PRESIDENT’S REPORT

It is an honour to present my first report as President of the Australasian section of this College (Section VIII).

Firstly I would like to acknowledge the contribution of Past President Dick Cook for the excellent job he has done as President of the Section during the past two years. I have previously worked with Dick on the Councils of the ADA and RACDS. I know from that experience that he always gives 100%. It has been the same with this College where he has enthusiastically guided the affairs of the Section.

The recent Convocation and Induction Ceremony in Brisbane – in conjunction with the 34th Australian Dental Congress, was very successful. It was well attended by over 200 Fellows, inductees and guests in an excellent venue. This was a record attendance and one which I hope we can repeat in the future.

I welcome the 57 new Fellows who participated in the Induction Ceremony on 1st April. I know from their albeit brief resumes which appeared in the program, that they possess the professional and leadership attributes that will enhance the activities of this Section of the College.

At the ceremony Dr Geoff Hall was awarded the status of Master of the College in recognition of his distinguished service to the ICD. I know that all Fellows join me in congratulating Geoff on this well-deserved honour.

It is also very pleasing to see the continued recognition of our Fellows in the National Honours lists as appears in this Newsletter.

Reports from Fellows involved in overseas aid and educational projects are also in this newsletter. I thank those Fellows who generously donate time and money, which are both essential elements for these beneficial programmes to continue.

The previous Convocation at the time of the NZDA Convention in Christchurch was also very successful. It is difficult to comprehend what has occurred in that welcoming and picturesque city since then. On behalf of the Section, I extend our sympathies to Fellows, their families and all who may have been affected and wish them a speedy rebuilding.

In concluding I want to thank Braham Pearlman who leaves the Board at the end of his term as Immediate Past President. As a member of the Board, and in positions of executive responsibility, Braham has been a source of consistent and educated advice. He will continue his contribution to College affairs by assisting with undergraduate and postgraduate education at the Dental School in Fiji. I also congratulate Braham on his election as President-elect of the RACDS. His wise counsel will be missed on the ICD Board.

David Thomson

Honours

In the New Zealand New Years Honours List, Warren Bell was awarded an ONZM and in the 2011 Australia Day Awards Terry Pitsikas (WA) and James Robertson (VIC) were both awarded an AM. Congratulations to these Fellows on this well-deserved recognition.
The awarding of the status of Master to Geoff is recognition of his many years of clinical practice, services to the dental profession and his tireless efforts over more than 20 years to the International College. The only current Fellow of the Australasian Section conferred the title of Master is Dr Syd Dobbin AM.

"Thank you for this great honour. To receive the highest honour that the College can award a Fellow is a wonderful privilege - at the same time it is a very humbling experience when I think of others from here and around the world who have done so much for the College and for dentistry – and I must sincerely thank the Australasian section and the College at large for making this award possible.

During my time of involvement with the College at both National and International levels I have always had great support and encouragement from everyone - from Board Members, Fellows and colleagues for which I am extremely grateful. It also allowed me to travel and meet Fellows from around the world, all who have the same purpose of fostering the aims and ideals of the College. It was a wonderful experience and a most enjoyable one.

Special thanks also must go to my family for their support – especially my wife Nonie who has always encouraged me and been most supportive over many years.

The Australasian section can be proud of its contribution to the College over the years. Many of our Fellows have been and are involved in various ways by their participation in the administration of the section to the wonderful work that is carried out through section projects both in third world countries and closer to home and others give freely of their time to the service of Dentistry. It is these Fellows who also deserve recognition for their efforts.

The pride in becoming a Fellow of the College must go beyond the induction ceremony. I know that we all lead extremely busy lives both within and outside our profession but I would urge you all to support the College, become involved in some way and in doing this I am sure you will benefit greatly as will the College. You will find it an enjoyable and rewarding experience.

As Abraham Lincoln aptly stated: 'It is not the years in your life that count, it is the life within those years.' Thank you again for the honour you have given me – it is a privilege and much appreciated.”

Dr Geoff Hall AM
In his response Dr Hall gave the following address:

The Australasian Section of the International College of Dentists (ICD) hosted an induction ceremony and dinner in Brisbane as part of the Australian Dental Association Biennial Congress. The induction and dinner were attended by more than 200 Fellows and guests. 57 new Fellows were inducted.

