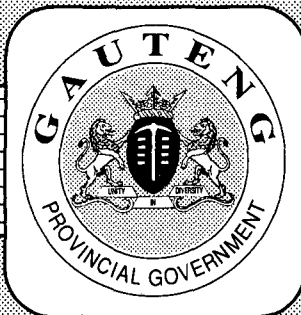


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**THE PROVINCE OF  
GAUTENG**



**DIE PROVINSIE  
GAUTENG**

# **Provincial Gazette Extraordinary Buitengewone Provinsiale Koerant**

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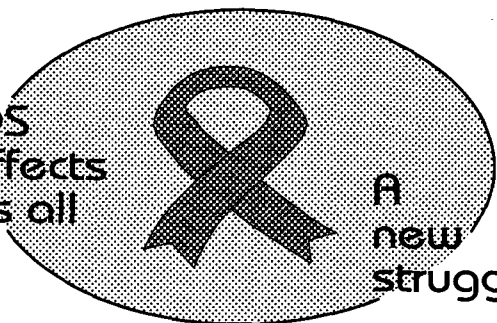
**Vol. 6**

**PRETORIA, 13 NOVEMBER 2000**

**No. 174**

**We all have the power to prevent AIDS**

AIDS  
affects  
us all



A  
new  
struggle

**Prevention is the cure**

**AIDS  
HELPLINE**

**0800 012 322**

DEPARTMENT OF HEALTH

CONTENTS • INHOUD

No.	Page No.    Gazette No.
GENERAL NOTICE	
7867 Hospitals Ordinance, 1958 (14/1958): Amendment to the regulations relating to the classification of and fees payable by patients at Gauteng Provincial Hospitals, mortuary fees and fees pertaining to ambulances and the amendment of hospital tariffs, mortuary and ambulance tariffs with effect from 1 November 2000 .....	3    174

## GENERAL NOTICE

### NOTICE 7867 OF 2000

**AMENDMENT TO THE REGULATIONS RELATING TO THE CLASSIFICATION OF AND FEES PAYABLE BY PATIENTS AT GAUTENG PROVINCIAL HOSPITALS, MORTUARY FEES, AND FEE PERTAINING TO AMBULANCES AND THE AMENDMENT OF HOSPITAL TARIFFS, MORTUARY AND AMBULANCE TARIFFS WITH EFFECT FROM 1 NOVEMBER 2000.**

#### 1. PURPOSE

To obtain approval for the amendment of, The Regulations Relating To The Classification of and Fees Payable By Patients At Gauteng Provincial Hospitals. Made under, regulation 9,36,38 and 76 to the Hospital Ordinance, 1958 (Ordinance 14 of 1958) to amend the tariffs (hospital fees, mortuary fees and ambulance fees) applicable to Externally Funded patients in accordance with the recommendations made by the PHRC.

#### 2. MOTIVATION

##### *I. Background*

Various individuals and Authorities have expressed the desire for a Uniform Patient Fee Schedule, suitable for use in all public hospitals. Various attempts to implement such systems were made, but were unsuccessful.

To accommodate the need, the National Department of Health delegated the task to Dr. Herbst who designed a tariff structure applicable to externally funded patients.

Historically, hospitals in Gauteng operated on an itemized billing system. Some hospitals did not have the infra structure to deal with this system, resulting in a loss of revenue. The Uniform Patient Fee Schedule (UPFS) replaces the itemized billing approach with a group fee approach.

*II. The Uniform Patient Fee Schedule (UPFS)*

❖ **ETHICAL PRINCIPLES:**

- Emergency medical treatment shall be afforded at any time to any patient, without question or delay, at any state hospital.
- Every patient has the right to choose by whom s/he wishes to be treated, PROVIDED s/he is prepared to pay the tariffs applicable to full paying patients. Should someone wish to be treated as a subsidized patient, s/he will not have a choice of medical practitioner.

❖ **FINANCIAL PRINCIPLES:**

- All health services rendered by the state are chargeable. However, no emergency service may be refused if a patient cannot pay for it and no patient, including an externally funded patient, will be required to meet all costs of essential medical services should such costs place an excessive financial burden on her/him.

- Certain illnesses that may affect the community as a whole if they are not contained or controlled are automatically treated free of charge.
- The unsubsidized fee tariffs are determined by the UPFS and subsidized fees are expressed as a percentage of the UPFS.
- Externally funded patients will pay the full rate prescribed by the UPFS. In cases where services are rendered to patients by a private health care practitioner, the patient or her/his funder will be liable for the facility fee component of the UPFS tariff to the public health facility concerned. It is the responsibility of the private practitioner to render an account to the patient or her/his funder for any professional fee due to the private practitioner.

❖ **ADMINISTRATIVE PRINCIPLES:**

- Patients who are not externally funded are eligible to pay reduced fees for services received. The onus rests on the patient to prove her/his eligibility to be categorized as a subsidized patient. If a patient refuses to do this, then he/she must be regarded as a full paying patient.
- The eligibility of a patient to pay reduced fees will be based on a standard means test or the membership of the patient to certain groups exempted from paying for public health services.
- Patients paying reduced fees will be encouraged to pay cash. In such cases a payment receipt but not an invoice will be produced. In cases where the reduced fee cannot be paid in full and the patient is not re-

classified into a group exempt from payment, a credit agreement must be entered into with the patient or her/his guardian.

- Patients funded by a medical scheme registered in terms of the Medical Schemes Act, 1998 (Act No 131 of 1998) are governed by the provisions of that act with regards to the minimum benefits for which the funder is liable. For the purposes of charging for services not covered by the funder, the patient will be classified as provided for in *principle 7* and will be liable for the payment of the applicable fees.
- A facility fee plus a professional fee will be charged for each procedure group. The professional fee will not be charged where a patient utilizes the services of his/ her private clinician.

The complete UPFS document was presented to the PHRC during June 1999 who in principle approved the implementation thereof.

The UPFS recommends that all private and private hospital patients will be charged a fee as recommended, and amended by the National Department of Health from time to time.

The fee structure is defined into various groups, namely:

- (i) Ambulatory Procedures
- (ii) Anaesthetics
- (iii) Assistive Devices;
- (iv) Confinement;
- (v) Consultations;
- (vi) Dialysis;

- (vii) Emergency Medical Services;
- (viii) Examinations;
- (ix) Imaging;
- (x) Inpatients;
- (xi) Mortuary;
- (xii) Oral Health;
- (xiii) Pharmacy;
- (xiv) Theatre Procedures; and
- (xv) Treatments.

The UPFS recommendations made some significant changes to the fees applicable to the completion of medical reports. This is now in line with the BHF rates.

### **3. FINANCIAL IMPLICATIONS**

- With the implementation of the UPFS the manner of billing is changed from itemized to procedure-based. This will lead to higher productivity on the part of accounting staff, and more efficient billing to external funders of patients.
- The UPFS will also equip hospitals with a more controllable system to generate revenue. The impact of revenue generation will be determined by the utilization of public facilities by externally funded patients. An indication of additional revenue could only be based on surveys that have been done in the Western Cape and KZN, where it has been found that implementing the UPFS could result in a 20 % increase in revenue.
- Similar assumptions in respect of this Department could suggest additional revenue of approximately R5 mil. per year for externally funded patients.

**4. RECOMMENDATIONS**

- That the classification categories of patients and the tariffs of fees payable by patients at Provincial Hospitals and Regulations 1 and 9 of the Regulations be amended in accordance with addendum A of the "proposal".
- That the tariffs as specified in the UPFS Schedule, be approved.
- That this amendment be published in the Provincial Gazette after approval thereof by the Gauteng Provincial Treasury.

Proposal recommended

**MR. L NOLTE**  
**ACTING CHIEF DIRECTOR: FINANCE AND LOGISTICAL SERVICES**  
**DATE: 2000-10-12**

Proposal recommended

**DR L RISPEL**  
**CHIEF OF OPERATIONS**  
**DATE: 2000-10-18**



Proposal recommended

**DR R MGIJIMA**  
**HEAD OF DEPARTMENT: HEALTH**  
**DATE: 2000-10-23**

Proposal APPROVED

**DR G RAMOKGOPA**  
**MEC FOR HEALTH: Gauteng**  
**DATE: 2000-10-30**

**DRAFT AMENDMENT TO ORDINANCE**  
**11-October-00**

**(PREMIERS NOTICE NO: .....)**      **(..... 2000)**

**REGULATIONS RELATING TO THE CLASSIFICATION OF AND FEES PAYABLE BY PATIENTS AT  
GAUTENG PROVINCIAL HOSPITALS AMENDMENT**

The Premier of Gauteng has under regulation 9, 36, 38 and 76 of the Hospitals Ordinance (Ordinance 14 of 1958) made the regulations in this schedule:

**SCHEDULE**

**Definition:**

1. In these Regulations, unless the context indicates otherwise, "the Regulations" means the Regulations relating to the Classification of and Fees Payable by patients at Provincial Hospitals, promulgated by Administrator's Notice No 616 of 12 June 1968, as amended by:

Administrator's Notice No 1008 of 25 September 1968;  
Administrator's Notice No 929 of 26 June 1973;  
Administrator's Notice No 341 of 17 March 1976;  
Administrator's Notice No 725 of 18 June 1980;  
Administrator's Notice No 341 of 17 March 1982;  
Administrator's Notice No 490 of 21 March 1984;  
Administrator's Notice No 1147 of 11 July 1984;  
Administrator's Notice No 454 of 27 February 1985;  
Administrator's Notice No 653 of 27 March 1985;  
Administrator's Notice No 415 of 26 February 1986;  
Administrator's Notice No 996 of 1 July 1987;  
Administrator's Notice No 1979 of 30 December 1987;  
Administrator's Notice No 464 of 1 June 1988;  
Administrator's Notice No 502 of 28 June 1989;  
Administrator's Notice No 44 of 31 January 1990;  
Administrator's Notice No 344 of 1 August 1990;  
Administrator's Notice No 171 of 27 March 1991;  
Administrator's Notice No 71 of 6 May 1992;  
Administrator's Notice No 250 of 16 June 1993;  
Administrator's Notice No 551 of 22 December 1993;  
Premier's Notice No. 233 of 10 September 1996;

*Amendment of regulation 1 of the Regulations*

2. Regulation 1 of the Regulations is amended as follows:

- (a) By the insertion, after the definition of "exempted patient" of the following definition:

"Externally Funded Patients" means patients whose health services are funded or partly funded in terms of Compensation for Occupational Injuries and Diseases Act (Act No. 130 of the 1993), or by a medical scheme registered in terms of the Medical Schemes Act, 1998 (Act No. 131 of or 1993), or who is treated on the account of another state department, local authority foreign government or any other employer.

- (b) By the insertion, after the definition of "Scale of Benefits" of the following definition:  
"Supplementary Health Profession" means any profession referred to in section 32 of the Medical, Dental and Supplementary Health Service Professions Act, 1974 (Act No. 56 of 1974), other than a profession excluded from the provisions of section 32(1) of the said Act.
- (c) By the insertion, after the definition of "Theatres" of the following definition:  
"Uniform patient fee schedule" means the schedule published from time to time by the Minister in the Government Gazette in terms of the Regulations Governing the Establishment and Maintenance of A Uniform Patient Fee Schedule.
- (d) Replace the existing definition "scale of benefits" in its totality with the following definition: *"scale of benefits means the tariffs determined by the Board of Hospital Funders in terms of the Medical Schemes Act, 1998 (Act No. 131 of 1998).*
- (e) Replace the existing definition "medical scheme" in its totality with the following definition: *"medical scheme means any medical scheme as defined in section 1 of the Medical Schemes Act, 1998 (Act No. 131 of 1998)*
- (f) Amend the definition of "foreign patient" partially by deleting point (i) from the definition and by adding a new point (iv) to the definition: "foreign patient" means a person from outside the borders of the Republic of South Africa including foreign tourists or an employee of a foreign company visiting the RSA but excluding the following:
  - (i) [citizens of TBVC countries];
  - (ii) immigrants permanently resident in the RSA, but who have not attained citizenship;
  - (iii) foreigners with temporary residence or work permits;
  - (iv) persons from neighbouring states e.g. Mozambique, Zambia etc. who enter the Republic of South Africa illegally.

#### Amendment of regulation 9 of the Regulations

3. Regulation 9 of the Regulations is hereby amended and replaced in its totality with the following regulation:

"9 (1) Subject to regulation 5 (3) fees shall be levied at the tariffs prescribed in Schedule "B" hereto, and shall be charged and collected by the Superintendent General in respect of every patient at, in or from a hospital and shall be paid before or at the commencement of such treatment, except fees-

- (a) prescribed at a daily tariff, excluding an amount referred to in regulation (4) (1) (b) (ii); and
- (b) in respect of an out-patient who has been classified as a full paying patient in terms of section 32 of the Ordinance and regulation 5: Provided that, if the admitting officer, after due inquiry is satisfied that the patient concerned, or in the case of a dependant, the person upon whom he is dependant, is unable to make such payment before or at the commencement of the treatment and that, in the best interest of the patient, the treatment should not be deferred, the admitting officer shall authorize payment to be made after the commencement of the treatment.

(2) The tariffs of fees referred to in subregulation (1) are inclusive, except the provision -

(a) to a private patient admitted to a hospital, including an academic hospital-

- (i) of any medical or dental service;
- (ii) of any blood transfusion service;
- (iii) of any pathological examination or service;
- (iv) of any such medicine, dressing, orthopedic or surgical appliance, prosthesis, non-pharmaceutical item or any supplementary health service which has not been made available by the Superintendent-General for provision to that patient;
- (v) of any professional services, except where a patient was treated by a doctor not in the service of the hospital.

(b) to a private hospital patient admitted to an academic hospital-

- (i) of any blood transfusion service;
- (ii) of any pathological examination or service;
- (iii) of any such medicine, dressing, orthopedic or surgical appliance, prosthesis, non-pharmaceutical item or any supplementary health service which has not been made available by the Superintendent-General for provision to such patient;
- (iv) of any professional services, except where a patient was treated by a doctor not in the service of the hospital.

(c) to a private hospital patient admitted to a hospital, excluding an academic hospital-

- (i) of any blood transfusion service;
- (ii) of any pathological examination or service;
- (iii) of any such medicine, dressing, orthopedic or surgical appliance, prosthesis, non-pharmaceutical item or any supplementary health service which has not been made available by the Superintendent-General for provision to such patient;
- (iv) of any professional services, except where a patient was treated by a doctor not in the service of the hospital.

(d) to a private-, private hospital, and a hospital patient of orthotic prosthetic aids which has not been made available by the Superintendent-General for provision to such patient;

(e) to a Defence Force Patient (HW) of services which have not been made available by the Superintendent-General for provision to such patient.

(3) Method for calculating in-patient rates:

(a) The duration of stay in a particular bed category is calculated by subtracting the admission date from the discharge/ transfer date of a particular bed category.

