In the first years (1998-2000) the concepts were respected, the NSHIH covered only 25% of the entire list of dental treatments and 75% of treatments were optional.

Then, from 2001 to 2004 the package of social dental care increased to over 55% and the optional treatments were only 45%. In the same last period the proportion allocated to dentistry was decreased from 3.5% to a nominal 2% (but actually to 1%). This was not enough for all dental treatments, and the NSHIH covered children's prevention and adult's emergency care only.

In 2013, due to the economic and financial crisis which affected Europe and had also consequences and effects in Romania, the budget for dental care was transferred to patients who suffer from cancer. It was an unprecedented political measure taken by the Ministry of Health.

Following proposals of RDAPP to improve the dental social health insurances, which had been invited by the Ministry of Health to a "Partnership for Health", since the beginning of 2004 in *Norms of Application of the Frame Contract* between dentists and NSHIH, the following treatments are supported by the social health insurance:

- Preventive care for children and adolescents – 100%
- Dental treatments of children and adolescents (up to 18 years) – 100%
- Pain relief and emergency treatments – 60%
- Basic surgical care (with emergency treatments) – 60%
- Risk-diagnostics and preventive consultation – 100%
- Mobile social acrylic dentures for adults – 100%

The quantity of dental treatments provided by dentists is monitored only in social health insurance, at county level, by the CSHIH. The quality of work claimed by dentists from the remuneration bodies is monitored in the social health insurance system, at county level, by the Romanian Collegiums of Dental Physicians.

Private dental care

A large number of dentists have completely private patients, who pay the total cost of care. Private fees are regulated by the internal rules of every dental office and generally they are established based on dentist's experience, competence and self-evaluation of expertise. A real free dental market was established between 1990 to 1998, with prices regulated by the principles of the market economy.

Approximately 75% of dentists have private patients only.

Private health insurance companies are not yet functioning in Romania (in 2013).

The Quality of Care

A mixed commission (CSHIH and the Romanian Collegiums of Dental Physicians), only following a complaint of a patient, can judge the quality of work in the NSHIH system. Outside the NSHIH, in the liberal system, the quality of dental work can be judged only by the RCDP. From the quality point of view, the County Social Health Insurance House has the right to control regularly the activities of dentists who have a contract with them, through an inspection commission composed of employees of the

CSHIH, which may or may not have dentist members. For further information see *Ethical Code*.

	Year	Source
DMFT at age 12	3.30	2007 WHO
DMFT zero at age 12	No data	
Edentulous at age 65	No data	

A full-time dentist working either in the NSHIH or in a private system would have about 1,000 to 1,500 patients who he would count as his "list".

There is no form of domiciliary dental care.

Health 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.

In October 2013, a study showed that caries experience in schoolchildren in Bucharest was 75 percent, and 64 percent had untreated caries. The mean DMFT value for the entire sample was 2.8, and its highest component was decayed teeth (mean DT 2).

Parental education level had the strongest influence on the caries scores; 70 percent of children whose parents had not completed a university degree had untreated caries (%DT) compared to only 49 percent of children whose parents had a higher level of education ($P < 0.05$).

Children with access to school-based dental care had significantly better dental health ($P < 0.05$).

<http://www.ncbi.nlm.nih.gov/pubmed/?term=Caries+experience+in+schoolchildren+in+Bucharest%2C+Romania%3A+The+PAROGIM+study>

Fluoridation

There are no water or other fluoridation schemes in Romania.

Education and Training

Undergraduate Training

To enter dental school a Romanian (citizenship) student needs to be a high school graduate and pass an entry examination. There is no need for vocational entry.

It is possible for non-nationals to study dentistry in Romania in English, French or Romanian. Admission is based on application file selection or on an examination. The main dentistry entry requirement is a high school diploma.

Dental schools were known as Faculties of Stomatology, as a part of a University of Medicine and Pharmacy, until 2003. From the 2003-04 academic year, they became Faculties of Dental Medicine.