A highlight of the induction ceremony was the awarding of the status of Master of the International College of Dentists to Dr Geoffrey Hall AM of Adelaide. See related article elsewhere in this newsletter. Inductees were:

Caroline Acton, OMFS/Academic, QLD
Sherene Alexander, Specialist Paediatric Dentist, NSW
David Barnard, Endodontist, NSW
Andrew Barnes, General Practitioner, VIC
William Besley, OMFS, VIC
Petrina Bowden, General Practitioner, QLD
Mark Bowman, General Practitioner, VIC
Alan Broughton, Prosthodontist, SA
Paul Buchholz, Orthodontist, VIC
Peter Cathro, Endodontist/Academic, SA
Ernest Chan, Orthodontist, NSW
Philip Cockerill, General Practitioner, WA
Hedley Coleman, Oral Pathologist, NSW
Anthony Collett, Orthodontist, VIC
Ann Collins, OMFS, NSW
Robert De Poi, Periodontist, VIC
Roger Dennett, General Practitioner, QLD
John Denton, General Practitioner, SA
David Digges, General Practitioner, NSW
Stephen Duncan, Orthodontist, NSW
Brian Fitzpatrick, Prosthodontist, QLD
Simon Freezer, Orthodontist, SA
Rachel Garraway, Periodontist, QLD
Gregory Gee, General Practitioner, WA
Anastasia Georgiou, Oral Medicine/Oral Pathology, NSW
Mark Gervais, Prosthodontist, QLD
Anne Harrison, Endodontist, VIC
Trevor Holcombe, Specialist Paediatric Dentistry, QLD
Markijan Hupalo, Prosthodontist, NSW
Saso Ivanovski, Periodontist/Academic, QLD
Karen Kan, Specialist Paediatric Dentistry, VIC

Don Knowles, General Practitioner, QLD
Jeroen Kroon, Community Dentistry/Academic, QLD
Sharon Liberalli, Specialist Special Needs Dentistry, SA
Carmel Lloyd, General Practitioner, WA
Sabrina Manickham, General Practitioner/Academic, NSW
David Manton, Specialist Paediatric Dentistry/Academic, VIC
Elizabeth Martin, General Practitioner/Academic, NSW
Janis McAlloon, Prosthodontist, NSW
Gregory Moore, General Practitioner, QLD
Greg Murray, Oral Biology/Academic, NSW
Bruce Newman, Specialist Paediatric Dentistry, QLD
Steven Oppes, General Practitioner, SA
Steven Parker, GP Restricted to Sedation & Oral Surgery, NSW
Chris Peck, Academic, NSW
Neeta Prabhu, Specialist Paediatric Dentistry/Academic, NSW
Ellis Rosen, General Practitioner, NSW
Denise Salvestro, General Practitioner, NSW
Antonia Scott, Radiology/Academic, NSW
Simon Shanahan, General Practitioner, WA
Gary Smith, Prosthodontist, QLD
Peter Smith, General Practitioner, Auckland
Gerald Thurnald AM, OMFS/Academic, QLD
Graham Toulmin AM, General Practitioner, NSW
Thomas Tseng, General Practitioner, NSW
Joseph Verco, Specialist Paediatric Dentistry, SA
Erika Vinczer, Endodontist/Academic, SA

Inducted in absentia:
John Abbott, Prosthodontist/Academic, SA
Santo Cardaci, Endodontist, WA
Sumant Gue, Specialist Paediatric Dentistry/Academic, SA
Richard Logan, Oral Pathologist/Academic, SA
Paul Sambrook, OMFS/Academic, SA

The next ICD induction ceremony will be held in New Zealand in 2012 at the time of the NZDA Biennial Conference. The next ICD induction in Australia will be held in Melbourne in 2013 in early April at the time of the ADA Biennial Congress. For further information contact the Registrar: jackie_robinson@iinet.net.au
REPORT OF THE INTERNATIONAL COUNCILLOR CLIVE ROSS

“I am pleased to provide this report to Section V111 as your International Councillor to the ICD Council at Large.

At the Orlando meeting in October 2010 Dr Charley Siroky (USA) was elected World President for the ensuing year and Dr Garry Lunn (Canada) President Elect.

In January 2011 the incumbent Secretary General Dr Hoffield resigned and his replacement is Dr Jack Hinterman, previously the College editor. This is an excellent appointment and augers well for the management of ICD in the Central Office. Dr Hinterman has been replaced as editor by Dr Dov Sheldon previously editor for the European Section and an excellent appointment also.