- (b) Where a patient is admitted and discharged on the same day from a particular bed type, the bed type in which the patient spent the majority of time during that day will be applicable.
  - (c) If a patient is admitted and discharged on the same day from the hospital, the day tariff applies.
  - (d) The professional fee depends on the level of the professional responsible for the patient.
- (4) In Schedule "B" of these Regulations, unless the context otherwise indicates-
- (a) 'Level 1 Hospital' means a hospital where the services that are rendered do not fall in the categories Level 2 and Level 3 defined below.
  - (b) 'Level 2 Hospital' means a hospital where a General Surgeon and at least one other basic speciality e.g. Obstetrician, Gynecologist, Pediatrician and/or Physician is present. This implies that a continuous specialist service is not rendered in the main medical disciplines i.e. Internal Medicine, Surgery, Paediatrics, Orthopaedics, and Gynaecology and Obstetrics. These hospitals are often referred to as Community Hospitals.
  - (c) 'Level 3 Hospital' means a hospital where the criteria for a Level 2 Hospital has been met and the hospital has an additional five or more sub-specialities or less common specialities. This implies that a continuous specialist service in the main medical disciplines referred to in paragraph (b) is rendered, or those specialist services determined by the Superintendent General. These hospitals are often referred to as Academic, Central or Regional Hospitals"

**PLEASE NOTE:** Only Specialists and sub-specialists who works for at least a third (0.3) of the full time equivalent are counted in these definitions.

SCHEDULE A							
CLASSIFICATION AND TARIFF CATEGORIES BASED ON INCOME AND STATUS							
Hospital Patients					Private Patients		
Exempted	Part Paying				Exempted	Private	Private Hospitals
HG	HW	H1	H2	H3	PG	P	PH
An exempted patients (classified in terms of section 36 of the Ordinances)	A patients contemplate in regulation 5 (3)	An applicant who has a yearly income of	An applicant who has a yearly income of more than	An applicant as contemplated in regulation 3 (4) (a) an an applicant who has a yearly income of more than	An exempted patient (classified in terms of section 36 of the Ordinance)	1. A applicant treated by a private medical practitioner irrespective of hid income of assets 2. A member of a medical aid scheme 3. An applicant who is classified in terms of section 32 (1) of the Ordinance, who who is treated by a private medical practitioner 4. An applicant as contemplated in regulation 3 (4) (b) of 4 who is treated by a private medical practitioner 5. A foreign patient treated by a private medical practitioner 6. An applicant who has a yearly income of more than	1. An applicant who is classified as a private patient at an academic hospital in terms of paragraph 6 of category P who is treated by a medical practitioner in the service of that hospital 2. An applicant who is classified in terms of section 32 (1) of the Ordinance and who is treated by a medical practitioner in the service of that Hospital 3. An applicant as contemplated in regulation 3 (4) (b) of 4 who is treated by a medical practitioner in the service of that hospital 4. A foreign patient who is classified as a private patient in terms of paragraph 5 of category P who is treated by a medical practitioner in the service of that hospital
		Not more than R20 000 or with assets of not more than R84 000	R20 000 but not more than R26 000 or with assets of more than R84 000 but not more than R 116,000	R26 000 but not more than R39 000 or with assets of more than R116 000 but not more than R 175,000		R39 000 or with assets of more than R 175,000	
		Not more than R32 000 or with assets of more than R 148,000	R32 000 but not more than R45 000 or with assets of more than R148 000 but not more than R 213,000	R45 000 but not more than R60 000 or with assets of more than R213 000 but not more than R 287,000		R60 000 or with assets of more than R 287,000	

5 SCHEDULE B								
TARIFF OF FEES								
Category	In - patients		Out - patients per visit		All Hospitals			Other additional costs
	Hospital				Theatre fees Out-patients	Theatre fees In-patients	Radiology services	
	Level 2 Hospitals	Level 3 Hospitals	Level 2 Hospitals	Level 3 Hospitals				
HG	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted
H1	Refer to Administrator's Notice 250 of 16 June 1993							As per standardised prize list
H2	Refer to Administrator's Notice 250 of 16 June 1993							As per standardised prize list
H3	Refer to Administrator's Notice 250 of 16 June 1993							As per standardised prize list
PG	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted	Exempted
P and PH	Refer to Schedule B(a) 1							As per standardised prize list
HW	Bills are raised by Head Office on strength of statistics received from hospitals. Please Note that the exclusions are specified in the contract, and must be dealt with accordingly.							

**NOTE:**

- (a) Out patients fees in respect of out-patients receiving certain therapeutic exercise / group therapy are payable once per month, irrespective of the number of attendance's at double the out-patient tariff for academic / regional hospitals.
- (b) Private patients who are specifically referred for one or more special services as determined by the Superintendent General from time to time, are exempted from the payment of the professional fee applicable to the consultation if no further treatment/examination is received at the hospital.
- (c) The admission fee applicable to hospital patients is payable per 30 days or part thereof.

**Schedule "B(a) (1)"**  
**UPFS 2000 Fee Schedule**

Code	Description	Basis	Professional Fee	Facility Fee		
				Level 1	Level 2	Level 3
01	Anaesthetics					
0111	Anaesthetics Cat A - General medical practitioner	Procedure	R 84.85			
0112	Anaesthetics Cat A - Specialist medical practitioner	Procedure	R 127.27			
0121	Anaesthetics Cat B - General medical practitioner	Procedure	R 143.89			
0122	Anaesthetics Cat B - Specialist medical practitioner	Procedure	R 215.83			
0131	Anaesthetics Cat C - General medical practitioner	Procedure	R 419.98			
0132	Anaesthetics Cat C - Specialist medical practitioner	Procedure	R 629.97			
02	Confinement					
0210	Confinement - Facility Fee	Incident		R 2 535.61	R 2 535.61	R 3 042.74
0211	Confinement - General medical practitioner	Incident	R 886.05			
0212	Confinement - Specialist medical practitioner	Incident	R 1 134.47			
0213	Confinement - Nursing practitioner	Incident	R 896.32			
03	Dialysis					
0310	Haemo - Facility Fee	Day		R 570.18	R 570.18	R 684.21
0311	Haemo-dialysis - General medical practitioner	Day	R 463.68			
0312	Haemo-dialysis - Specialist medical practitioner	Day	R 695.61			
0320	Peritoneal Dialysis - Facility Fee	Day		R 114.04	R 114.04	R 136.84
0321	Peritoneal Dialysis - General medical practitioner	Day	R 136.67			
0322	Peritoneal Dialysis - Specialist medical practitioner	Day	R 136.67			
04	Examinations					
0410	Examination - Facility Fee	Report		R 53.73	R 53.73	R 64.47
0411	Examination - General medical practitioner	Report	R 102.36			
0412	Examination - Specialist medical practitioner	Report	R 153.51			
05	Imaging					
0510	Radiology, Cat A - Facility Fee	Procedure		R 28.83	R 28.83	R 34.60



Code	Description	Basis	Professional Fee	Facility Fee		
				Level 1	Level 2	Level 3
0511	Radiology, Cat A - General medical practitioner	Procedure	R 46.51			
0512	Radiology, Cat A - Specialist medical practitioner	Procedure	R 67.46			
0514	Radiology, Cat A - Allied health practitioner	Procedure	R 33.73			
0520	Radiology, Cat B - Facility Fee	Procedure		R 71.63	R 71.63	R 85.96
0521	Radiology, Cat B - General medical practitioner	Procedure	R 113.27			
0522	Radiology, Cat B - Specialist medical practitioner	Procedure	R 166.25			
0524	Radiology, Cat B - Allied health practitioner	Procedure	R 83.12			
0530	Radiology, Cat C - Facility Fee	Procedure		R 226.64	R 226.64	R 271.97
0531	Radiology, Cat C - General medical practitioner	Procedure	R 205.45			
0532	Radiology, Cat C - Specialist medical practitioner	Procedure	R 453.83			
0540	Radiology, Cat D - Facility Fee	Procedure		R 662.60	R 662.60	R 795.12
0541	Radiology, Cat D - General medical practitioner	Procedure	R 1 141.54			
0542	Radiology, Cat D - Specialist	Procedure	R 1 472.86			
<b>06</b>	<b>Inpatients</b>					
0610	Inpatient General ward - Facility Fee	Day		R 530.02	R 530.02	R 636.02
0611	Inpatient General ward - General med practitioner	Day	R 62.16			
0612	Inpatient General ward - Specialist med practitioner	Day	R 79.53			
0620	Inpatient High care - Facility Fee	12h		R 644.58	R 644.58	R 773.49
0621	Inpatient High care - General medical practitioner	12h	R 31.08			
0622	Inpatient High care - Specialist medical practitioner	12h	R 39.76			
0630	Inpatient Intensive care - Facility Fee	12h		R 1 216.64	R 1 216.64	R 1 459.97
0631	Inpatient Intensive care - General med practitioner	12h	R 31.08			
0632	Inpatient Intensive care - Specialist med practitioner	12h	R 39.76			
0640	Inpatient Chronic care - Facility Fee	Day		R 427.02	R 427.02	R 512.42
0641	Inpatient Chronic care - General medical practitioner	Day	R 62.16			
0642	Inpatient Chronic care - Specialist med practitioner	Day	R 79.53			

Code	Description	Basis	Professional Fee	Facility Fee		
				Level 1	Level 2	Level 3
0643	Inpatient Chronic care - Nursing practitioner	Day	R 42.46			
0650	Day patient - Facility Fee	Day		R 251.84	R 251.84	R 302.21
0651	Day patient - General medical practitioner	Day	R 62.16			
0652	Day patient - Specialist medical practitioner	Day	R 79.53			
0653	Day patient - Nursing practitioner	Day	R 42.46			
0660	Inpatient Boarder - Facility Fee	Day		R 282.11	R 282.11	R 338.53
0663	Inpatient Boarder - Nursing practitioner	Day	R 42.46			
<b>07</b>	<b>Mortuary</b>					
0710	Mortuary - Facility Fee	Day		R 70.18	R 70.18	R 84.21
0720	Cremation certificate - Facility Fee	Certificate		R 70.18	R 70.18	R 84.21
<b>08</b>	<b>Pharmaceutical</b>					
0810	Medication fee - Facility Fee	Prescription		R 15.00	R 15.00	R 18.00
0815	Item fee	Item	Appendix E			
<b>09</b>	<b>Oral Health</b>					
0910	Oral Care Cat A - Facility Fee	Procedure		R 25.97	R 25.97	R 31.17
0911	Oral Care Cat A - General practitioner	Procedure	R 32.47			
0912	Oral Care Cat A - Specialist practitioner	Procedure	R 48.23			
0914	Oral Care Cat A - Allied health practitioner	Procedure	R 25.98			
0920	Oral Care Cat B - Facility Fee	Procedure		R 148.11	R 148.11	R 177.74
0921	Oral Care Cat B - General practitioner	Procedure	R 189.39			
0922	Oral Care Cat B - Specialist practitioner	Procedure	R 275.07			
0930	Oral Care Cat C - Facility Fee	Procedure		R 632.07	R 632.07	R 758.48
0931	Oral Care Cat C - General practitioner	Procedure	R 571.87			
0932	Oral Care Cat C - Specialist practitioner	Procedure	R 1 173.84			
0940	Oral Care Cat D - Facility Fee	Procedure		R 2 417.64	R 2 417.64	R 2 901.17
0941	Oral Care Cat D - General practitioner	Procedure	R 2 187.39			
0942	Oral Care Cat D - Specialist practitioner	Procedure	R 4 489.90			
<b>10</b>	<b>Consultations</b>					
1010	Outpatient Consultation - Facility Fee	Visit		R 27.66	R 27.66	R 33.20

Code	Description	Basis	Professional Fee	Facility Fee		
				Level 1	Level 2	Level 3
1011	Outpatient Consultation - General med practitioner	Visit	R 62.16			
1012	Outpatient Consultation - Specialist med practitioner	Visit	R 79.53			
1013	Outpatient Consultation - Nursing practitioner	Visit	R 42.46			
1014	Outpatient Consultation - Allied health practitioner	Visit	R 54.11			
1020	Emergency Consultation - Facility Fee	Visit		R 41.50	R 41.50	R 49.80
1021	Emergency Consultation - General med practitioner	Visit	R 93.25			
1022	Emergency Consultation - Specialist medical practitioner	Visit	R 119.29			
1023	Emergency Consultation - Nursing practitioner	Visit	R 63.68			
1024	Emergency Consultation - Allied health practitioner	Visit	R 81.17			
<b>11</b>	<b>Ambulatory procedures</b>					
1110	Ambulatory Procedure Cat A - Facility Fee	Procedure		R 165.61	R 165.61	R 198.74
1111	Ambulatory Procedure Cat A - General medical practitioner	Procedure	R 108.18			
1112	Ambulatory Procedure Cat A - Specialist medical practitioner	Procedure	R 108.97			
1113	Ambulatory Procedure Cat A - Nursing practitioner	Procedure	R 73.90			
1120	Ambulatory Procedure Cat B - Facility Fee	Procedure		R 165.61	R 165.61	R 198.74
1121	Ambulatory Procedure Cat B - General medical practitioner	Procedure	R 278.74			
1122	Ambulatory Procedure Cat B - Specialist medical practitioner	Procedure	R 378.98			
1130	Ambulatory Procedure Cat C - Facility Fee	Procedure		R 165.61	R 165.61	R 198.74
1131	Ambulatory Procedure Cat C - General medical practitioner	Procedure	R 531.75			
1132	Ambulatory Procedure Cat C - Specialist medical practitioner	Procedure	R 797.40			
1140	Ambulatory Procedure Cat D - Facility Fee	Procedure		R 165.61	R 165.61	R 198.74
1141	Ambulatory Procedure Cat D - General medical practitioner	Procedure	R 1 253.21			
1142	Ambulatory Procedure Cat D - Specialist medical practitioner	Procedure	R 1 874.02			
1150	Ambulatory procedure for cosmetic reasons - Facility Fee	Procedure		R 165.61	R 165.61	R 198.74

Code	Description	Basis	Professional Fee	Facility Fee		
				Level 1	Level 2	Level 3
1151	Ambulatory procedure for cosmetic reasons - General medical practitioner	Procedure	R 1 253.21			
1152	Ambulatory procedure for cosmetic reasons - Specialist medical practitioner	Procedure	R 1 874.02			
<b>12</b>	<b>Theatre procedures</b>					
1210	Theatre Procedure Cat A - Facility Fee	Procedure		R 791.05	R 791.05	R 949.26
1211	Theatre Procedure Cat A - General medical practitioner	Procedure	R 108.18			
1212	Theatre Procedure Cat A - Specialist medical practitioner	Procedure	R 108.97			
1220	Theatre Procedure Cat B - Facility Fee	Procedure		R 1 147.56	R 1 147.56	R 1 377.07
1221	Theatre Procedure Cat B - General medical practitioner	Procedure	R 278.74			
1222	Theatre Procedure Cat B - Specialist medical practitioner	Procedure	R 378.98			
1230	Theatre Procedure Cat C - Facility Fee	Procedure		R 2 054.10	R 2 054.10	R 2 464.92
1231	Theatre Procedure Cat C - General medical practitioner	Procedure	R 531.75			
1232	Theatre Procedure Cat C - Specialist medical practitioner	Procedure	R 797.40			
1240	Theatre Procedure Cat D - Facility Fee	Procedure		R 5 081.03	R 5 081.03	R 6 097.24
1241	Theatre Procedure Cat D - General medical practitioner	Procedure	R 1 253.21			
1242	Theatre Procedure Cat D - Specialist medical practitioner	Procedure	R 1 874.02			
1250	Theatre Procedure for cosmetic reasons - Facility Fee	Procedure		R 5 081.03	R 5 081.03	R 6 097.24
1251	Theatre Procedure for cosmetic reasons - General medical practitioner	Procedure	R 1 253.21			
1252	Theatre Procedure for cosmetic reasons - Specialist medical practitioner	Procedure	R 1 874.02			
<b>13</b>	<b>Treatments</b>					
1310	Supplementary Health Treatment - Facility Fee	Contact		R 21.10	R 21.10	R 25.32
1314	Supplementary Health Treatment - Allied health practitioner	Contact	R 39.19			
<b>14</b>	<b>Emergency Medical Services</b>					
1410	Patient transport service - Facility Fee	100km		R 150.00	R 150.00	R 150.00

