## **UNITED REPUBLIC OF TANZANIA**



## Ministry of Health

| HEALTH FACILITY REGISTRY-FACILITY DETAILS |   |  |  |  |
|---|---|--|--|--|
| Facility Name:                            | ELINI   |  |  |  |
| Common name:                              | Elini   |  |  |  |
| Status:                                   | Operating   |  |  |  |
| Facility Code:                            | 114073-0  |  |  |  |
| Date Opened:                              | 2020-03-09  |  |  |  |
| Facility Type:                            | Basic Dental Clinic   |  |  |  |
| Ownership:                                | Private, For Profit : DR. TIMOTHEO POLE NG'WANDU                                |  |  |  |
| Address:                                  | Western Zone-Tabora Region - Nzega<br>District - Nzega TC - Nzega Mjini - Humbi |  |  |  |
| Official Phone:                           | 0752251649  |  |  |  |
| Website:                                  |   |  |  |  |
| In-charge Qualification:                  |   |  |  |  |
| Nearest Facility:                         | 111298-6 - EDEN Health Center   |  |  |  |
| CTC ID:                                   |   |  |  |  |
| MSD ID:                                   |   |  |  |  |
| MTUHA ID:                                 |   |  |  |  |

| FACILITY SERVICES - ELINI             |   |  |  |
|---------------------------------------|---|--|--|
| Service Category                      | Service Description                     |  |  |
| Oral Health Service (Dental Services) | Dental Laboratory Services (Prosthesis) |  |  |
| Oral Health Service (Dental Services) | Emergency Dental Services               |  |  |
| Oral Health Service (Dental Services) | Restoration                             |  |  |
| Oral Health Service (Dental Services) | Scaling                                 |  |  |
| Emergency Preparedness                | Basic Emergency Preparedness            |  |  |

| FACILITY EQUIPMENT - ELINI |            |                |                      |  |
|----------------------------|------------|----------------|----------------------|--|
| Equipment Name:            | Functional | Not Functional | Under<br>Maintenance |  |
| Safety Box                 | 1          | 0              | 0                    |  |