Over the past 12 months the Central Office which previously was integrated into the US Section office has been working as a stand alone unit in a separate facility with one full time office person plus the Secretary General who is employed now on a three day basis. This is working well but obviously there are minor settling issues which are gradually being resolved.

Of greater importance to our Section is a current review of the structure and function of the Council at Large in which our Section has taken an active participation.

The brief given to me and a sub committee was to:
• Re-examine the Council at Large structure
• Evaluate Governance structure
• Evaluate size and function of the Council.
• Identify that any areas requiring modernisation had met the new independent status and International perspective of ICD.

Historically the Council at Large is represented by all Sections (18) with large representation from the US Section of (10) delegates, The Presidents of ICD have been from the US Section every alternate year, as have the annual meetings been held in the US on alternate years.

The process of nomination of officers has historically been through a “nominations committee” making recommendations to the Council at Large for ratification. The Past President retains voting powers on the Executive, and there is an Assistant Secretary General from the US Section.

As new Sections form around the world the size of the Council and associated costs escalate and the issue of language becomes more significant. This becomes of particular importance when a President from a non-English speaking Section is required to lead an annual meeting.

As the costs of running the Central Office come from Section contributions with little additional funds from other revenue, it is very important that administration costs and meeting costs are kept to a minimum.

I was asked to do a review of this structure to present findings to the last meeting in Orlando in 2010 and to open debate on the issues.

In summary the report suggested;
• That the council be restricted to 18 Sections and that member countries be encouraged to form regional representation to a larger Section rather than increase small individual Sections.
• That the maximum number of representatives from any one Section be no more than four and that a formula based on Section numbers and financial contribution be evolved.
• That the size of the voting executive be reduced and the nominations committee be abolished to allow free elections of officers by the Council at Large.
• That the current policy of electing a President from the US Section on alternate years and holding the annual meetings in US on alternate years be re-examined.
• That to facilitate effective management of the annual meetings a “Speaker’ who has a good understanding of the meeting process be appointed from the Council.

Clearly there is sensitivity around these recommendations but it is my view and supported by many on the Council that if the ICD is to be a truly international organisation this transparency must be developed.”

MEMBERSHIP

Membership as at March 2011 stands at 590, an increase of 11% on 2010.

Vale Fellows
The College records with regret the deaths of New Zealand Fellows, Peter Findlay, R B Guise and James McArthur and of Phillip Murray (NSW).

SECTION VIII PROJECT SUPPORT

The Australasian Section of the International College of Dentists supports many worthwhile oral health related projects throughout the Asia-Pacific Region. The Board seeks to support those projects which are most likely to achieve a sustainable improvement in oral health within communities and which, of course, are within the financial means of the Section to support.
Approximately 20% of Fellows elected to make donations for oral health projects with their 2010 membership renewals. Fellows generously donated more than $8,000 with individual donations ranging from $10 to $500. Many Fellows of our Section also dedicate time to worthwhile oral health projects throughout the world. Below is a summary of oral health projects recently supported through our Section and projects approved for support at the 2011 Board meeting held in Brisbane on April 1.

Recently supported projects:
- **Cambodia** (contact: Callum Durward) – oral surgery workshop
- **Fiji School of Dentistry** (contact: Bernadette Pushpaaengaeli) – development of postgraduate training programs
- **Nepal** (contact: Sandra Meihubers) – Nepal Bhattebande Village School Program
- **PNG Dental School** (contact: John McIntyre) – ICD PNG Travel Fellowship
- **Vietnam** (contact: Colin Twelftree) – Vietnam Long Tan Preschool Children and Oral Health Education

Project support approved at 2011 Board meeting:
- **Cambodia** (contact: Callum Durward) – 3 year funding for Dental School educational materials and oral health projects in the community
- **Fiji School of Dentistry** (contact: Bernadette Pushpaaengaeli) – follow up on development of postgraduate training programs
- **Gareth Ivory Foundation** (contact: Catherine Scott) – East Timor dental student sponsorship
- **Nepal** (contact: Sandra Meihubers) – 3 year funding for continuation of Nepal Bhattebande Village School Program
- **Vietnam** (contact: Colin Twelftree) – 3 year funding for continuation of Vietnam Long Tan Preschool Children and Oral Health Education

**Australian Dental Research Foundation** (contact: Ian Meyers) – 3 years funding of ICD grant for community oral health research

Requests for Support
For further information or to request an application for ICD project sponsorship, please contact the Registrar - email: jackie_robinson@iinet.net.au
All requests for project support are considered at the annual Board of Regents meeting.