Code	Description	Basis	Professional Fee	Facility Fee		
				Level 1	Level 2	Level 3
1420	Basic life support - Facility Fee	50km		R 242.50	R 242.50	R 242.50
1430	Intermediate life support - Facility Fee	50km		R 300.00	R 300.00	R 300.00
1440	Advanced life support - Facility Fee	50km		R 385.00	R 385.00	R 385.00
1450	Emergency service standby - Facility Fee	Hour		R 43.86	R 43.86	R 43.86
1451	Emergency service standby - General medical practitioner	Hour	R 175.44			
1452	Emergency service standby - Specialist medical practitioner	Hour	R 263.16			
1453	Emergency service standby - Nursing practitioner	Hour	R 116.96			
1454	Emergency service standby - Allied health practitioner	Hour	R 116.96			
1460	Rescue - Facility Fee	Incident		R 438.60	R 438.60	R 438.60
1461	Rescue - General medical practitioner	Incident	R 657.89			
1462	Rescue - Specialist medical practitioner	Incident	R 986.84			
1463	Rescue - Nursing practitioner	Incident	R 438.62			
1464	Rescue - Allied health practitioner	Incident	R 438.62			
<b>15</b>	<b>Assistive devices and prostheses</b>					
1510	Item Fee	Item	Appendix B1			

# Anaesthetic Groups

## Intralesional injection into areas of pathology e.g. keloids

### Intralesional injection into areas of pathology e.g. keloids

- 00227 Special treatment of severe acne cases, including draining of cysts, expressing of comedones and/or steaming, abrasive cleaning of skin and UVR per session

Ana Grp Proc Grp

A A

### Biopsy without suturing

- 00233 First lesion  
00234 Subsequent lesions, each .  
00235 Maximum for multiple additional lesions.  
00237 Deep skin biopsy by surgical incision with local anaesthetic and suturing.

A A  
A A  
A A  
A A

### Treatment of benign skin lesion by chemo-cryotherapy

- 00241 First Lesion.  
00242 Subsequent lesions, each.  
00243 Maximum for multiple additional lesions.  
00244 Repair of nail bed.

A A  
A A  
A A  
A A

### Removal of benign lesion by curetting under local or general anaesthesia followed by diathermy and curetting or electrocautery

- 00245 First Lesion.  
00246 Subsequent lesions, each

A A  
A A

### Removal of malignant lesions by curetting under local or general anaesthesia followed by electrocautery

- 00251 First Lesion.  
00252 Subsequent lesions, each.  
00255 Drainage of subcutaneous abscess onychia, paronychia, pulp space or avulsion of nail.  
00257 Drainage of major hand or foot infection: drainage of major abscess with necrosis of tissue, involving deep fascia or requiring debridement, complete excision of pilonidal cyst or sinus  
00259 Removal of foreign body superficial to deep deep fascia (except hands).  
00261 Removal of foreign body deep to deep fascia (except hands).

A A  
A A  
A A  
A B  
A A  
A A

### Kurtin planing for acne scarring

- 00271 Whole face .  
00273 Extensive.  
00275 Limited .  
00277 Subsequent planing of whole face within 12 months  
00279 Surgical treatment for axillary hyperhidrosis.

B C  
B B  
B A  
B B  
B B

### Laser treatment for small skin lesions

- 00280 First lesion.  
00281 Subsequent lesions (each).  
00282 Maximum for multiple additional lesions.

A A  
A A  
A A

### Laser treatment for large skin lesions

- 00283 Limited area.  
00284 Extensive area.  
00285 Whole face or other areas of equivalent size or larger

A A  
A B  
A C

### Major plastic repair

- 00289 Large skin grafts, composite skin grafts, large full thickness free skin grafts.  
00290 Reconstructive procedures (including all stages) and skin graft by myocutaneous or fasciocutaneous flap  
00291 Reconstructive procedures (including all stages) grafting by microvascular reanastomosis.  
00292 Distant flaps: First stage.  
00293 Contour grafts (excluding cost of material)  
00294 Vascularised bone graft with or without soft tissue with one or more sets microvascular anastomoses  
00295 Local skin flaps (large, complicated).

C C  
C D  
C D  
C C  
C C  
C D  
C C

	Ana Grp	Proc Grp
<b>Major plastic repair</b>		
00296 Other procedures of major technical nature.	C	C
00297 Subsequent major procedures for repair of same lesion.	C	B
00298 Lower abdominal dermo lipectomy.	C	C
00299 Major abdominal lipectomy with repositioning of umbilicus.	C	D
<b>Stitching of soft-tissue injuries</b>		
00300 Stitching of wound (with or without local anaesthesia); Including normal after-care	A	A
00301 Additional wounds stitched at same session (each)	A	A
00302 Deep laceration involving limited muscle damage	B	B
00303 Deep laceration involving extensive muscle damage	B	B
00304 Major debridement of wound, sloughectomy or secondary suture	B	A
00305 Needle biopsy - soft tissue	A	A
00307 Excision and repair by direct suture; excision nail fold or other minor procedures of similar magnitude	A	A
00308 Each additional small procedure done at the same time	A	A
00310 Radical excision of nailbed	A	A
00311 Excision of large benign tumour (more than 5 cm).	A	A
00313 Extensive resection for malignant soft tissue tumour including muscle	B	B
00314 Requiring repair by large skin graft or large local flap or other procedures of similar magnitude	C	B
00315 Requiring repair by small skin graft or small local flap or other procedures of similar magnitude	C	A
<b>Breasts</b>		
00317 Aspiration of cyst or tumour.	A	A
00319 Mastotomy with exploration, drainage of abscess or removal of mammary implant.	A	A
00321 Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma.	A	B
00323 Subareola cone excision of ducts or wedge excision of breast	A	B
00324 Wedge excision of breast and axillary dissection.	C	C
00325 Total mastectomy.	C	C
00327 Total mastectomy with axillary gland biopsy.	C	C
00329 Total mastectomy with axillary gland dissection.	C	D
00330 Nipple and areola reconstruction	B	B
<b>Subcutaneous mastectomy for disease of breast; including reconstruction but excluding cost of prosthesis</b>		
00331 Unilateral.	C	C
00333 Bilateral.	C	D
00334 Removal of breast implant by means of capsulectomy: Per breast	C	C
00335 Implantation of internal subpectoral mammary prosthesis in post mastectomy patients.	C	C
<b>Reduction: mammoplasty for pathological hypertrophy</b>		
00337 Unilateral.	C	C
00339 Bilateral.	C	D
<b>Gynaecomastia</b>		
00341 Unilateral.	A	B
00343 Bilateral.	B	C
<b>Burns</b>		
00351 Major Burns: Resuscitation (including supervision and intravenous therapy - first 48 hours).	B	D
00353 Tangential excision and grafting: Small.	B	B
00354 Tangential excision and grafting: Large.	C	C
<b>Hands (skin)</b>		
00355 Skin flap in acute hand injuries where a flap is taken from a site remote from the injured finger or in cases of advancement flap e.g. Cutler	C	B
00357 Small skin graft in acute hand injury.	C	A
00359 Release of extensive skin contracture and or excision of scar tissue with major skin graft resurfacing	C	C
00361 Z-plasty.	B	B

	<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Hands (skin)</b>		
00363 Local flap and skin graft.	B	C
00365 Cross finger flap (all stages).	B	C
00367 Palmar flap (all stages).	B	C
00369 Distant flap: First stage.	B	C
00371 Distant flap: Subsequent stage (not subject to general modifier 0007)	A	B
00373 Transfer neurovascular island flap.	B	C
00374 Syndactyly: Separation of, including skin graft for one web.	B	C
<b>Dupuytren's contracture</b>		
00375 Fasciotomy.	A	A
00376 Fasciectomy.	A	C
<b>Fractures (reduction under general anaesthetic)</b>		
00383 Scapula.	A	
00387 Clavicle.	A	
00389 Humerus.	A	B
00391 Radius and/or Ulna.	A	B
00392 Open reduction of both radius and ulna (Modifier 0051 not applicable)	A	C
00402 Carpal bone.	A	B
00403 Bennett's fracture-dislocation	A	A
00405 Metacarpal: Simple.	A	A
<b>Finger phalanx: distal</b>		
00409 Simple.	A	
00411 Compound.	A	A
<b>Proximal or middle</b>		
00413 Simple.	A	A
00415 Compound.	A	B
<b>Pelvis</b>		
00417 Closed.	B	
00419 Operative reduction and fixation.	B	D
00421 Femur: Neck or Shaft.	A	C
00425 Patella.	A	A
00429 Tibia with or without fibula.	A	B
00433 Fibula shaft.	A	
00435 Malleolus of ankle.	A	A
00437 Fracture-dislocation of ankle.	A	B
00439 Tarsal bones and Os calcis.	A	B
<b>Toe phalanx</b>		
00443 Distal: Simple.	A	
00445 Compound.	A	A
<b>Other</b>		
00447 Simple.	A	A
00449 Compound.	A	A
<b>Sternum and/or ribs</b>		
00451 Closed.	C	
00452 Open reduction and fixation of multiple fractured ribs for flail chest	C	C
<b>Spine: with or without paralysis</b>		
00455 Cervical.	C	
00456 Rest.	C	
<b>Compression fracture</b>		
00461 Cervical.	C	



		Ana Grp	Proc Grp
<b>Compression fracture</b>			
00462	Rest.	C	
<b>Spinous or transverse processes</b>			
00463	Cervical.	C	
00464	Rest.	C	
<b>Operations for fractures</b>			
00465	Fractures involving large joints (includes the item for the relative bone) (this item may not be used as a modifier)	C	D
00473	Percutaneous insertion plus subsequent removal of Kirschner wires or Steinmann pins (no after-care), modifier 0005 not applicable	B	A
<b>Bonegrafting or internal fixation for mal- or non-union</b>			
00475	Femur, Tibia, Humerus, Radius and Ulna.	C	D
00479	Other bones.	C	C
<b>Bone grafting</b>			
00497	Resection of bone or tumour with or without grafting.	C	D
<b>Grafts to cysts</b>			
00499	Large bones.	B	C
00501	Small bones.	B	B
00503	Cartilage graft.	B	C
00505	Inter-metacarpal bone graft	B	C
00507	Removal of autogenous bone for grafting (not subject to general modifier 0005)	A	A
<b>Acute or chronic osteomyelitis</b>			
00512	Sternum sequestrectomy and drainage; including six weeks after-care	A	B
<b>Osteotomy</b>			
00514	Sternum: Repair of pectus excavatum.	B	D
00515	Sternum: Repair of pectus carinatum.	B	D
00516	Pelvic.	B	D
00521	Femoral: Proximal.	B	D
<b>Knee region</b>			
00523	Children.	B	B
00527	Adults.	B	D
00528	Os Calcis (Dwyer operation).	C	B
00530	Metacarpal and phalanx: Corrective for mal-union or rotation	C	B
00532	Rotation osteotomies of the Radius, Ulna or Humerus	C	C
00533	Osteotomy, single metatarsal	A	A
00534	Multiple metatarsal osteotomies.	B	C
<b>Exostosis</b>			
00535	Exostosis: Excision: Readily accessible sites.	A	A
00537	Exostosis: Excision: Less accessible sites.	A	B
<b>Biopsy</b>			
00539	Needle Biopsy: Spine (no after-care), modifier 0005 not applicable.	A	A
00541	Needle Biopsy: Other sites (no after-care), modifier 0005 not applicable.	A	A
<b>Dislocations</b>			
00547	Clavicle: either end.	A	A
00549	Shoulder.	A	A
00551	Elbow.	A	A
00552	Wrist.	A	B
00553	Perilunar trans-scaphoid fracture dislocation	A	B
00555	Lunate.	A	B
00556	Carpometacarpal dislocation	A	A
00557	Metacarpophalangeal and Interphalangeal (hand)	A	A

		<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Dislocations</b>			
00559	Hip.	A	B
00561	Knee.	A	B
00563	Patella.	A	A
00565	Ankle.	A	B
00567	Sub-Talar dislocation.	A	B
00569	Intertarsal or Tarsometatarsal or Midtarsal.	A	B
00571	Metatarsophalangeal and interphalangeal joints (foot)	A	A
<b>Operations for dislocations</b>			
00578	Recurrent dislocation of shoulder	B	C
00579	Recurrent dislocation of all other joints.	B	C
<b>Capsular operations</b>			
00582	Capsulotomy or arthrotomy or biopsy or drainage of joint: Small joint (including three weeks after-care)	A	A
00583	Capsulotomy or arthrotomy or biopsy or drainage of joint: Large joint (including three weeks after-care).	A	B
00585	Capsulectomy digital joint.	A	B
00586	Multiple percutaneous capsulotomies of metacarpophalangeal joints.	A	B
00587	Release of digital joint contracture.	B	B
<b>Synovectomy</b>			
00589	Digital joint.	B	B
00592	Large joint.	C	C
00593	Tendon synovectomy.	C	B
<b>Arthrodesis</b>			
00597	Shoulder.	C	C
00598	Elbow.	C	C
00599	Wrist.	C	C
00600	Digital joint.	C	B
00601	Hip.	C	D
00602	Knee.	C	C
00603	Ankle.	C	C
00604	Sub-talar.	C	B
00605	Stabilization of foot (triple-arthrodesis).	C	C
00607	Mid-tarsal wedge resection	C	C
<b>Arthroplasty</b>			
00614	Debridement large joints	B	C
00615	Excision medial or lateral end of clavicle.	B	B
00617	Shoulder: Acromioplasty.	B	C
00619	Shoulder: Partial replacement	C	D
00620	Shoulder: Total replacement.	C	D
00621	Elbow: Excision head of radius.	B	B
00622	Elbow: Excision.	C	C
00623	Elbow: Partial replacement	C	C
00624	Elbow: Total replacement.	C	D
00625	Wrist: Excision distal end of ulna.	B	B
00626	Wrist: Excision single bone	B	B
00627	Wrist: Excision proximal row	B	C
00631	Wrist: Total replacement.	C	C
00635	Digital Joint: Total replacement.	C	C
00637	Hip: Total replacement	C	D
00639	Hip: Cup.	C	D
00641	Hip: Prosthetic replacement of femoral head.	C	D

**Arthroplasty**

- 00643 Hip: Girdlestone.
- 00645 Knee: Partial replacement
- 00646 Knee: Total replacement.
- 00649 Ankle: Total replacement
- 00650 Ankle: Astragalectomy.