Year of data:	2013
Number of public schools	10
Number of private schools	3
Student intake	1,800
Number of graduates	1,700
Percentage female	70%
Length of course	6 yrs

Publicly funded schools: Bucharest, Cluj-Napoca, Iași, Timișoara, Târgu-Mureș, Craiova, Constanța, Sibiu, Oradea, Galați.

Privately funded schools: București, Iași, Arad

Students have to pay no contribution for the state-funded faculties and the full costs for the privately funded faculties. As for all medical studies in Romania, the tuition fee amount for dentistry study depends varies within each university. The minimum tuition fee is €2,000 (for Romanian students) and the maximum is €5,000 a year (for a non- Romanian citizen) (2013).

Every state funded faculty also has the right to manage a limited number of private places for students each year, for both budgeted and fee-paying students.

The Ministry of Education monitors the quality of the training and the Council of the Faculty is directly responsible.

Qualification and Vocational Training

Primary dental qualification

Upon qualification, the graduates received the title "Physician stomatologist", until the 2002-03 graduate year. The title "dentist" was substituted from the start of the 2003-4 dental school year.

Vocational Training (VT)

For the licence examination, the graduate has to undertake a written test with 200 questions, a practical test and to defend his or her diploma project. A previous "probationary" scheme was abandoned following the curriculum change in 2003.

The Romanian Collegiums of Dental Physicians (RCDP) consider the lack of any vocational training a great danger both for the safety of the patients and for the quality of dental treatments and have been pressing for the introduction of one-year of minimal vocational training.

Diplomas from other EU countries are recognised without the need for any vocational training.

Registration

The RCDP registers all Dental Physicians and all specialists.

Language requirements

It is mandatory to know the Romanian language, to be registered with the RCDP. EU citizens must follow some study of Romanian language, followed by a written and oral evaluation test, for which they must pay 500 RON (€111.10), in addition to the relevant registration fee.

Cost of registration (1)	€ 11.10
Cost of registration (2)	€ 111.10

- (1) Romanian citizens
- (2) Non-Romanian citizens

Further Postgraduate and Specialist Training

Continuing education

Continuing education is compulsory for all dentists. Every dentist must undergo 200 hours of continuing education in every 5 year period. If they do not achieve this the Romanian Collegiums of Dental Physicians (RCDP) has the legal obligation to end the right of the dentist to practise.

The regulation of Continuing (Medical) Education is based on the following mechanism: the RCDP authorises annually the dental professional associations and the lecturers. A lecturer is allowed to provide courses and or hands-on demonstrations credited by the RCDP, on specific subjects only, under the organisational supervision of a professional dental association.

Each kind of scientific event (one-day course, symposium, conference or congress) is credited with a number of credits of CME value.

Specialist Training






For entering into specialist training dentists must have only their licensing diploma, as there is no vocational training. The specialist training is undertaken in the Dental Faculties and the Board of the Faculties monitors and are responsible for the quality assurance of the training.


There is training in 6 specialties:

- ✚ Orthodontics: 3 years training,
- ✚ Oral-maxillofacial surgery: 5 years training,
- ✚ Dento-alveolar surgery: 3 years training.
- ✚ Endodontics: 3 years training.
- ✚ Periodontology: 3 years training.
- ✚ Prosthetics: 3 years training.



Any dentist can undertake specialist training, but the Ministry of Health limits the number of specialists. The trainees are paid during their training by a fixed budgetary salary supported by the Ministry of Health. In this period it is forbidden to work in private dental practice. At the end they receive a specialist degree and the diploma:

-  physician specialist orthodontist;
-  physician specialist maxillo-facial surgery;
-  physician specialist dento-alveolar surgery;
-  physician specialist endodontist;
-  physician specialist periodontologist;

-  physician specialist prosthetician

From the former (communist system), Romania has an inheritance of two professional degrees: "specialist physicians" and "primary physicians", obtained after a period of home training followed by a final examination. These two professional degrees were held by a large number of generations of dentists. The first of these "specialist physicians" is at the origin of the "general stomatology" specialisation. The second one is a matter of higher fees in the NSHIH system.