**Seeking Volunteers for Cambodian Oral Health Projects**

Callum Durward is living and working in Cambodia and seeks dentists to assist with improving oral health in Cambodia through:
- short or long-term teaching positions at the Faculty of Dentistry - providing lectures and/or tutoring in the student clinic
- periodontists to speak at Cambodia’s first periodontics conference (with possibly a hands-on workshop)
- short or long term dentists to work in Phnom Penh and provincial prisons
- short or long term dentists to work with orphans and poor children in Phnom Penh and the provinces.

Volunteers will work with the NGO One-2-One CAMBODIA and the Faculty of Dentistry, International University in Phnom Penh.

This is most rewarding and meaningful work and Callum has a great in-country team to support all volunteers. For further information, contact Callum PO Box 1403. Phnom Penh, CAMBODIA. Tel: 855-12-394534 (cell phone) e-mail: callum_durward@hotmail.com

**PROJECT REPORTS**

**CAMBODIA**

**Oral Surgery Training for Provincial Hospital Dentists**

In December 2010, Dr Stephen Cox (Head of Dept of OS Sydney University), Dr Peace Indrachelvanayagam (OMF surgeon from Malaysia) and Dr Someth Hong (Head of Oral Surgery at Faculty of Odontostomatology, Cambodia) conducted Cambodia’s second workshop on Oral Surgery for 30 dentists from Phnom Penh and rural Cambodian hospitals. The workshop was organised by the NGO One-2-One CAMBODIA, and was held at the Khmer Soviet Friendship Hospital.

In a country where there are only two OMF surgeons for 15 million people, and where dentists working in rural hospitals need to manage a range of oral surgical problems, additional training in this area is considered a high priority.

With assistance from ICD, this second workshop covered a range of important oral surgery topics including medical emergencies & CPR; use of implants in the management of mandibular fractures; management of facial infections; and cross-infection control both in the clinics and in theatre.

The workshop comprised lectures and videos, supported by ‘hands-on’ sessions. One of the rooms was converted into a surgical skills lab. The practical focused on CPR, the placement of implants and soft tissue drains and maxillary fixation on models.
The feedback from the participants was very good, and all felt that the workshop had been worthwhile. Dr Peace, who now lives in Cambodia, has made herself available to visit dentists in their hospitals to help with cases, or to advise over the telephone. Participants have also started to keep a log book of cases they treat. It is hoped that in late 2011 a Part 3 course can be conducted.

Thanks to ICD for partially funding this worthwhile project which will have tangible benefits for many Cambodian patients who will now be able to access better treatment in their own province for OMF problems that arise.

Callum Durward

NEPAL

An edited version of the Report to Sandra Meihubers and ICD on the School Toothbrushing and Dental Health Education and Camp Program at Shree Himal Jyoti Community School, Bhattedanda. from Bishnu Shrestha CHDS

Community Health Development Society (CHDS) Nepal is a non-government, not for profit charitable organisation, working to improve the overall health of Kavre and Sindupalchok districts by providing health services and conducting health awareness activities through its static clinic and outreach community health camps. It focuses on working with the most disadvantaged, poor and marginalized groups of different communities. One such project is the Bhattedanda School Tooth brushing Program.

The Bhattedanda village is under developed and the main income source of the villagers is agriculture. The people of the village do not give priority to dental health due to other health and social priorities in their lives. Dental disease such as dental caries and gum disease are very high among the villagers including the little children. Likewise the changes in life style means that people are choosing factory product foods like sweet foods (chocolates, lollies), biscuits, noodles and a variety of soft foods rather than using the natural food prepared at home.

The Shree Himal Jyoti Community School is the only school in Bhattedanda village. A school dental survey was conducted by Dr. Sandra Meihubers in 2008 looking at the background of the village and the dental condition of the villagers. This survey report showed that the children at this school had higher levels of dental decay than the average rates in Nepal. The aim of the program was to improve children's oral health through regular toothbrushing with fluoride toothpaste to reduce dental decay, prevent possible future gum problems, and provide preventive dental health services.