Ana Grp	Proc Grp
C	D
C	D
C	D
C	C
B	C

**Miscellaneous (joints)**

- 00661 Aspiration of joint or intra-articular injection (not including after-care), modifier 0005 not applicable.

A	A
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**Multiple intra-articular injections for rheumatoid arthritis**

- 00663 First joint.
- 00665 Additional (each).
- 00667 Arthroscopy (excluding after-care), modifiers 0005 and 0013 not applicable.
- 00669 Manipulation large joint under general anaesthetic (not including after-care), modifier 0005 not applicable: Hip
- 00670 The consultation fee only should be charged when manipulation of a large joint is performed with or without local anaesthetic:
- 00673 Meniscectomy or operation for other internal derangement of knee.

A	A
A	A
A	A
A	A
A	
B	B

**Joint ligament reconstruction or suture**

- 00675 Ankle: Collateral.
- 00677 Knee: Collateral.
- 00678 Knee: Cruciate.
- 00679 Ligament augmentation procedure of knee.
- 00680 Digital joint ligament.

B	C
B	C
B	C
B	D
B	B

**Specific amputations**

- 00682 Fore-quarter amputation.
- 00683 Through shoulder.
- 00685 Upper arm or fore-arm.
- 00687 Partial amputation of the hand: One ray.
- 00691 Part of or whole of finger.
- 00693 Hindquarter amputation.
- 00695 Through hip joint region.
- 00697 Through thigh
- 00699 Below knee, through knee or Syme.
- 00701 Trans metatarsal or trans tarsal.
- 00703 Foot: One ray.
- 00705 Toe.

C	D
B	C
B	B
A	B
A	A
B	D
B	C
B	B
B	C
A	B
A	B
A	A

**Post-amputation reconstruction**

- 00706 Skin flap taken from a site remote from the injured finger or in cases of an advanced flap e.g. Cutler
- 00707 Krukenberg reconstruction
- 00709 Metacarpal transfer.
- 00711 Pollicization of the finger (to include all stages).
- 00712 Toe to thumb transfer.

A	B
C	C
B	C
C	D
C	D

**Investigations :**

- 00713 Electromyography.
- 00714 Electromyographic neuromuscular junctional study, including edrophonium response.
- 00715 Strength duration curve per session.
- 00717 Electrical examination of single nerve or muscle.
- 00721 Voltage integration during isometric contraction
- 00723 Tonometry with edrophonium
- 00725 Isometric tension studies with edrophonium.

A	B
A	A
A	A
A	A
A	A
A	A
A	A

**Cranial reflex study (both early and late responses) supra occulofacial or corneo-facial or fiabellofacial**

- 00727 Unilateral.

A	A
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<b>Cranial reflex study (both early and late responses) supra oculofacial or corneo-facial or flabellofacial</b>		<b>Ana Grp</b>	<b>Proc Grp</b>
00728	Bilateral.	A	A
00729	Tendon reflex time.	A	A
00735	Examinations of sensory nerve conduction by sweep averages (single nerve).	A	A
00737	Biopsy for motor nerve terminals and end plates.	A	A
00739	Combined muscle biopsy with end plates and nerve terminal biopsy.	B	A
00740	Muscle fatigue studies.	A	A
00741	Muscle biopsy.	B	A
<b>Decompression operations</b>			
00743	Major compartmental decompression.	A	B
00744	Fasciotomy only.	A	A
<b>Muscle and tendon repair</b>			
00745	Biceps humeri.	B	B
00746	Removal of calcification in Rotator cuff.	A	B
00747	Rotator cuff.	B	B
00755	Infrapatellar or quadriceps tendon	B	B
00757	Achilles tendon.	B	B
00759	Other single tendon.	A	B
00763	Tendon or ligament Injection	A	A
<b>Flexor tendon suture</b>			
00767	Primary (per tendon).	A	B
00769	Secondary (per tendon)	A	C
<b>Extensor tendon suture</b>			
00771	Primary (per tendon).	A	B
00773	Secondary (per tendon).	A	B
00774	Repair of Boutonniere deformity or Mallet finger.	B	B
<b>Tendon graft</b>			
00775	Free tendon graft.	C	C
00776	Reconstruction of pulley for flexor tendon.	B	A
<b>Finger</b>			
00777	Flexor.	C	C
00779	Extensor.	C	B
00780	Two stage flexor tendon graft using silastic rod.	C	C
<b>Tenolysis</b>			
00781	Tendon freeing operation, except where specified elsewhere	B	B
00782	Carpal tunnel syndrome.	B	B
00783	De Quervain.	B	A
00784	Trigger finger.	B	A
00785	Flexor tendon freeing operation following free tendon graft or suture.	B	C
00787	Extensor tendon freeing operation following graft or suture	B	B
00788	Intrinsic tendon release per finger .	B	B
00789	Central tendon tenotomy for Boutonniere deformity	B	B
<b>Tenodesis</b>			
00790	Digital joint.	A	B
<b>Muscle tendon and fascia transfer</b>			
00791	Single tendon transfer.	B	B
00792	Multiple tendon transfer.	C	B
00793	Hamstring to quadriceps transfer.	C	B
00794	Pectoralis major or Latissimus dorsi transfer to biceps tendon	C	D
00795	Tendon transfer at elbow	C	B

**Muscle tendon and fascia transfer**

- 00796 Iliopsoas at hip.  
00797 Knee (Eggers).

Ana Grp	Proc Grp
C	C
C	B

**Hand tendons**

- 00803 Single tendon transfer (first)  
00809 Substitution for intrinsic paralysis of hand.  
00811 Opponens transfers.

B	B
C	C
C	B

**Muscle slide operations and tendon lengthening**

- 00812 Percutaneous Tenotomy: All sites.  
00813 Torticollis.  
00815 Scalentomy.  
00817 Scalentomy with excision of first rib.  
00821 Tennis elbow.  
00823 Excision or slide for Volkmann's Contracture.  
00825 Hip: Open muscle release.  
00829 Knee: Quadricepsplasty.  
00831 Knee: Open tenotomy.  
00835 Calf.  
00837 Open elongation tendon Achilles.  
00845 Foot: Plantar fasciotomy.  
00846 Foot: Postero-medial release for club-foot.

A	A
B	B
B	B
B	C
C	B
C	C
C	B
B	C
B	B
B	B
B	B
A	B
C	C

**Excision**

- 00847 Semimembranosus.  
00849 Prepatellar.  
00851 Olecranon.  
00853 Small bursa or ganglion.  
00855 Compound palmar ganglion or synovectomy.  
00857 Aspiration or injection (no after-care), modifier 0005 not applicable

B	B
A	A
A	A
A	A
A	B
A	A

**Leg equalisation and congenital hips and feet**

- 00859 Leg shortening.  
00861 Leg lengthening.  
00863 Epiphyseodesis at one level.

C	D
C	D
C	B

**Initial non-operative reduction and application of plastercast**

- 00865 One hip.  
00867 Two hips.  
00868 Open reduction of congenital dislocation of the hip

A	B
A	C
C	C

**Manipulation and plaster**

- 00873 One foot.

A	A
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**Removal of internal fixatives or prosthesis**

- 00886 Late removal of infected total joint replacement prosthesis (including six weeks after-care). Fee for total joint replacement of the specific joint plus 64,00 units (general practitioner 42,00 units)

C	
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**Plasters (exclusive of after-care)**

- 00887 Limb cast (excluding after-care) (modifier 0005 not applicable).  
00889 Spica, plaster jacket or hinged cast brace (excluding after-care).  
00891 Tumbuckle cast (excluding after-care).  
00893 Adjustment or repair of tumbuckle cast (excluding after-care).

A	A
B	A
B	A
A	A

**Toes: multiple claw toes: radical operation**

- 00897 One foot.  
00901 Tenotomy extensor tendons  
00903 Hammer toe or overlapping toe

C	B
C	A
C	A

**Toes: multiple claw toes: radical operation**

00905 Filleting toe or syndactyly.

Ana GrpProc Grp

C

A

**Big toe**

00906 Arthrodesis Hallux.

B

B

00907 Hallux Valgus: Bunionectomy

B

B

00909 Excision arthroplasty.

B

B

00910 Prosthetic replacement big toe.

B

C

00911 Osteotomy first metatarsal including bunionectomy.

B

B

**Reimplantations**

00912 Replant of amputated upper limb proximal to wrist joint

C

D

00913 Replantation of thumb.

C

D

00914 Replantation of a single digit (to be motivated), for multiple digits, modifier 0005 applicable.

C

D

00915 Replantation operation through the palm.

C

D

**Tumours**

00919 Epidermoid cysts.

A

A

00920 Ganglion or fibroma.

A

A

00921 Nodular synovitis (Giant cell tumour of tendon sheath)

A

B

**Removal of foreign bodies requiring incision**

00922 Under local anaesthetic.

A

A

00923 Under general or regional anaesthetic.

A

A

**Crushed hand injuries**

00924 Initial extensive soft tissue toilet under general anaesthetic (sliding scale).

A

A

00925 Subsequent dressing changes under general anaesthetic

B

A

**Spine**

00927 Excision of one vertebral body, for a lesion within the body (no decompression)

C

C

00928 Excision of each additional vertebral segment for a lesion within the body (no decompression)

C

C

00929 Manipulation of spine under general anaesthetic: (no after-care), modifier 0005 not applicable.

B

A

00930 Posterior osteotomy of spine: One vertebral segment

C

D

00931 Posterior spinal fusion: One level.

C

D

00932 Posterior osteotomy of spine: Each additional vertebral segment

C

D

00933 Anterior spinal osteotomy with disc removal: One vertebral segment

C

D

00934 Spinal fusion: Multiple levels

C

D

00935 Occipito-cervical fusion.

C

D

00936 Anterior spinal osteotomy with disc removal: Each additional vertebral segment

C

D

00937 Sacro-iliac fusion.

C

C

00938 Anterior fusion base of skull to C2

C

D

00939 Trans-abdominal anterior exposure of the spine for spinal fusion only if done by a second surgeon

B

C

00940 Trans-thoracic anterior exposure of the spine if done by a second surgeon

B

C

00941 Anterior interbody fusion: One level

C

D

00942 Anterior interbody fusion: Each additional level

C

D

00944 Posterior fusion: Occiput to C2

C

D

00945 Lumbar discectomy: Multiple levels on both sides.

C

C

00946 Posterior spinal fusion: Each additional level

C

D

00947 Surgical removal cervical or thoracic disc: One level

C

C

00948 Posterior interbody lumbar fusion: One level

C

D

00949 Surgical removal cervical or thoracic disc: Multiple levels

C

D

00950 Posterior interbody lumbar fusion: Each additional interspace

C

D

00951 Removal disc plus spinal fusion: One level.

C

D

00953 Removal disc plus spinal fusion: Multiple levels.

C

D

00959 Excision of coccyx.

B

B

Spine	Ana Grp	Proc Grp
00961 Costo-transversectomy.	B	C
00963 Antero-lateral decompression of spinal cord or anterior debridement	C	D
<b>Spinal deformities</b>		
00952 Posterior fusion for spinal deformity: Up to 6 levels	A	D
00954 Posterior fusion for spinal deformity: 7 to 12 levels	A	D
00955 Posterior fusion for spinal deformity: 13 or more levels	A	D
00956 Anterior fusion for spinal deformity 2 or 3 levels	A	D
00957 Anterior fusion for spinal deformity: 4 to 7 levels	A	D
00958 Anterior fusion for spinal deformity: 8 or more levels	A	D
00973 Spinal fusion.	C	D
00975 Internal mechanical fixation and spinal fusion	C	D
00976 Internal mechanical fixation by using Harrington/Zielke/or similar procedure and spinal fusion with sub-laminal wires	C	D
00977 Cotrel-Duboiset/or similar procedure (8 to 10 hooks) and spinal fusion	C	D
00978 Internal mechanical fixation without fusion.	C	D
00979 Revision of fusion and repair of pseudo-arthrosis at one or more levels: Posterior approach	C	D
00981 Osteotomy of posterior elements and fusion.	C	D
00983 Osteotomy, excision or release of anterior spinal elements	C	D
00984 Dwyer type of procedure.	C	D
00985 Removal of internal mechanical fixation.	C	B
00986 Removal of internal mechanical fixation: Multiple levels .	C	B
<b>All spinal problems</b>		
00943 Laminectomy with decompression of nerve roots and disc removal: One level.	C	C
00960 Posterior non-segmental instrumentation	B	C
00962 Posterior segmental instrumentation : 2 to 6 vertebrae	B	C
00964 Posterior segmental instrumentation: 7 to 12 vertebrae	B	C
00966 Posterior segmental instrumentation: 13 or more vertebrae	B	C
00968 Anterior instrumentation: 2 to 3 vertebrae	B	C
00970 Anterior instrumentation: 4 to 7 vertebrae	B	C
00972 Anterior instrumentation: 8 or more vertebrae	B	C
00974 Additional pelvic fixation of instrumentation other than sacrum	B	B
05750 Reinsertion of instrumentation	B	D
05751 Removal of posterior non-segmental instrumentation	B	C
05752 Removal of posterior segmental instrumentation	B	C
05753 Removal of anterior instrumentation	B	C
05755 Laminectomy for spinal stenosis (exclude diskectomy, foraminotomy and spondylolisthesis): One or two levels	A	D
05756 Laminectomy with full decompression for spondylolisthesis (Gill procedure)	A	D
05757 Laminectomy for decompression without foraminotomy or diskectomy more than two levels	A	D
05758 Laminectomy with decompression of nerve roots and disc removal: Each additional level	A	D
05759 Laminectomy for decompression diskectomy etc., revision operation	B	D
05760 Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: One level	A	D
05761 Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: Each additional level	A	D
05763 Anterior disc removal and spinal decompression cervical: One level	A	D
05764 Anterior disc removal and spinal decompression cervical: Each additional level	A	D
05765 Vertebral corpectomy for spinal decompression: One level	A	D
05766 Vertebral corpectomy for spinal decompression: Each additional level	A	D
<b>Facial bone procedures</b>		
00987 Repair of orbital floor (blowout fracture).	C	C
00988 Genioplasty.	C	C

**Open reduction and fixation of central mid-third facial fracture with displacement****Ana Grp Proc Grp****Open reduction and fixation of central mid-third facial fracture with displacement**

00989	Le Fort I.	B	C
00990	Le Fort II.	C	D
00991	Le Fort III.	C	D
00992	Le Fort I Osteotomy.	C	D
00993	Palatal Osteotomy.	C	D
00994	Le Fort II Osteotomy (team fee).	C	D
00995	Le Fort III Osteotomy (team fee).	C	D