Workforce

Dentists

Year of data:	2013
Total Registered	15,500
In active practice	14,400
Dentist to population ratio*	1,393
Percentage female	68%
Qualified overseas	450

* active dentists

The active dental work force is known by the RDAPP to be increasing. More than 40% of dentists are younger than 40 years.

There is no information about whether there are unemployed dentists.

Movement of dentists across borders

There are an unknown number of emigrant young dentists in the EU, the USA and Canada.

Specialists

Year of data:	2008
Orthodontics	412
Endodontics	
Paedodontics	
Periodontics	
Prosthodontics	
Oral Radiologists	
Dento-alveolar surgery	157
OMFS	234
Dental Public Health	

More up to data has not been supplied.

Specialists practice in dental faculties, hospitals, private dental offices, and they receive higher fees regularly from the CSHIH or optionally directly from the patients.

Patients being seen by a specialist within the social health system must be referred by a generalist. However, in liberal practice they may access a specialist directly, without the need for a referral.

Arising from the former (communist system), Romania has an inheritance of two professional degrees: 'specialist physicians' and 'primary physicians', obtained after a period of home training, followed by a final examination. These two professional degrees were held by a large number of dentists. The first of these 'specialist physicians' is the origin of the general stomatology'. The second one involves higher tariffs within the NSHIH system.

The RCDP is the body charged with the registration of all specialists.

Auxiliaries

There are limited numbers of clinical dental auxiliaries in Romania.

Year of data:	2013
Hygienists (2008)	100
Technicians	4,500
Denturists	8
Assistants*	2,000
Therapists	0
Other	0

* estimated

Dental Hygienists

In 2008, the RCDP provided data which showed that there were about 100 dental hygienists in Romania, but there is no further information about these.

Dental Technicians

Dental technicians are trained in dental technician colleges, organised in frame of the dental faculties. The training is for 3 years, with a final examination and a diploma. Since 2007 they have had to register with the Order of Romanian Dental Technicians.

<http://www.otdr.ro/files/rutd.pdf>

Dental technicians normally work in separate dental laboratories and invoice the dentist (or directly the patient) for completed prosthetic work. A small number of technicians are employees of dental offices and they are paid with a percentage of the fees for the prosthetics work.

There is some illegal dental practice practicing by non-specialised technicians, without a higher degree qualification, but the RCDP and RDAPP fight against these and the number of cases is decreasing every year.

Denturists

The RCDP have provided data which shows that there are 8 denturists in Romania, but there is no further information about these.

Dental Assistants (Nurses)

Dental assistants train in secondary medical schools, with 3 years of study and a final examination and diploma. They must be registered in the Order of Romanian Medical Assistants.

The duties of dental assistants are: assisting dentists, maintaining records, sterilisation, infection control, and office work. Dental assistants are paid a salary.

Practice in Romania (page unchanged since 2008)

Year of data:	2008
General practice (private)	6,603
General practice (CSHIH)	7,000
Public dental service	1,200
University	950
Hospital	234
Armed Forces	80
General Practice as a proportion is	88%

There is no further up to date information about these numbers.

The figures above add up to more than the number of active dentists in Romania. This is because most dentists who work in the public sectors also undertake some general practice. Those recorded as "General practice (private)" represent practitioners who do not work in the NSHIH.

Working in Liberal (General) Practice

Patients pay dentists who work in the private sector directly and completely. Every dentist chooses whether to work only with CSHIH (County System Health Insurance House) or in an independent way, or both. Of course, the financial position of the patient also determines the choice. There are two systems of payment, one is Item of Treatment Fees, for NSHIH dentists and the other direct patient full payment.

There is no prior approval for treatment necessary - only the consent of the patient, established freely and directly together with the dentist.