In coordination with the Headmaster of the school, CHDS Nepal provided toothbrushes and paste to the school for the students. Each six months, students and teachers are provided with one toothbrush and sufficient fluoride toothpaste supply for the period. A second instalment of the same quantity of toothbrush and paste is supplied after a six month period. The program provided a total of 644 toothbrushes and 1608 tubes of fluoridated toothpaste in 2010.

CHDS Nepal organized a one day training session for the teachers of Shree Himal Jyoti school in December 2010. A school tooth brushing manual was prepared after working with Dr Sandra Meihubers. A copy of the manual was distributed to all the teachers and copies are kept in the school library.

The students brush their teeth after lunch and or during their free time. The class teachers assist in dispensing the toothpaste onto individual toothbrushes and help and guide them with their brushing. The senior students brush their teeth by dispensing the toothpaste by themselves.

The program also provided three one day dental camps for the students of the School, and offered check ups, fillings, extractions, free medicine and oral health instruction. The total numbers of students served through these three treatment days were 240 and a total of 282 different procedures were performed. In total, 61% of the procedures were fillings, 7% extractions and 32% were provided with medicine and oral health instruction.

Constraints of the program included the difficulty of finding free time for the senior students to brush their teeth at school. As they have many course books to complete and as they are senior students, they took the toothbrush and paste with them to brush at home.

The road to the School near the village is too narrow to take the dental equipment and generator in the jeep into the school area. The Dental Team, the students of the school and village people carry all the dental equipment down to school.

Bishnu Shrestha, Chairperson CHDS Nepal
VIETNAM
Vietnam Long Tan Preschool
Children and Oral Health Education – Colin Twelftree

The Australian Vietnam Volunteers Resource Group, in conjunction with the Dental Hygienists Association of Australia and supported by the International College of Dentists, continues to periodically staff the dental clinic adjacent to the village of Long Tan in South Vietnam. Most readers will remember that Long Tan was the site of the most famous battle of the Vietnam War and the clinic is situated adjacent to the rubber plantation where the conflict took place and where a memorial cross has been erected.

The purpose of the clinic is to provide dental treatment to the immediate population with particular emphasis on the treatment and preventive programs offered to the school children. Emergency treatment of adults is also provided.

Since my last report, Dr Steve Shelton from Ballina visited the clinic with a team in November and two dental hygienists from Adelaide spent a week treating patients in December. In February this year I paid another visit to the clinic with two dental hygienists and this month another Fellow, Dr Helen McLean, is accompanying two hygienists to spend another week.

The Dental Hygienists Association of Australia has been very active in soliciting volunteers to continue this worthy cause but we are short of dentists and I would encourage all Fellows to consider having a holiday in Vietnam and including a few days at the clinic. As well as providing a service to the population, there are many other potential benefits to be gained. The local people in Ba Ria, where the teams stay in a modest but extremely clean hotel with all facilities including free Wi Fi, are incredibly hospitable. You will have the opportunity of being a traveller rather than a tourist which is an opportunity not often available. Ba Ria has many small cafes and restaurants and the food is a big attraction. In addition, special events occur occasionally. For example, during the last visit, the two hygienists went for a walk at lunch time through Long Tan. They came upon a wedding reception and were invited inside and pressed with food and drink. Apparently, it is a great honour to have a foreigner at your wedding reception and I understand they had a difficult time leaving and getting back to work. The interpreter who joins each team hosted the hygienists for lunch at her home and she delights in showing us the small cafes where she has her breakfast each morning.

For anyone who may be nervous about travelling independently in Vietnam I can assure you I can arrange all transport and accommodation. If you wish, you can be collected by a private car at the airport and delivered to the hotel in Ba Ria where your daily transport to the clinic will be waiting. If you wish to be independent then it is possible to travel to Ba Ria by local bus or by the hydrofoil service from Ho Chi Minh City.

The type of dentistry you are to perform is entirely up to you. As an orthodontist, I am not confident in restoring teeth but have retained the skill of extractions. Some volunteers avoid extractions but are happy to provide composite restorations. Most of the work involves glass ionomer cement restorations for children and these services are performed by hygienists and therapists. Work can be as challenging or mundane as you wish.

Please consider this opportunity to not only have a special holiday in Vietnam but also to provide a service to a group of people who are extremely poor and greatly appreciate anything that can be done for them.

Please telephone me on 82967910 or 0402061513 or email twelftree@internode.on.net for further information.