**Mandible: fractured nose and zygoma**

00997	Open reduction and fixation.	C	D
00999	Closed reduction by inter-maxillary fixation.	C	C
01001	Temporo-mandibular joint: Reconstruction for dysfunction	C	C
01003	Manipulation: Immobilisation and follow-up of fractured nose.	A	A
01007	Mandibulectomy.	C	D
01009	Maxillectomy	C	D
01011	Bone graft to mandible.	C	C
01012	Adjustment of occlusion by ramisection.	C	C
01015	Fracture of arch of zygoma with displacement requiring operative manipulation but not including associated fractures, recent fractures (within four weeks)	C	B
01017	Fracture of arch of zygoma with displacement requiring operative manipulation but not including associated fractures; (after four weeks)	C	C

**Nose and sinuses**

01020	Septum perforation repair, by any method.	C	B
01022	Functional reconstruction of nasal septum.	C	B
01024	Insertion of silastic obturator into nasal septum perforation (excluding material)	B	A
01025	Intranasal antrostomy, uni- or bilateral.	B	A
01027	Dacryocystorhinostomy.	B	C
01029	Turbinectomy, uni- or bilateral	B	A
01030	Endoscopic turbinectomy: laser or microdebrider	B	B
01033	Removal of multiple polyps in hospital under general anaesthetic	B	A
01034	Autogenous nasal bone transplant: Bone removal included	C	B
01035	Functional endoscopic sinus surgery: Unilateral	C	B
01036	Bilateral functional endoscopic sinus surgery.	C	C

**Diathermy to nose or pharynx exclusive of consultation fee, uni- or bilateral**

01039	Under general anaesthetic	B	A
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**Severe epistaxis, requiring hospitalisation**

01041	Anterior plugging (including after-care).	B	A
01043	Anterior and posterior plugging (including after-care)	B	A
01045	Ligation anterior ethmoidal artery.	B	A
01047	Caldwell-Luc operation (unilateral).	B	B
01049	Ligation internal maxillary artery.	B	B
01050	Vidian neurectomy (transantral or transnasal).	B	B
01051	Removal nasopharyngeal fibroma.	C	D
01052	Instrumental examination of the nasopharynx including biopsy under general anaesthetic.	B	A
01053	Frontal sinus drainage only	B	B
01055	External frontal ethmoidectomy	C	C
01057	External ethmoidectomy and/or sphenoidectomy	C	C
01058	Sublabial transseptal sphenoidotomy.	C	B
01059	Frontal osteomyelitis.	B	C
01060	Obliteration of frontal sinus.	B	C



**Severe epistaxis, requiring hospitalisation**

**Ana Grp Proc Grp**

01061	Lateral rhinotomy.	C	C
01065	Removal of foreign body from nose under general anaesthetic	A	A
01067	Proof puncture at rooms (unilateral).	A	A
01069	Proof puncture, uni- or bilateral under general anaesthetic	A	A
01079	Septum abscess, under general anaesthetic.	A	A
01081	Oro-antral fistula (without Caldwell-Luc).	B	B
01083	Choanal atresia: Intranasal approach.	B	B
01084	Choanal atresia: Transpalatal approach.	C	C
01085	Total reconstruction of the nose: including reconstruction of nasal septum (septumplasty) nasal pyramid (osteotomies) and nose	C	D
01087	Sub-total reconstruction consisting of any two of the following: septumplasty, osteotomies, nasal tip reconstruction	B	C

**Forehead rhinoplasty (all stages)**

01089	Total.	C	D
01091	Partial.	C	D
01093	Rhinophyma without skin graft	B	B
01095	Full nasal reconstruction for secondary cleft lip deformity	C	D
01097	Partial nasal reconstruction for cleft lip deformity	B	C
01099	Columella reconstruction or lengthening.	B	B

**Throat**

01101	Tonsillectomy (dissection of tonsils)	B	B
01102	Laser tonsillectomy	B	B
01105	Removal of adenoids	B	A
01106	Laser assisted functional reconstruction of palate and uvula: In the rooms (+ item 3201 for hire of laser) (a 25% reduction in applicable should further follow-up operations be performed by the same surgeon)	B	B
01107	Opening of quinsy - at rooms.	B	A
01108	Laser assisted functional reconstruction of palate and uvula: In rooms (+ item 3201 for hire of laser): Follow-up operation performed by the same surgeon	A	B
01109	Opening of quinsy under general anaesthetic	B	A
01110	Ludwig's Angina: Drainage.	B	A
01111	Post tonsillectomy or adenoidectomy haemorrhage	B	A
01112	Pharyngeal pouch operation.	C	C
01113	Retropharyngeal abscess internal approach.	B	A
01115	Retropharyngeal abscess external approach.	B	B
01116	Functional reconstruction of palate and uvula	C	B

**Larynx**

01118	Laryngeal stroboscopy with video capture	B	A
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**Laryngectomy**

01119	Laryngectomy without block dissection of the neck.	C	D
01125	Endolaryngeal operations (with full details of the procedure performed)	B	A
01126	Post laryngectomy for voice restoration.	C	B
01127	Tracheotomy.	B	B
01128	Endolaryngeal operations using a laser.	B	B
01129	External laryngeal operation e.g. laryngeal stenosis, laryngocele, abductor paralysis, laryngo- fissure.	C	C

**Direct laryngoscopy**

01130	Diagnostic laryngoscopy including biopsy (also to be applied when a flexible fibre-optic laryngoscope was used)	B	A
01131	Plus foreign body removal	B	B

**Bronchoscopy**

01132	Diagnostic bronchoscopy	B	B
01133	With removal of foreign body.	B	B
01134	Bronchoscopy with use of laser.	B	B
01135	With bronchography.	B	B

		Ana Grp	Proc Grp
<b>Bronchoscopy</b>			
01136	Nebulisation (in rooms)	A	A
01137	Bronchial lavage.	B	
01138	Thoracotomy: for broncho-pleural fistula(including ruptured bronchus, any cause)	C	D
<b>Pleura</b>			
01139	Pleural needle biopsy: (no after-care), modifier 0005 not applicable	A	A
01141	Insertion of intercostal catheter (under water drainage)	B	A
01142	Intra-pleural block.	B	A
01143	Paracentesis chest: Diagnostic.	A	A
01145	Paracentesis chest: Therapeutic.	A	A
01149	Pleurectomy.	C	C
01151	Decortication of lung.	C	D
01153	Chemical pleurodesis (instillation silver nitrate, tetracycline, talc, etc)	A	A
<b>Surgical</b>			
01155	Needle biopsy lung: (no after-care) modifier 0005 not applicable	A	A
01157	Pneumectomy.	C	D
01159	Pulmonary lobectomy.	C	D
01161	Segmental lobectomy.	C	D
<b>Excision tracheal stenosis</b>			
01163	Cervical.	C	D
01164	Intra thoracic.	C	D
01167	Thoracoplasty associated with lung resection or done by the same surgeon within 6 weeks.	C	C
01168	Thoracoplasty: Complete.	C	C
01169	Thoracoplasty: Limited/osteoplastic.	C	C
01171	Drainage empyema (including six weeks after treatment)	C	C
01173	Drainage of lung abscess (including six weeks after treatment)	C	C
01175	Thoracotomy (limited): For lung or pleural biopsy.	C	B
01177	Major: Diagnostic, as for inoperable carcinoma	C	C
01179	Thoracoscopy.	C	B
01181	Unilateral lung transplant.	C	D
01182	Harvesting donor lung: Unilateral.	B	B
<b>Excision or plication of emphysematous cyst</b>			
01183	Unilateral.	C	C
01184	Bilateral synchronous (Median sternotomy).	C	D
01185	Re-exploration following sternal dehiscence.	C	B
<b>Pulmonary function tests</b>			
01186	Flow volume test: Inspiration/expiration.	B	A
01188	Flow volume test: Inspiration/expiration pre- and post bronchodilator (to be charged for only with first consultation - thereafter item 1186 applies)	B	A
01189	Forced expirogram only	A	A
01191	N2 single breath distribution	A	A
01192	Peak expiratory flow only.	A	A
01193	Closed circuit or body plethysmograph determination of F.R.C.	B	A
01195	Airway resistance, body plethysmograph.	B	A
01196	Airway resistance, body plethysmograph: pre- and post bronchodilator (to be charged for only with first consultation - thereafter item 1195 applies)	B	A
01197	Compliance and resistance, using oesophageal balloon	B	A
01198	Histamine/metacholine inhalation test.	B	A
01199	Cardio-respiratory exercise test (treadmill or cycle to be charged for separately) with recording of V.E., V.O2, H.R., R.R., ECG and oximetry	B	A
01200	C.O. diffusion test, single breath or steady state.	B	A
01201	Maximum inspiratory/expiratory pressure.	A	A

		Ana Grp	Proc Grp
<b>Neonatal procedures</b>			
<b>Neonatal procedures</b>			
01202	Insertion of central venous catheter via peripheral vein in neonates.	B	A
<b>Ventilation</b>			
01215	Insertion of arterial pressure cannula.	A	A
01216	Insertion of Swan Ganz catheter for haemodynamic monitoring .	B	A
01217	Insertion of central venous line via peripheral vein .	A	A
01218	Insertion of central venous line via subclavian or jugular veins.	A	A
01221	Professional fee for managing a patient-controlled analgesic pump: Once off charge per patient .	B	A
<b>Mediastinal procedures</b>			
01222	Mediastinal tumours.	C	D
01223	Mediastinoscopy.	B	B
01224	Mediastinotomy.	C	B
01225	Excision of malignant chest wall tumours involving sternum and multiple ribs.	C	D
01226	Removal of single rib with a lesion.	C	D
<b>General</b>			
01227	Prolonged neonatal resuscitation.	B	
<b>Electrocardiogram</b>			
01245	Angiography cerebral: First two series.	B	A
01246	Angiography peripheral: Per limb.	B	A
01247	Cardioversion for arrhythmias (any method) with doctor in attendance	B	B
01248	Paracentesis of pericardium.	B	A
<b>Cardiac catheterisation</b>			
01249	Right and left cardiac catheterisation without coronary angio-graphy (with or without biopsy).	C	B
01250	Endomyocardial biopsy.	B	B
01251	Transseptal puncture.	B	B
01252	Left heart catheterisation with coronary angiography (with or without biopsy).	C	B
01253	Right heart catheterisation (with or without biopsy)	C	B
01254	Catheterisation of coronary artery bypass grafts and/or internal mammary grafts.	C	A
<b>Electrophysiological study</b>			
01256	Ventricular stimulation study.	C	C
01257	Full electrophysiological study	C	D
<b>Pacemakers</b>			
01258	Permanent - single chamber.	B	C
01259	Permanent - dual chamber.	B	C
01260	AV nodal ablation.	C	D
01261	Accessory pathway ablation.	C	D
01263	Insertion transvenous implantable defibrillator.	C	D
01264	Test for implantable transvenous defibrillator	C	B
01265	Renewal of pacemaker unit only, team fee.	B	B
01267	Repositioning of catheter electrode.	B	A
01273	Insertion of temporary pacemaker (modifier 0005 not applicable).	B	B
01275	Termination of arrhythmia - programmed stimulation and lead insertion of temporary pacer.	B	C
<b>Percutaneous transluminal angioplasty</b>			
01276	First cardiologist: single lesion	C	C
01277	Second cardiologist: single lesion.	C	B
01278	First cardiologist: second lesion.	C	A
01279	Second cardiologist: second lesion.	C	A
01280	First cardiologist: third or subsequent lesions (each)	C	A
01281	Second cardiologist: third or subsequent lesions (each)	C	A

		Ana Grp	Proc Grp
<b>Percutaneous transluminal angioplasty</b>			
01282	Use of balloon procedures including - first cardiologist	C	C
	- Atrial septostomy		
	- Pulmonary valve valvuloplasty		
	- Aortic valve valvuloplasty		
	- Coarctation dilation		
	- Mitral valve valvuloplasty.		
01283	Use of balloon procedure as in item 1282 - second cardiologist	C	B
<b>Paediatric cardiac catheterisation</b>			
01288	Paediatric cardiac catheterisation	C	C
01289	Paediatric cardiac catheterisation: Infants below the age of one year.	C	C
<b>Cardiac surgery</b>			
01294	Patent ductus arteriosus.	C	D
01295	Pericardiectomy for constrictive pericarditis.	C	D
01297	Coarctation of aorta.	C	D
01299	Systemo-pulmonary anastomosis.	C	D
01301	Mitral valvotomy: Closed heart technique.	C	D
01302	Heart transplant.	C	D
01303	Harvesting donor heart.	B	B
01305	Operative implantation of cardiac pacemaker by thoracotomy	C	C
01307	Re-exploration after cardiac surgery.	C	C
01308	Heart and lung transplant.	C	D
01309	Harvesting donor heart and lungs.	B	B
01311	Pericardial drainage.	C	B
<b>Open heart surgery</b>			
01320	Repeat open heart surgery (additional fee above procedure fee)	C	C
01321	Stand-by fee for coronary angioplasty.	B	A
<b>Atrial septal defect</b>			
01323	Osteum secundum.	C	D
01325	Sinus venosus or osteum primum.	C	D
01327	Ventricular septal defect.	C	D
01329	Fallot's tetralogy.	C	D
01330	Pulmonary stenosis.	C	D
01331	Transposition of large vessels (venous repair).	C	D
01332	Transposition of great arteries (arterial repair).	C	D
01333	Ebstein's Anomaly.	C	D
01335	Total anomalous venous drainage.	C	D
01337	Creation of atrial septal defect by thoracotomy with or without cardiac bypass.	C	D
01338	Fontan type repair	C	D
<b>Acquired conditions</b>			
01339	Mitral valve replacement.	C	D
01340	Mitral valvuloplasty	C	D
01341	Aortic valve replacement.	C	D
01342	Tricuspid annulo plasty.	C	C
01343	Double valve replacement.	C	D
01344	Acute dissecting aneurysm repair.	C	D
01345	Aortic arch aneurysm repair utilising deep hypothermal and circulatory arrest.	C	D
<b>Aorta-coronary bypass operation (Including Interpretation of angiogram)</b>			
01348	Utilizing saphenous veins.	C	D
01349	Additional arterial implant: any artery.	C	D
01350	Additional double arterial implant: any artery.	C	D
01351	Aorta-coronary bypass operation with valve replacement or excision of cardiac aneurysm	C	D