Fee scales

The fees for dentists in the NSHIH system were negotiated annually to 2002, between NSHIH and RCDP. Since the end of 2002 the fees have not been amended, as the NSHIH have said that the contract is not mandatory but optional for dentists.

The NSHIH pays dental services for dentists who accept the terms offered to them. Some work is completely paid, whilst other work is paid at only 40-60% of the cost. For children and under special laws the work is completely paid for but only out of the value of what the RCDP considers an insufficient maximum price (about €400). The reporting operation has to be done in an integrated computerised system.

The Parity Commission made up of PHB (Public Health Board), CSHIH (County System Health Insurance House), CCDP (County Collegiums of Dental Physicians) establishes the number of physicians' offices in contact with the CSHIH (County System Health Insurance House).

Joining or establishing a practice

The only restrictions are for the dentists who work with the NSHIH on setting up dental practice in big cities, which are full of dental offices. Here, the CSHIH establishes the number of new dental offices which are able to work with the CSHIH. However the local RCDP councils often allow dentists to establish themselves in liberal dental offices.

There are no rules regarding the type of a dental practice, in terms of building: house, apartment, and clinic. There is no

state assistance for establishing a new practice, so some dentists take out commercial loans from a bank. There are no limits regarding the maximum number of partners or associates or a maximum/minimum number of patients.

Any dentist can own a dental practice, and there is also provision for them to be run as limited companies (see Corporate Dentistry)..

It is possible to sell the equipment, as well as the building. The patients of a dentist who stops his activities may choose freely another dentist, including of course, the new owner, of an old dental office. However, there is no list of patients in Romania so a newly opened dental office must create its own list of patients.

When starting new practice, private dentists have to inform the local health authorities, and to obtain all the necessary authorisations and visas.

Working in Public Clinics

The number of dentists who work only in the public service is not exactly known, because they also work in their own dental offices. The main sector is public schools, but the number is decreasing every year.

The service is not limited. The patients (children) do not pay for their treatment. General prevention programmes of Ministry of Health and Family support the costs. All the dentists from schools are salaried and paid for by the County Health Board. The dentists who work in the public service may only treat patients inside the public dental service (CSHIH system).

The quality of dentistry in the public dental service is assured through the controls of County Health Board.

Working in Hospitals

Hospital dentists work in maxillo-facial surgery in hospitals. All of these dentists are employees of the hospitals, which are owned and run by regional government. They can work part-time in private practices.

Working in Universities and Dental Faculties

Academic dentists are normally salaried employees of the Faculty of Stomatology. They are allowed a combination of part-time teaching employment and private practice (with the permission of the faculty).

The titles of university teachers are: professors. This involves a further degree (publication activities, a record of original researches and the study for a PhD is also required).

Working in the Armed Forces

About 4% of the (full-time) dentists in the Armed Forces are female.

Professional Matters

Professional associations

	Number	Year	Source
Romanian Collegiums of Dental Physicians (RCDP)	14,000	2007	RCDP
Romanian Dental Association of Private Practitioners (RDAPP)	700	2012	FDI
Romanian Soc of Stomatology	200	2012	FDI

The **Romanian Collegiums of Dental Physicians (RCDP)** oversees and administers ethical issues. Since 2004 it has been a legally based, non-governmental organisation and serves the whole of Romania at national level. In each of 40 counties and in the capital, a regional body exists, which administrates ethical issues.

It is compulsory that all dental physicians in Romania - from hospitals, general dentistry, schools, army, etc. are members of the RCDP.

The **Romanian Dental Association of Private Practitioners (RDAPP)**, established in 1990) represents and defends the liberal dental profession. The RDAPP obtained from the Ministry of Justice, the quality mark of a "national representative association legally certified", which is very important for negotiation with the NSHIH.

Before accession, the EU Commission recommended the establishment of a new Law relating to the dental profession, "the Law for establishing the Romanian Collegiums of Dental Physicians". The RDAPP was consulted by the Parliament and 70% of the RDAPP's proposals were included in the Law about Romanian Collegiums of Dental Physicians

Specialists (orthodontists and oral-maxillo-facial surgeons), have their own professional associations.