Colin Twelftree

Projects by Australasian ICD Members

A number of our Fellows are involved in innovative and important projects for which they do not seek financial support from the College. Such a project is that conducted by Dr Barry Walsh and described on Page 8.

We would welcome similar articles from other Fellows for the newsletter. Please contact Jackie Robinson or the Editor Jenny Smyth j.smyth@uq.edu.au
Three and a half million people live in Bali and there are some 71 orphanages on the Island. Kids are placed in orphanages because their parents are poor, dead, or divorced. The “forgotten” orphanages are those which cater for the physically and mentally disabled.

The orphanages on Bali receive approximately AUD 8.00 per month per child and some rice from the government.

The Australian Foundation “Carry for Kids” has been actively involved in helping poor children in Cambodia, Viet Nam, Thailand, Nepal and Bali for twenty years. In 2005 the foundation commenced operations on Bali, opening a small medical clinic “Anak Anak Bali “ in Mengwi, mostly for children in orphanages north of Denpasar. The clinic provides primary medical care and is able to house twenty children in dormitory style accommodation. There are no separate facilities for children suffering from infectious diseases.

Staff from the clinic, including a medical doctor regularly visit the kids in other orphanages. They are checked for physical development, hearing, vision, throat, lung and skin infections. Appropriate advice is given regarding health, diet and hygiene. Those who are found to be unwell are, if necessary, taken back to the clinic at Anak Anak Bali for care. They also screen kids for procedures and treatment needs beyond the scope of the Anak Anak Clinic to provide.

Provision of dental care for the children served by the Anak Anak Bali centre has been developing over the past four years. Initially this was limited to the treatment of pain and infection and included the supply of toothbrushes, toothpaste and dental hygiene education. This has now progressed to preventive and restorative dentistry with some children being referred for orthodontic treatment.

Makeshift facilities and mobile electrical dental motors are used when carrying out treatment. Illumination is from LED lights mounted on loupes whilst patients are “seated “ on an old dental chair or on a bed in one of the dormitories. All re-usable equipment is cleaned, disinfected and autoclaved. Dentists who have volunteered their services include Dr. Barry Walsh and his wife Joyce from Western Australia, Dr. Rob Snoep and his wife Ria from the Netherlands, Dr Lynette Fou from Canada and Dr. Medy Liong and also Dr. Greg Cox from New South Wales.

Bali Kids receives its funding from a number of sources. A Dutch foundation, Bali Bundar, funds to funds the children’s education. The funding to meet the recurrent costs for the day to day running of the Anak Anak clinic comes largely from Australia, Canada, USA, Holland and Belgium by direct donation, by contributions of material and educational equipment and by contributions through an Australian organization, the Global Development Group. Three of the brightest children from the Anak Anak have received scholarships to complete their high school education in Australia.

The Anak Anak clinic is currently housed in a small rental house. In the living room of the clinic medical supplies are stored in a cupboard and the kids are triaged and treated for both medical and dental conditions. The permanent orphanage housing children from 2 – 18 year is in a nearby rented house located 500 meters from the medical clinic. This was set up in 2005 and provides permanent accommodation for thirty children. This is in addition to the twenty children who can be accommodated at the medical centre.

In the summer 2009 Brenton Whittaker, founder and Chairman of the Board of Carry for Kids moved to Bali to take on the management of Anak Anak Bali. Trudy Mentink, Chairman of Bali Bundar has an advisory role for Anak Anak.

First and foremost is the need to fund a purpose built medical and dental unit to continue the work of Carry for Kids at Anak Anak Bali. This will accommodate the current medical centre and the separate orphanage in a single unit. Land has been purchased, approval to build had been granted and plans have been drawn up and approved. Construction commenced in April 2011, and staging of the development will depend upon the funds received. Being close to Denpasar, land in this area is relatively expensive, but keeping the facility in the same area will allow the kids to stay at the same schools and is near the hospital with whom we work closely.

When the new clinic is finished there will be accommodation for 30 kids and children with infectious diseases can be isolated. All the equipment for a 2-chair surgery, x-ray, autoclaves etc. has been sourced by Dr. Barry Walsh and Joyce Kruiswijk-Walsh. Joyce and Barry will also supply all consumables required for the operation of the clinic, some by donation and the remainder they will fund themselves. This unit can then be used by visiting dentists at all times. These areas will also be used as medical treatment areas when required. A separate consulting room and pharmacy will also be included.

Barry Walsh