		Ana Grp	Proc Grp
<b>Aorta-coronary bypass operation (Including interpretation of angiogram)</b>			
01352	Cardiac aneurysm.	C	D
01353	Ascending/descending thoracic aortic aneurysm repair	C	D
01354	Arrhythmia surgery.	C	D
01355	Cardiac tumour.	C	D
01356	Insertion and removal of intra-aortic balloon pump (modifier 0005 not applicable).	C	C
<b>Abdominal aorta and iliac artery</b>			
01372	Unruptured	C	D
01373	Ruptured.	C	D
01375	Grafting and/or thrombo-endarterectomy for thrombosis	C	D
01376	Aorta bifemoral graft, including proximal and distal endarterectomy and preparation for anastomosis	C	D
<b>Iliac artery</b>			
01379	Prosthetic grafting and/or Thrombo-endarterectomy	C	D
<b>Peripheral</b>			
01385	Prosthetic grafting.	C	C
01396	Suture major blood vessel (artery or vein) - trauma (major blood vessel are definde as aorta, innominate artery, carotid artery and vetebral artery, subclavian artery, axillary artery, iliac artery, common femoral and popliteal artery. The vertebral and popliteal arteries are included because of the relevant inaccessibility of the arteries and difficult surgical exposure.)	C	C
<b>Grafting vein</b>			
01387	Vein grafting proximal to knee joint.	C	D
01388	Distal to knee joint	C	D
01389	Endarterectomy when not part of another specified procedure	C	C
01390	Carotid endarterectomy.	C	D
<b>Embolectomy</b>			
01393	Peripheral embolectomy transfemoral .	B	C
<b>Miscellaneous arterial procedures</b>			
01395	Arterial suture: trauma.	B	B
01397	Profundoplasty.	B	C
01399	Distal tibial (Ankle region).	C	D
01401	Femoro-femoral.	C	C
01402	Carotid-subclavian.	C	D
01403	Axillo-femoral: (Bifemoral + 50%).	C	D
<b>Veins</b>			
01407	Ligation of saphenous vein.	A	A
01408	Placement of Hickman catheter or similar.	B	B
<b>Ligation of inferior vena cava :</b>			
01410	Abdominal.	B	C
<b>"Umbrella" operation on inferior vena cava :</b>			
01412	Abdominal.	C	B
<b>Combined procedure for varicose veins: ligation of saphenous vein, stripping, multiple ligation including of perforating veins as indicated :</b>			
01413	Unilateral.	B	B
01415	Bilateral.	B	C
01417	Extensive sub-fascial ligation of perforating veins.	B	B
01419	Lesser varicose vein procedures	A	A
<b>Thrombectomy</b>			
01425	Inferior vena cava (Trans abdominal).	C	C
01427	Ilio-femoral.	B	C
<b>Portal hypertension</b>			
01429	Porto-caval shunt.	C	D

	<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Splenectomy</b>		
<b>Splenectomy</b>		
01435 Splenectomy (In all cases)	C	C
01436 Splenorrhaphy.	C	C
<b>Excision of lymph node for biopsy</b>		
01439 Neck or axilla.	A	B
01441 Groin.	A	B
01443 Simple excision of lymph nodes for tuberculosis	A	B
<b>Radical excision of lymph nodes of neck: total</b>		
01445 Unilateral.	C	D
01447 Suprahyoid unilateral.	C	C
01449 Radical excision of lymph nodes of axilla.	C	C
<b>Radical excision of lymph nodes of groin</b>		
01451 Ilio-inguinal.	C	C
01453 Inguinal.	C	C
01455 Retroperitoneal lymphadenectomy including pelvic, aortic and renal nodes.	C	D
<b>Bone marrow biopsy</b>		
01457 By trephine.	A	A
01459 Staging laparotomy for lymphoma (including splenectomy)	B	C
<b>Bone marrow transplantation</b>		
01450 Cryopreservation of bone marrow or peripheral blood stem cells	B	A
01454 Plasma/cell separation using designated cell separator equipment (per hour) (specify time used)	B	A
01456 Preparation of extra-corporeal equipment by the medical practitioner for plasma, platelet and leucocyte pheresis	B	A
<b>Oral cavity</b>		
01461 All dental procedures.	A	
01463 Surgical biopsy of tongue or palate: Under general anaesthetic.	A	A
01465 Surgical biopsy of tongue or palate: Under local anaesthetic	A	A
01467 Drainage of intra-oral abscess.	A	A
01469 Local excision of mucosal lesion of oral cavity.	A	A
01471 Resection of malignant lesion of buccal mucosa including radical neck dissection (Commando operation), but not including reconstructive plastic procedure	C	D
01473 Complicated reconstruction following major ablative procedure for head and neck cancer.	C	
01475 Cleft palate: Repair primary deformity with or without pharyngoplasty	C	D
01477 Cleft palate: Secondary repair.	C	C
01478 Velopharyngeal reconstruction with myoneurovascular transfer (dynamic repair)	A	C
01479 Velopharyngeal reconstruction with or without pharyngeal flap (static repair).	C	C
01480 Repair of oronasal fistula (large) e.g. distant flap	A	C
01481 Repair of oronasal fistula (small) e.g. trapdoor: One stage or first stage	C	B
01482 Repair of oronasal fistula (large): Second stage	A	B
01483 Alveolar periosteal or other flaps for arch closure	C	B
01486 Closure of anterior nasal floor	A	B
<b>Lips</b>		
01485 Local excision of benign lesion of lip.	A	A
01487 Resection for lip malignancy.	B	B
<b>Cleft lip</b>		
01484 Lip adhesion (cleft lip)	A	B
01489 Repair unilateral cleft lip (with muscle reconstruction).	B	C
01490 Repair bilateral cleft lip (with muscle reconstruction) (one of two stages)	A	C
01491 Repair bilateral cleft lip (with muscle reconstruction) (one stage).	B	D
01492 Repair bilateral cleft lip (second stage)	A	C

		Ana Grp	Proc Grp
<b>Cleft lip</b>			
01493	Total revision of secondary cleft lip deformities.	B	C
01494	Partial revision of secondary cleft lip deformity	A	B
01495	Abbé or Estlander type flap (all stages included).	B	C
01497	Vermilionectomy.	B	B
01499	Lip reconstruction following an injury: Direct repair	B	B
<b>Lip reconstruction following an injury or tumour removal</b>			
01501	Flap repair.	B	C
01503	Total reconstruction (first stage).	B	C
01504	Subsequent stages (see item 0299).	B	B
<b>Tongue</b>			
01505	Partial glossectomy.	B	C
01507	Local excision of lesion of tongue.	A	A
<b>Palate, uvula and salivary glands</b>			
01509	Wide excision of lesion of palate.	B	B
01511	Radical resection of palate (including skin graft).	C	C
01513	Excision of ranula.	B	A
01515	Excision of sublingual salivary gland.	C	B
01517	Excision of submandibular salivary gland.	C	C
01519	Excision of submandibular salivary gland with suprahyoid dissection	C	C
01521	Excision of submandibular salivary gland: With radical neck dissection.	C	D
01523	Local resection of parotid tumour.	B	B
01525	Partial parotidectomy.	C	C
01527	Total parotidectomy.	C	C
01529	Extracapsular Parotidectomy	C	D
01531	Drainage of parotid abscess.	A	A
01533	Closure of salivary fistula.	B	B
01535	Dilatation of salivary duct.	B	A
01537	Operative removal of salivary calculus.	B	A
01539	Meatotomy: Salivary duct.	B	A
01541	Branchial cyst and/or fistula: Excision.	B	B
01543	Excision of cystic hygroma	B	B
01544	Ludwig's Angina: Drainage	B	A
<b>Oesophagus</b>			
01545	Oesophagoscopy with rigid instrument: First and subsequent	B	A
01549	Oesophagoscopy with dilatation of stricture.	B	B
01550	With removal of foreign body.	B	B
01551	With insertion of indwelling oesophageal tube.	B	B
01552	Injection of oesophageal varices (endoscopy inclusive)	B	B
01553	Subsequent injection of oesophageal varices (endoscopy inclusive).	B	B
01554	Per-oral small bowel biopsy.	B	A
01555	Repair of tracheal oesophageal fistula and oesophageal atresia.	C	D
01557	Oesophageal dilatation.	B	A
<b>Oesophagectomy</b>			
01559	Two stage.	C	D
01560	Three stage.	C	D
01561	Thoraco-abdominal oesophagogastrectomy .	C	D
<b>Hiatus hernia and diaphragmatic hernia repair</b>			
01563	With anti-reflux procedure.	C	D
01565	With Collis Nissen oesophageal lengthening procedure	C	D

		Ana Grp	Proc Grp
<b>Hiatus hernia and diaphragmatic hernia repair</b>			
01566	Private fee: Gastroplasty.	C	D
01567	Bochdalek hernia repair in newborn.	C	C
01568	Hiatus hernia and diaphragmatic repair: Revision after previous repair.	C	D
01569	Heller's operation.	C	C
01575	Insertion of indwelling oesophageal tube - laparotomy	B	B
01578	Oesophageal motility (2 channel + pneumograph)	C	B
01579	Oesophageal substitution (without oesophagectomy) using colon, small bowel or stomach	C	D
01580	Oesophageal motility (3 Channel + pneumograph + pH pull-through)	C	B
01581	Removal of benign oesophageal tumours.	C	D
01582	Oesophageal motility (3 channel + pneumograph - ECG + provocative tests for oesophageal spasm vs. myocardial ischaemia)	C	C
01583	Excision of intrathoracic oesophageal diverticulum.	C	C
<b>Stomach</b>			
01587	Upper gastro-intestinal fibre-optic endoscopy - Own equipment	B	B
01588	Plus polypectomy	B	C
01589	Endoscopic control of gastrointestinal haemorrhage from upper gastrointestinal tract, intestines or large bowel by injection of vasoconstrictors and/or scleroses (endoscopic haemostasis) to be added to gastroscopy (item 1587) or colonoscopy (item 1653) : Add	A	B
01591	Upper gastro-intestinal endoscopy with removal of foreign bodies (stomach)	B	B
01597	Gastrostomy or Gastrostomy	B	B
01599	Pyloromyotomy (Rammstedt).	B	B
01601	Local excision of ulcer or benign neoplasm	B	B
<b>Vagotomy</b>			
01603	Abdominal.	B	C
01604	Thoracic.	C	C
01605	Truncal or selective with drainage procedures.	B	C
01607	Vagotomy and antrectomy	B	D
01609	Highly selective vagotomy.	B	C
01611	Pyloroplasty.	B	B
01613	Gastroenterostomy	B	B
01615	Suture of perforated gastric or duodenal ulcer or wound or injury	B	C
01617	Partial gastrectomy.	C	D
01619	Total gastrectomy	C	D
01621	Revision of gastrectomy or gastro-enterostomy.	C	D
01625	Gastro-oesophageal operation for portal hypertension (Tanner)	C	D
<b>Duodenum</b>			
01626	Endoscopic examination of the small bowel beyond the duodenojejunal flexure with biopsy with or without polypectomy with or without arrest of haemorrhage (enteroscopy)	A	B
<b>Intestines</b>			
01634	Enterotomy or Enterostomy.	B	B
01635	Intestinal obstruction of the newborn.	C	C
01637	Operation for relief of intestinal obstruction	C	C
01639	Resection of small bowel with enterostomy or anastomosis	C	C
01641	Entero-enterostomy or entero-colostomy for bypass	C	B
01645	Suture of intestine (small or large): Perforated ulcer, wound or injury	B	B
01647	Closure of intestinal fistula	B	C
01649	Excision of Meckel's diverticulum	B	B
01651	Excision of lesion of mesentery.	B	B
01652	Laparotomy for mesenteric thrombosis	C	D
<b>Total fibre-optic colonoscopy</b>			
01653	With own equipment (Including biopsy)	B	B



**Total fibre-optic colonoscopy**

**Ana Grp Proc Grp**

- 01654 Fibre-optic colonoscopy with removal of polyps: Own equipment.
- 01656 Left sided fibre-optic colonoscopy.
- 01657 Right or left hemicolectomy or segmental colectomy.
- 01658 Reconstruction of colon after Hartman's procedure
- 01661 Colotomy: Including removal of tumour or foreign body.
- 01663 Total colectomy.
- 01665 Colostomy or ileostomy isolated procedure.
- 01666 Continent ileostomy pouch (all types).
- 01667 Colostomy Closure
- 01668 Revision of ileostomy pouch
- 01669 Total proctocolectomy and ileostomy.
- 01670 Proctocolectomy, ileostomy and ileostomy pouch
- 01671 Colomyotomy (Reilly operation)

B	C
B	B
C	D
B	C
B	B
C	D
B	B
C	D
B	C
C	D
C	D
C	D
B	C

**Appendix**

- 01673 Drainage of appendix abscess
- 01675 Appendicectomy.

B	C
B	B

**Rectum and anus**

- 01676 Fibre-optic sigmoidoscopy
- 01677 Sigmoidoscopy: First and subsequent, with or without biopsy.
- 01678 Fibre-optic sigmoidoscopy, plus polypectomy.
- 01679 Sigmoidoscopy with removal of polyps, first and subsequent

A	B
A	A
A	B
A	A

**Proctoscopy with removal of polyps**

- 01681 First time.
- 01683 Subsequent times.
- 01685 Endoscopic fulguration of tumour.
- 01687 Anterior resection of rectum performed for carcinoma of rectum including excision of any part of proximal colon necessary
- 01688 Total mesarectal excision with colo-anal anastomosis and defunctioning enterostomy or colostomy
- 01689 Perineal resection of rectum

A	A
A	A
B	A
C	D
B	D
C	B

**Abdomino-perineal resection of rectum**

- 01691 Abdominal surgeon.
- 01693 Local excision of rectal tumour (posterior approach)
- 01695 Combined abdomino-anal pull-through procedure for Hirschsprung's disease, rectal agenesis or tumour.

C	D
B	C
C	D

**Repair of prolapsed rectum: abdominal**

- 01697 Roscoe Graham Moskovitz
- 01699 Ivalon sponge.
- 01701 Perineal.
- 01703 Thiersch suture.
- 01705 Incision and drainage of peri-anal abscess.
- 01707 Drainage of submucous abscess.
- 01709 Drainage of ischio-rectal abscess.
- 01711 Excision of pelvi-rectal fistula
- 01713 Excision of fistula-in-ano
- 01715 Operation for fissure-in-ano
- 01719 Rubber band ligation of haemorrhoids: per haemorrhoid
- 01723 Haemorrhoidectomy.
- 01725 Drainage of external thrombosed pile.
- 01727 Multiple procedures (haemorrhoids, fissure, etc.).
- 01729 Excision of anal skin tags
- 01731 Operation for low imperforate anus.