Ethics

Ethical Code

Dentists work under a general physician ethical code, which covers relationships and behaviour between physicians, dentists, contracts with patients, consent, and confidentiality, continuing education and advertising. The ethical code is administered by the Romanian Collegiums of Dental Physicians.

Fitness to Practise/Disciplinary Matters

A complaint by a patient is first screened by the Local Board of RCDP and after is forwarded to a professional expertise commission of the RCDP

Complaints, which proceed, can be sent to a commission of dental experts, nominated from RCDP members with more than 10 years' experience.

The RCDP Commission of Dental Experts analyse the case and establish if the complaint is well founded. If this is confirmed, the consequences for the dentist are proportional to the gravity of the facts (medical problems and complaints,

financial problems and complaints, or both). The RCDP has gradual sanctions, ultimately which can lead to the suspension of a dentist. A complaint may be referred to the justice system

The final sanctions are validated by the County Council of Romanian Collegiums of Dental Physicians at county level - justice decisions are very rare.

The dentist can appeal to the RCDP Commission at national level and after to the regular court in those instances. If the official commission of the RCDP establishes that the dentist is guilty he must repeat the treatment, supporting all the costs.

Data Protection

Law number 6772001 makes it mandatory that any information about a person's data should be protected and not disclosed.

Advertising

Usually, advertising is not permitted, except for the first announcement of the opening of the new dental or medical office. However, many physicians do not respect this rule and use different ways of advertising (newspapers, flyers, radio, TV and the internet).

Dentists may use websites to inform and advertise their services, subject to the usual rules of advertising and commerce. The RCDP Code of Ethics does not include specific regulations regarding electronic commerce and they have not adopted the CED rules on this

Indemnity Insurance

Indemnity insurance is compulsory in Romania for all dentists whether they work or not within the NSHIH. All dentists are free to choose the financial covering level of indemnity insurance starting with a minimum level established by NSHIH. There are many insurance companies, which advise and defend dentists against complaints and accusations of malpractice. The RDAPP studies and recommends to the members the best companies.

Corporate Dentistry

From 1990 a large number of new private dental offices organised as limited companies -by non-medical investors - with their tax advantages. But from the beginning of 1998 the Law of Medical Offices introduced the right of every investor to open dental practices as Limited Companies, but this is limited by the regulation that only 1/3 of the associates can be non-dentists.

Tooth whitening

Despite the 2011 EU Directive, in 2013 there were still some beauty salons which offered a whitening service to their customers. This is not a legal practise, but it was said to be happening due to the passive attitude of the Romanian authorities, who had not taken any action by then.

Health and Safety at Work

All practising dentists and dental assistants must be inoculated against Hepatitis B - the County Health Board monitors these activities.

Ionising Radiation

There are specific and complex rules about ionising radiation. Training in radiation protection is given during undergraduate studies and the dentist is the only competent person in a practice to undertake radiography. However, there is no ongoing continuing education requirement.

Radiation equipment must be registered.

Hazardous waste

There are special orders of the Ministry of Health relating to the disposal of clinical waste. There is compulsory verifiable collection and incineration of biohazard contaminated medical and dental waste.

Amalgam separators are not required by law.

Regulations for Health and Safety

For	Administered by
Ionising radiation	CNCAN (National Council for the Control of the Nuclear Activities). At county level, the County Health Board.
Electrical installations	County Fire Brigade
Waste disposal	The County Inspectorate of Environmental Protection
Medical devices	The Ministry of Health and Family, at national level, through its specialized department SVIAM, administrate the rules relating to Medical Devices.
Infection control	The Ministry of Health and Family, at national level, and the County Health Board, at regional level, through the County Inspectorate for Transmissible Diseases.

