

Apr 22

University Hospitals

BASMU
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## TO THE DENTAL SURGEON

The holder of this letter is shortly due to visit the Antarctic or Arctic for remote science and support work for a period that could extend to approximately 6 months. During this period they will have no access to professional dental care. Evacuations from such locations for emergency dental and medical care are vastly expensive, involves logistical risk and disrupts science programmes many years in the making.

Safeguarding the overall wellbeing of staff working in remote locations for BAS includes establishing thorough dental fitness prior to departing the UK. We therefore request your assistance in assessing and treating the person before you. We would emphasise the need for the restoration of carious lesions and the establishment of a high standard of oral health.

The patient is responsible for the cost of such assessment/treatment and for returning this form back to the BAS authorities.
BAS fully accepts it has no redress against you in the event of this patient encountering dental complications while on deployment in remote locations.

We appreciate your support.
BASMU
Please complete the following so we can verify an individual's dental status prior to deployment.

I certify that $\qquad$ has been dentally examined / treated in connection with his/her forthcoming remote Antarctic/Arctic deployment and consider his/her level of dental fitness to be sufficient for work in remote locations where professional dental assistance is not available.

Dentists Name
Date
Dentists Signature $\qquad$
Practice address

Practice Tel number
$\square$