C	D
C	C
C	C
B	A
A	A
A	A
A	B
B	C
A	B
A	A
A	A
A	A
A	B
A	A
C	B

**Repair of prolapsed rectum: abdominal**

	<u>Ana Grp</u>	<u>Proc Grp</u>
01733 Anoplasty: Y-V-plasty.	C	A
01735 Anal sphincteroplasty for incontinence.	C	B
01737 Dilation of ano-rectal stricture.	A	A
01739 Closure of recto-vesical fistula	C	C
01741 Closure of recto-urethral fistula	C	C

**Liver**

01743 Needle biopsy of liver.	A	A
01745 Biopsy of liver by laparotomy.	B	B
01747 Drainage of liver abscess or cyst.	B	B

**Hemi-hepatectomy**

01749 Right.	C	D
01751 Left.	C	D
01753 Partial or segmental hepatectomy.	C	D
01755 Liver transplant.	C	D
01756 Harvesting donor hepatectomy.	B	C
01757 Suture of liver wound or injury.	C	C

**Biliary tract**

01759 Cholecystostomy.	B	B
01761 Cholecystectomy.	C	C
01762 Cholecystectomy and operative cholangiogram.	C	C
01763 With exploration of common bile duct.	C	D
01765 Exploration of common bile duct: Secondary operation	C	D
01767 Reconstruction of common bile duct.	C	D
01769 Cholecysto-enterostomy or gastrostomy.	B	C
01770 Endoscopic placement of bilioduodenal endoprosthesis (125,00 units for sphincterectomy + 25,00 units for insertion of endoprosthesis)	C	C
01772 Endoscopic placement of a nasobiliary stent.	C	B
01773 Transduodenal sphincteroplasty.	C	C
01774 Balloon dilatation of common bile duct strictures.	C	B
01775 Excision choledochal cyst with reconstruction.	C	D
01777 Porto-enterostomy for biliary atresia.	C	D

**Pancreas**

01778 Pancreas: ERCP: Endoscopy + catheterisation of pancreas duct or choledochus.	C	B
01779 Endoscopic exploration of the common bile duct performed following endoscopic retrograde choangiography to be added to ERCP (item 1778): Add	A	B
01782 Endoscopic sphincterotomy.	C	B
01783 Drainage of pancreatic abscess	B	C
01785 Internal drainage of pancreatic cyst.	B	C
01789 Pancreatico-duodenectomy	C	D
01791 Local, partial or subtotal pancreatectomy.	C	C
01793 Distal pancreatectomy with internal drainage.	C	D
01795 Triple anastomosis for carcinoma of pancreas.	C	C

**Pneumo-peritoneum**

01797 First.	B	A
01799 Repeat.	B	A
01807 Add to open procedure where procedure was performed through a laparoscope (for anaesthetic refer to modifier 0027).	B	A
01809 Laparotomy.	B	C
01810 Radical removal of retro-peritoneal malignant tumours: including sacro-coccygeal and pre-sacral.	C	D
01811 Suture of burst abdomen	B	B
01812 Laparotomy for control of surgical haemorrhage.	C	B

		Ana Grp	Proc Grp
<b>Pneumo-peritoneum</b>			
01813	Drainage of subphrenic abscess.	B	C
<b>Drainage of other intraperitoneal abscess (excluding appendix abscess)</b>			
01815	Per abdomen.	B	C
01817	Transrectal drainage of pelvic abscess.	A	B
<b>Inguinal or femoral hernia :</b>			
01819	Adult.	B	B
01821	Child, under 14 years.	B	B
01823	Inguinal hernia: Infant under one year.	B	B
01825	Recurrent inguinal or femoral hernia.	B	C
01827	Strangulated hernia requiring resection of bowel.	C	C
01829	Epigastric hernia.	B	A
<b>Umbilical hernia</b>			
01831	Adult.	B	B
01833	Child under 14 years.	B	A
01835	Incisional hernia.	B	C
01837	Repair of omphalocele in new-born (one or more procedures).	C	D
<b>Kidney</b>			
01839	Renal biopsy, per kidney, open.	B	B
01841	Renal biopsy (needle).	A	A
<b>Nephrectomy:</b>			
01853	Primary nephrectomy.	C	C
01855	Secondary nephrectomy.	C	D
01857	Radical nephrectomy with regional lymphadenectomy for tumour.	C	D
01859	Partial	C	D
01861	Symphysiotomy for horse-shoe kidney.	B	D
01863	Nephro-ureterectomy.	C	D
01865	Nephrotomy with drainage nephrostomy.	B	C
01869	Nephrolithotomy.	B	C
01871	Staghorn stone - surgical.	B	D
01873	Suture renal laceration (renorrhaphy).	B	C
01875	Percutaneous aspiration cyst: Nephrostomy, pyelostomy	A	A
01877	Operation for renal cyst: Marsupialisation or excision	B	C
01879	Closure renal fistula.	B	C
01881	Pyeloplasty.	C	C
01883	Pyelostomy.	B	C
01885	Pyelolithotomy	C	C
01887	Complicated pyelolithotomy (e.g. solitary, ectopic, horse-shoe kidney or secondary operation).	C	C
01889	Nephrectomy for Allograft: Living or dead	C	C
01891	Perinephric abscess or renal abscess: Drainage.	B	B
01893	Aberrant renal vessels : Repositioning with pyeloplasty	C	C
01894	Auto transplantation of kidney.	C	D
01895	Allo transplantation of kidney.	C	D
<b>Ureter</b>			
01897	Ureterorrhaphy: Suture of ureter	B	C
01898	Lumbar approach.	B	C
01899	Ureteroplasty.	B	C
01901	Ureterolysis.	B	B
01902	Lumbar approach.	B	C
01903	Ureterectomy only.	B	B

		<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Ureter</b>			
01905	Ureterolithotomy.	B	B
<b>Cutaneous ureterostomy :</b>			
01907	Unilateral.	B	B
01909	Bilateral.	B	C
<b>Uretero-enterostomy :</b>			
01911	Unilateral.	C	B
01913	Bilateral.	C	C
01915	Uretero-ureterostomy.	C	B
01917	Transuretero-ureterostomy.	C	C
01919	Closure of ureteric fistula.	C	C
01921	Immediate deligation of ureter.	B	C
01923	Ureterolysis for retrocaval ureter with anastomosis.	B	C
01925	Uretero-pyelostomy.	B	C
<b>Uretero-neo-cystostomy :</b>			
01927	Unilateral.	C	C
01929	Bilateral.	C	D
01931	With Boariplasty.	C	C
01933	Uretero-sigmoidostomy with rectal bladder and colostomy	C	C
01935	Uretero-ileal conduit.	C	C
<b>Replacement of ureter by bowel segment:</b>			
01937	Unilateral	C	D
01939	Bilateral	C	D
<b>Ureterostomy-in-situ:</b>			
01941	Unilateral	B	B
01943	Bilateral	B	C
<b>Bladder</b>			
01945	Instillation of radio-opaque material for cystography or urethrocystography.	A	A
01947	Instillation of anti-carcinogenic agent including retention time, but not cost of material or hydrodilatation of bladder	A	A
01949	Cystoscopy: Hospital equipment.	A	A
01951	And retrograde pyelography or retrograde ureteral catheterisation: Unilateral or bilateral	B	A
01952	J J Stent catheter.	B	A
01953	With hydrodilatation of the bladder for interstitial cystitis	B	A
01954	Urethroscopy.	B	A
01955	And bilateral ureteric catheterisation with differential function studies requiring additional attention time.	B	B
01957	With dilatation of the ureter or ureters.	B	A
01959	With manipulation of ureteral calculus.	B	A
01961	With removal of foreign body or calculus from urethra or bladder.	B	A
01963	With fulguration or treatment of minor lesions, with or without biopsy.	B	A
01964	And control of haemorrhage and blood clot evacuation	B	A
01965	And catheterisation of the ejaculatory duct.	B	A
01967	With ureteric meatotomy: Unilateral or bilateral	B	A
01969	And cold biopsy.	B	A
01971	With cryosurgery for bladder or prostatic disease	B	B
01973	With incision fulguration, or resection of bladderneck and/or posterior urethra for congenital valves or obstructive hypertrophic bladderneck in a child	B	B
01975	Ultraviolet cystoscopy for bladder tumour.	B	A
01976	Optic urethrotomy.	A	B
01977	Transurethral resection of ejaculatory duct.	B	A

		<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Internal urethrotomy :</b>			
<b>Internal urethrotomy :</b>			
01979	Female.	A	A
01981	Male.	A	A
01983	Transurethral resection of bladder tumour.	C	B
01984	Transurethral resection of bladder tumours: Large multiple tumours.	C	B
<b>Transurethral resection of bladderneck :</b>			
01985	Female or child.	C	B
01986	Male.	C	B
01987	Litholapaxy.	C	B
01989	Cystometrogram.	C	A
01991	Flowmetric bladder, studies with videocystograph	C	A
01992	Without videocystograph.	C	A
01993	Voiding cysto-urethrogram.	C	A
01995	Percutaneous aspiration of bladder.	A	A
01996	Bladder catheterisation - male (not at operation)	A	A
01999	Percutaneous cystostomy.	A	A
<b>Total cystectomy :</b>			
02001	After previous urinary diversion.	C	D
02003	With conduit construction and ureteric anastomosis	C	D
02005	Cystectomy with substitute bowel bladder construction with anastomosis to urethra or trigone	C	D
02006	Cystectomy with continent urinary diversion (e.g. Kocks Pouch).	C	D
02007	Partial cystectomy.	C	C
02008	Continent urinary diversion without cystectomy (e.g. Kocks Pouch).	C	D
02009	Radical total cystectomy with block dissection, ileal conduit and transplantation of ureters.	C	D
02010	Reversion of temporary conduit.	C	D
02011	Partial cystectomy with uretero-neo-cystostomy	C	C
02012	Reversion of conduit with major urinary tract reconstruction	C	D
02013	Diverticulectomy (independent procedure): Multiple or single .	B	B
02015	Suprapubic cystostomy.	B	B
02016	Abdomino-neo-urethrostomy.	B	C
02017	Open loop fulguration or excision of bladder tumour	B	B
02019	Operation for vesico-vaginal or urethra- vaginal fistula	C	C
02020	Repair of vesico vaginal fistula: Abdominal approach.	C	C
02021	Vesico-plication (Hamilton Stewart).	C	B
02023	Vesico-urethrapexy for correction or urinary incontinence: Abdominal approach.	C	C
02025	Vesico-urethrapexy with rectus sling.	C	C
<b>Open operation for ureterocele:</b>			
02027	Unilateral.	C	B
02029	Bilateral.	C	C
<b>Reconstruction of ectopic bladder exclusive of orthopaedic operation (if required) :</b>			
02031	Initial .	C	C
02033	Subsequent.	C	A
02035	Cutaneous vesicostomy.	C	B
02037	Cystoplasty, cysto-urethraplasty, vesicolysis.	C	B
02039	Operation for ruptured bladder.	B	B
02041	Enterocystoplasty.	C	C
02043	Cysto-lithotomy.	B	B
02045	Excision of patent-urachus or urachal cyst.	B	B
02047	Drainage of perivesical or prevesical abscess	A	B

	<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Evacuation of clots from bladder :</b>		
<b>Evacuation of clots from bladder :</b>		
02049 Other than post-operative.	A	A
02050 Post-operative.	B	
02051 Simple bladder lavage: Including catheterisation.	A	A
<b>Bladder neck plasty :</b>		
02053 Male.	B	B
02057 Female.	B	B
<b>Open biopsy of urethra:</b>		
02059 Male.	A	A
02061 Female.	A	A
<b>Dilatation of urethral stricture: by passage sound:</b>		
02063 Initial (male).	A	A
02065 Subsequent (male).	A	A
02067 By passage of filiform and follower (male).	A	A
02069 Dilatation of female urethra	A	A
02071 Urethrorraphy: Suture of urethral wound or injury	C	B
02073 External urethrotomy: Pendulous urethra (anterior).	B	B
<b>Urethraplasty: pendulous urethra</b>		
02075 First stage.	B	B
02077 Second stage.	B	C
02079 Reconstruction of female urethra.	B	C
02081 Reconstruction or repair of male anterior urethra (one stage).	B	C
<b>Reconstruction or repair of prostatic or membranous urethra</b>		
02083 First stage.	B	C
02085 Second stage .	B	C
02086 If done in one stage.	B	D
02087 Urethral diverticulectomy: Male or female	B	C
02089 Marsupialisation of urethral diverticula: Male or female	B	A
<b>Total urethrectomy</b>		
02091 Female.	B	C
02093 Male .	B	C
02095 Drainage of simple localised perineal urinary extravasation .	A	A
02097 Drainage of extensive perineal urinary extravasation.	B	B
02099 Fulguration for urethral caruncle or polyp.	A	A
02101 Excision of urethral caruncle.	A	A
02103 Simple urethral meatotomy.	A	A
<b>Incision of deep peri-urethral abscess</b>		
02105 Female.	A	A
02107 Male .	A	A
02109 Badenoch pull-through for intractable stricture or incontinence .	B	C
02111 External sphincterotomy.	B	B
02113 Drainage of Skene's gland abscess or cyst.	A	A
02115 Operation for correction of male urinary incontinence with or without introduction of prostheses (excluding cost of prostheses)	C	C
02116 Urethral meatoplasty.	B	A
02117 Closure of urethrostomy or urethro-cutaneous fistula (Independent procedure).	A	A
02121 Closure of urethrovaginal fistula: Including diversionary procedures.	C	C
<b>Penis</b>		
02123 Biopsy of penis (independent procedure).	A	A

**Destruction of condylomata : chemo- or cryotherapy:**

**Destruction of condylomata : chemo- or cryotherapy:**

02125 Limited number (see item 2317).

02127 Multiple extensive.

**Electrodesiccation:**

02129 Limited number.

02131 Multiple extensive.

**Circumcision:**

02132 Ligation of abnormal venous drainage.

02133 Clamp procedure.

02137 Surgical excision other than by clamp or dorsal slit, any age.

02139 Dorsal slit of prepuce (independent procedure).

**Plastic operation on penis**

02141 Plastic operation for insertion of prostheses.

02143 For straightening of chordee e.g. hypospadias with or without mobilisation of urethra.

02145 For straightening of chordee with transplantation of prepuce

02147 For injury: Including fracture of penis and skin graft if required.

02149 For epispadias distal to the external sphincter

02153 Plastic operation for epispadias with incontinence.

02154 Induction of artificial erection

**Hypospadias**

02155 Urethral reconstruction.

02157 Subsequent procedures for repair of urethra: Total

02159 Urethraplasty: Complete, one stage for hypospadias

**Total amputation of penis**

02161 Without gland dissection.

02163 With gland dissection.

**Partial amputation of penis**

02165 With gland-dissection.

02167 Without gland-dissection.

02169 Injection procedure for Peyronies disease

**Priapism operation**

02171 Irrigation of corpora cavernosa for priapism.

02173 Shunt procedure: Any type

02174 Stab shunt.

**Testis and epididymis**

02175 Testis biopsy, needle (independent procedure).

**Testis biopsy, incisional: independent procedure**

02177 Unilateral.

02179 Bilateral.

02181 Biopsy of epididymis, needle.

02183 Puncture aspiration hydrocoele with or without injection of medication

02185 Operation for maldescended testicle: Including hemiotomy

02187 Operation for torsion appendix testis.

02189 Operation for torsion testis with fixation of contralateral testis

**Orchiectomy (total or subcapsular):**

02191 Unilateral.

02193 Bilateral.

02195 Radical operation for malignant testis: Excluding gland dissection.

**Ana Grp Proc Grp**

A A

A A

A A

A A

A A

A A

A A

A A

C B

C B

C B

C C

C C

C C

A A

C C

B B

C D

B C

C D

C C

B B

A A

A A

C C

B A

A A

A A

A A

A A

B B

B A

B B

B A

B B

B B

		<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Orchidectomy (total or subcapsular):</b>			
02197	Operation for hydrocoele or spermatocele.	B	A
02199	Varicocelectomy.	B	A
02201	Abdominal ligation of spermatic vein for varicocele	B	A
<b>Epididymectomy:</b>			
02203	Unilateral.	B	B
02205	Bilateral.	B	B
02207	Vasectomy: Unilateral or bilateral (no extra fee to be charged if done in combination with prostatectomy)	A	A
02209	Vasotomy: Unilateral or bilateral.	A	A
<b>Vasogram, seminal vesiculogram:</b>			
02210	Unilateral	B	A
02211	Bilateral.	B	A
02212	Insertion of testicular prosthesis: Independent procedure (exclusive of cost of material).	B	A
02213	Suture or repair of testicular injury.	B	A
02215	Incision and drainage of testis or epididymis e.g. abscess or haematoma.	B	B
02217	Excision of local lesion of testis or epididymis.	B	A
<b>Vaso-vasostomy:</b>			
02219	Unilateral.	A	B
02221	Bilateral.	A	B
<b>Epididymo-vasostomy:</b>			
02223	Unilateral.	A	B
02225	Bilateral.	A	B
02227	Incision and drainage of scrotal wall abscess.	A	A
02229	Excision of Mullerian duct cyst.	B	C
02231	Excision of lesion of spermatic cord.	A	B
02233	Seminal Vesiculectomy.	B	C
<b>Prostate</b>			
02235	Biopsy prostate: Needle or punch, single or multiple, any approach.	A	A
02237	Biopsy, prostate, incisional, any approach.	B	B
02239	Transurethral drainage of prostatic abscess.	B	A
02241	Perineal drainage of prostatic abscess.	B	B
02243	Trans-urethral cryo-surgical removal of prostate.	B	B
02245	Trans-urethral resection of prostate.	C	C
02247	Trans-urethral resection of residual prostatic tissue 90 days post-operative or longer.	B	A
02249	Trans-urethral resection of post-operative bladder neck contracture.	B	B
<b>Prostatectomy: perineal:</b>			
02251	Sub-total.	C	C
02253	Radical.	C	D
02254	Pelvic lymphadenectomy.	C	C
02255	Supra-pelvic, transvesical.	C	C
<b>Retropubic:</b>			
02257	Sub-total.	C	C
02259	Radical.	C	D
02260	Prostate brachytherapy	B	C
<b>Vulva and introitus</b>			
02271	Removal of tag or polyp.	A	A
02272	Removal of small superficial benign lesions.	A	A
02273	Biopsy with suture in theatre (excluding after-care).	A	A
02274	Laser therapy of vulva and/or vagina (colposcopically directed)	A	B
02275	Reduction labial hypertrophy.	B	B