Financial Matters (2013 data)

Retirement pensions and Healthcare

The set age for retirement is 60 years old for females and 64 years old for males. Dentists and dental auxiliaries can work after the retirement only in the private liberal system.

The compulsory deductions for Social Security are as in this table:

	Employer	Employee
Social Security	20.8%	10.5%
Health Fund	5.2%	5.5%
Unemployment Fund	0.5%	0.5%
Risk Fund	0.25%	--
Accidents Fund	0.15%-0.85%	--
Medical Leave	0.85%	--

There are also optional private pensions. In compulsory general social pensions, the level of pensions was €2,100 per year (in 2013), but in optional private pension schemes the level depends upon the contributions made.

Taxes

The unique rate of tax is 16%, which is applied to income, corporate and capital gains.

VAT

The standard is 24%. There are reduced rates of 9% and 5%. The reduced 9% rate applies to hotel services, books, newspapers and medicines. The reduced 5% rate applies to buildings supply.

Medical and dental services, insurance companies, banks and financial services in Romania are exempt.

For dental materials, instruments and equipment, VAT is the same as for general goods, 24%.

Various Financial Comparators

Bucharest Zurich = 100	2003	2012
Prices (including rent)	29.9	33.9
Wage levels (net)	11.9	10.2
Domestic Purchasing Power at PPP	31.4	27.3

Source: UBS August 2003 and November 2012

Other Useful Information (2008 data)

Competent and Legal Authority:		Dental Associations:	
Romanian Collegiums of Dental Physicians No headquarters in 2013 Bucharest Romania Tel: +40 21-222 5671 Fax: +40 21-222 5671 E-mail: secretariat@cmdr.ro Website: www.cmdr.ro		Romanian Dental Association of Private Practitioners 3, Voronet street, Bl.D4, Sc. 1, Ap. 1 (Floor 1) Sector 3 031551 Bucharest Romania Tel: +40 21-327.41.19 Fax: +40 21-323.99.69 E-mail: amsppr@dental.ro Website: www.dental.ro	
Main Specialist Associations:			
Romanian Society of Oral and Maxillo-Facial Surgery MirceaVulcănescu street, 88, Sector 1, 010816 Bucharest Romania Tel: +40 21-212.63.65 Fax: +40 21-212.63.65 E-mail: Website:		Romanian National Association Of Orthodontists Tel: +40 232-211.683 Fax: E-mail: Website: http://www.ortodontie-caroldavila.ro/anro/	
Romanian Society of Stomatology (Academic Association) IonelPerlea street, 12, Sector 1, 010209 Bucharest Romania Tel.: +40 21-614.10.62 Fax: +40 21-314.20.80 E-mail: Website:			
Main Professional Journals:			
Name: "ViațaStomatologică" (Dental Life) - RDAPP Tel: +40 21-327.41.19 Fax: +40 21-323.99.69 E-mail: amsppr@dental.ro Website: www.dental.ro		Name: "Stomatologia" (The Stomatology) - RSS Tel.: +40 21-614.10.62 Fax: +40 21-314.20.80 E-mail: Website	



Dental Schools: This information was taken from the internet in October 2013 and may not be accurate, as there was no response from any of the emails sent to every school with an email address.

There is no information about the number of students in each university, or the numbers graduating annually (except for BUCUREȘTI).

<p>City: IAȘI UNIVERSITY OF MEDICINE AND PHARMACY "G.T. POPA" – FACULTY OF DENTAL MEDICINE Prof. dr. Norina Consuela Foma, decanFacultatea de MedicinaDentara Tel: +40 232-301-618 Fax: +40 232-211-820 Email: ncfoma@CITEpi.umfiasi.ro Website: www.umfiasi.ro Intake 2013: 70 overseas students Language of teaching:</p>	<p>City: TIMIȘOARA UNIVERSITY OF MEDICINE AND PHARMACY « VICTOR BABEȘ » FACULTY OF DENTAL MEDICINE Tel: +40 256-220480 Fax: +40 256-220480 Email: stoma@umft.ro Website: www.umft.ro Intake: 2013: Language of teaching: ::</p>
<p>City: TÎRGU- MUREȘ UNIVERSITY OF MEDICINE AND PHARMACY – FACULTY OF DENTAL MEDICINE Tel: +40-265-21 55 51 Fax: +40-265-21 04 07 Email: rektorat@umftgm.ro Website: www.umftgm.ro/en/the-faculty-of-dentistry.html Intake: 2013: Language of teaching: Romanian and English</p>	<p>City: CLUJ-NAPOCA UNIVERSITY OF MEDICINE AND PHARMACY « I. HAȚIEGANU » FACULTY OF DENTAL MEDICINE Tel: +40-264-406-844 Fax: +40-264-597-257 Email: decanat_stoma@umfcluj.ro Website: www.meddent.umfcluj.ro/index.php/en/ Intake: 2013: Language of teaching: :</p>
<p>City: CONSTANȚA UNIVERSITY "OVIDIUS" FACULTY OF DENTAL MEDICINE Tel: +40 241 545697 Fax: +40 241 545697 Email: Website: www.ovidunivconstanta-edu.org/academic.php Intake 2013: Language of teaching: English</p>	<p>City: CRAIOVA UNIVERSITY OF MEDICINE AND PHARMACY – FACULTY OF DENTAL MEDICINE Tel: +40 251 524 442 Fax: +40 251 593077 Email: dentistry@umfcv.ro Website: www.umfcv.ro/en/faculty-of-dentistry Intake: 2013: Language of teaching:</p>
<p>City: BUCUREȘTI UNIVERSITY OF MEDICINE AND PHARMACY « CAROL DAVILA » FACULTY OF DENTAL MEDICINE Tel: +40 21 3155217 Fax: +40 21 3126765 Email: Website: www.umfcaroldavila.ro Intake 2013: Dentists graduating each year: 250 Number of students: 1500 Language of teaching: Romanian</p>	<p>City: SIBIU UNIVERSITY OF SIBIU FACULTY OF DENTAL MEDICINE Tel: +40 269 436777 Fax: +40 269 212320 Email: medicina@ulbsibiu.ro Website: www.ulbsibiu.ro/en/facultati/medicina/ Intake: 2013: Language of teaching:</p>
<p>City: GALAȚI (2013 information) FACULTY OF MEDICINE AND PHARMACY Str. Al. I. Cuza Nr. 35 , Galati Tel: 0336 130 217 Fax: 0236 412 100 E-mail: secretar.med@ugal.ro Website: http://www.fmfgl.ro/ Intake 2013: Dentists graduating each year: Number of students: Language of teaching:</p>	<p>City: ORADEA FACULTY OF MEDICINE AND PHARMACY Tel: +40 259-412834 Fax: +40 259-418266 Email: medas@rdsor.ro Website: www.oradeauniversity.com/facultyofmedicine.htm Intake 2013: Dentists graduating each year: Number of students: Language of teaching:</p>

PRIVATE FACULTY

City: BUCUREȘTI

UNIVERSITY OF MEDICINE AND PHARMACY
« TITU MAIORESCU » FACULTY OF DENTAL MEDICINE
Tel: +40 21 3251416
Fax: +40 21 3251415
Email :
Website:
Intake: 2013:

PRIVATE FACULTY

City :IAȘI

UNIVERSITY « APOLLONIA »
FACULTY OF DENTAL MEDICINE
Tel: +40 232 215922
Fax: +40 232 215900
Email :
Website:
Intake: 2013:
:

PRIVATE FACULTY

City: ARAD

WESTERN UNIVERSITY « VASILE GOLDIȘ »
FACULTY OF DENTAL MEDICINE
Tel: +40 257 228081
Fax: +40 257 228081
Email: medicina@uvvg.ro
Website: www.medicina.uvvg.ro/en/contact.html
Intake: 2013:
Dentists graduating each year:
Number of students:
Language of teaching: ::