	Ana Grp	Proc Grp
<b>Vulva and Introitus</b>		
02277 Removal of extensive benign vulva tumour.	B	B
<b>Secondary perineal repair</b>		
02279 Repair second degree tear	B	A
02280 Repair third degree tear.	B	B
02281 Excision of inclusion cyst	B	A
02283 Hymenectomy.	B	A
02285 Drainage haematocolpos.	A	A
02287 Clitoris repair for injury: Including skin graft if required	B	B
02288 Clitoral reduction	B	C
02289 Denervation or alcohol infiltration vulva (Woodruff)	A	A
02291 Vulva: Undercutting skin (ball).	B	A
02293 Vulva and introitus: Drainage of abscess.	A	A
<b>Bartholin gland</b>		
02295 Bartholin abscess marsupialisation.	A	A
02297 Bartholin gland excision.	A	A
02299 Bartholin radical excision for malignant lesion.	B	D
<b>Operation for enlarging introitus</b>		
02301 Fenton plasty .	B	A
02303 Bilateral Z-plasty.	B	B
<b>Vulvectomy</b>		
02305 Partial vulvectomy	B	C
02307 Vulvectomy.	B	C
02309 Radical vulvectomy with bilateral lymphadenectomy	C	D
02311 Radical vulvectomy with bilateral lymphadenectomy, plus deep lymph gland dissection.	C	D
<b>Vaginal procedures and operations</b>		
02313 Examination under anaesthetic when no other procedures are performed.	A	A
<b>Destruction of condylomata by chemo-, cryo- or electrotherapy, or harmonic scalpel:</b>		
02316 First lesion.	A	A
02317 Limited repeat.	A	A
02318 Widespread.	A	A
02319 Excision of cysts or tumours.	A	A
02321 Drainage of vaginal abscess	A	A
02323 Reconstruction of vagina after atresia.	C	B
<b>Construction of artificial vagina:</b>		
02325 Construction of artificial vagina: Labial fusion.	C	C
02327 Construction of artificial vagina: Macindoe type	C	C
02329 Construction of vagina: Bowel pull-through operation: Two surgeons: Each.	C	C
02331 Vaginal septum removal	B	B
<b>Colpotomy</b>		
02339 Colpotomy: Diagnostic (excluding after-care).	A	A
02341 Colpotomy: Therapeutic, with or without sterilisation	B	B
<b>Vaginal hysterectomy</b>		
02343 Vaginal hysterectomy. Without repair.	C	C
02345 Vaginal hysterectomy. With repair.	C	D
02357 Vaginal hysterectomy and repair with unilateral or bilateral salpingo-oophorectomy.	C	D
02361 Vaginal hysterectomy and repair for total prolapse	C	D
02363 Fothergill or Manchester repair operation	C	C
02365 Repair of recurrent enterocele or vault prolapse (except at the time of hysterectomy).	C	C
02366 Posterior repair alone.	B	B

**Vaginal hysterectomy****Ana Grp    Proc Grp**

- 02367 Other operations for prolapse: Anterior repair - with or without posterior repair.  
 02368 Uterovesical fistula.  
 02369 Repair of Vesico- or urethro-vaginal fistula.  
 02370 Repair of V.V.F. - Obstetric or radiation.  
 02371 Closure of uretero-vaginal fistula.  
 02372 Closure of uretero-vaginal fistula: Obstetric or radiation  
 02373 Closure of recto-vaginal fistula  
 02374 Closure of recto-vaginal fistula: Obstetric or radiation  
 02375 Colpocleisis.  
 02377 Le Fort operation.  
 02379 Schauta operation.  
 02381 Vaginectomy.  
 02383 Synchronous combined hysterocolpectomy: (one or two surgeons - total fee).  
 02385 Vaginal laceration or trauma: Repair.

B    C  
 C    C  
 C    C  
 C    C  
 C    C  
 C    B  
 C    C  
 B    B  
 B    B  
 C    D  
 C    D  
 C    D  
 B    A

**Cervix**

- 02391 Cervix: Canal reconstruction.  
 02395 Cryo- or electro-cauterisation, or Lletz of cervix (excluding cost of disposable loop electrode): Under anaesthetic  
 02396 Laser or harmonic scalpel treatment of the cervix  
 02397 Dilation of cervix for stenosis and insertion prosthesis and Budge suture.

B    C  
 B    A  
 A    B  
 B    A

**Biopsy**

- 02399 Punch biopsy (excluding after-care).  
 02400 Biopsy during pregnancy (excluding after-care).  
 02403 Wedge biopsy: Cervix (excluding after-care).  
 02404 Biopsy: Wedge during pregnancy: Cervix (excluding after-care).  
 02405 Cone biopsy: Cervix (excluding after-care).  
 02407 Amputation: Cervix.  
 02409 Cervix encircilage: McDonald stitch.  
 02411 Cervix encircilage: Shirodkar suture.  
 02413 Cervix encircilage: Lash.  
 02416 Cervix: Removal items 2409 and 2411 with anaesthetic in theatre.

A    A  
 A    A  
 A    A  
 A    A  
 A    A  
 B    B  
 B    A  
 B    A  
 B    A  
 A    A

**Repair of tears**

- 02417 Emmet repair of tears.  
 02418 Sturmdorff repair of tears.

B    A  
 B    A

**Extirpation of cervical stump**

- 02421 Extirpation of cervical stump: Vaginal.  
 02423 Extirpation of cervical stump: Abdominal.  
 02425 Removal of cervical polyps (excluding after-care).  
 02427 Removal of cervical myomata.

C    B  
 C    B  
 A    A  
 B    A

**Colposcopy**

- 02429 Colposcopy (excluding after-care).

A    A

**Uterus**

- 02433 Embryo transfer.  
 02434 Endometrial biopsy (excluding after-care).

B    A  
 A    A

**Hysteroscopy**

- 02435 Hysterosalpingogram (excluding after-care).  
 02436 Hysteroscopy (excluding after-care).  
 02437 Hysteroscopy and D&C (excluding after-care).  
 02438 Hysteroscopy and removal of uterine septum (excluding after-care).  
 02439 Hysteroscopy and division of endometrial and endocervical bands (excluding after-care).

A    A  
 B    A  
 B    A  
 B    B  
 B    A

**Hysteroscopy**

- 02440 Hysteroscopy and polypectomy (excluding after-care)
- 02441 Hysteroscopy and myomectomy (excluding after-care)
- 02442 Insertion of I.U.C.D. (excluding after-care).

**Ana Grp Proc Grp**

B B  
B B  
A A

**Evacuation of uterus**

- 02443 D&C: (excluding after-care).
- 02444 Fractional D&C (excluding after-care).
- 02445 Evacuation of uterus: Incomplete abortion: Before 12 weeks gestation
- 02447 Evacuation of uterus, incomplete abortion: After 12 weeks gestation.
- 02448 Termination of pregnancy before 12 weeks.
- 02449 Evacuation: Missed abortion: Before 12 weeks gestation
- 02451 Evacuation: Missed abortion: After 12 weeks gestation
- 02452 Termination of pregnancy after 12 weeks - administration of intra/extra amniotic prostaglandin.
- 02453 Evacuation hydatidiform mole.
- 02455 Evacuation uterus post-partum.
- 02461 Ventrosuspension.
- 02463 Uteroplasty: Strassman.
- 02465 Uteroplasty: Tompkins.
- 02467 Myomectomy.
- 02469 Subtotal hysterectomy with or without unilateral or bilateral salpingo-oophorectomy.
- 02471 Total abdominal hysterectomy: With or without unilateral/ bilateral salpingo-oophorectomy - uncomplicated
- 02473 Total abdominal hysterectomy plus vaginal cuff with or without unilateral or bilateral salpingo-oophorectomy
- 02475 Radical abdominal hysterectomy with bilateral lymphadenectomy (Wertheim).
- 02477 Abdominal hysterectomy with or without sterilisation
- 02478 Non-surgical endometrial destruction, any method, not utilising hysteroscopic instrumentation or assistance.
- 02479 Surgical endometrial destruction: Any method, utilising hysteroscopic instrumentation or assistance.

A A  
A A  
B A  
B B  
B A  
B A  
B B  
B A  
B B  
B B  
C B  
C B  
C B  
B B  
B C  
B C  
C D  
B C  
B C  
B C

**Fallopian tubes**

- 02481 Insufflation Fallopian tubes (excluding after-care).
- 02483 Salpingolysis.
- 02485 Salpingostomy.
- 02487 Tuboplasty tubal anastomosis or re-implantation.
- 02489 Ectopic pregnancy under 12 weeks (salpingectomy)
- 02490 Ectopic pregnancy under 12 weeks (salpingostomy)
- 02491 Ectopic pregnancy - after 12 weeks.
- 02492 Salpingectomy: Uni- or bilateral or sterilisation for accepted medical reasons

A A  
B B  
C C  
C C  
C B  
C C  
C C  
B B

**Laparoscopy**

- 02493 Laparoscopy (excluding after-care).
- 02496 Plus aspiration of a cyst (excluding after-care).
- 02497 Plus sterilisation.
- 02499 Plus biopsy (excluding after-care).
- 02500 Plus ablation of endometriosis by laser, harmonic scalpel or cautery
- 02501 Plus cauterisation and/or lysis of adhesions.
- 02502 Plus aspiration of follicles (IVF) (excluding after-care)
- 02503 Plus ovarian drilling: add
- 02504 Plus Gamete intra fallopian tube transfer(includes follicle aspiration) (GIFT).
- 02505 Plus laparoscopic uterosacral nerve ablation: add

B B  
B B  
B B  
B B  
B B  
B B  
B B  
B B  
B C  
B B

**Ovaries**

- 02525 Wedge resection of ovaries, unilateral or bilateral.
- 02527 Removal of ovarian tumour or cyst.
- 02529 Oophorectomy: Uni- or bilateral
- 02531 Ovarian carcinoma debulking and omentectomy.

B B  
B B  
B B  
C D

		<u>Ana Grp</u>	<u>Proc Grp</u>
<b>Ovaries</b>			
02532	Ovarian carcinoma - Abdominal hysterectomy, bilateral salpingo-oophorectomy, debulking and omentectomy.	C	D
<b>Exenteration</b>			
02535	Exenteration: Anterior.	C	D
02537	Posterior exenteration.	C	D
02539	Exenteration total.	C	D
02541	Presacral neurectomy.	C	B
02543	Moschowitz operation.	C	B
<b>Operations for stress incontinence</b>			
02545	Marshall-Marchetti-Krantz: Operation.	B	C
02546	Urethro-vesicopexy (Abdominal approach).	B	C
02547	Burch colposuspension.	B	C
02549	Sacro-colposuspension with or without mesh	C	C
02550	Urethro-vesicopexy (combined abdominal and vaginal approach).	B	C
02551	Laparotomy.	B	C
02552	Removal benign retroperitoneal tumour.	C	C
02553	Radical removal of malignant retro-peritoneal tumour	C	D
02554	Drainage of pelvic abscess per abdomen	B	C
02556	Drainage of pelvic abscess per vagina (refer item 2341)	B	B
02558	Drainage intra-abdominal abscess - delayed closure.	B	D
02560	Surgery for moderate endometriosis (AFS stages 2 + 3) any method.	C	C
02561	Surgery for severe endometriosis (AFS stage 4 - rectovaginal septum), any method (may not be used with another procedure or as a modifier)	A	C
02570	Ligation of internal iliac vessels (when not part of another procedure)	C	C
<b>Confinements</b>			
02614	Global obstetric care: All inclusive fee that includes all modes of vaginal delivery (excluding Caesarean Section) and obstetric care from the commencement of labour until after the post-partum visit (6 weeks visit)	B	
02615	Global obstetric care: All inclusive fee for Caesarean section and obstetric care from the commencement of labour until after the post-partum visit (6 weeks visit)	A	
<b>Operative procedures (excluding antenatal care)</b>			
02653	Caesarean - hysterectomy.	C	D
02657	Post-partum hysterectomy.	C	D
02669	Abdominal operation for ruptured gravid uterus: Repair.	C	C
<b>Angiography carotis</b>			
02725	Unilateral.	B	A
02726	Bilateral.	B	A
02727	Vertebral artery: Direct needling.	B	A
02729	Vertebral catheterisation.	B	A
<b>Air encephalography and posterior fossa tomography</b>			
02731	Injection of air (independent procedure).	B	A
<b>Ventricular needling without burring</b>			
02739	Tapping only.	B	A
02741	Plus introduction of air and/or contrast dye for ventriculography.	B	A
<b>Subdural tapping:</b>			
02743	First sitting.	A	A
02745	Subsequent.	A	A
<b>Introduction of burr holes for:</b>			
02747	Ventriculography.	B	C
02749	Catheterisation for ventriculography and/or drainage	B	C
02751	Biopsy of brain tumor.	B	C
02753	Subdural haematoma or hygroma.	B	C

**Introduction of burr holes for:**

- 02755 Subdural empyema.  
02757 Brain abscess.

Ana Grp	Proc Grp
B	C
B	C

**Nerve biopsy:**

- 02759 Peripheral.  
02763 Cranial nerves: Extra-cranial  
02765 Nerve conduction studies (see item 0733 and 3285)

A	A
A	A
B	A

**Nerve repair or suture :**

- 02767 Suture brachial plexus (see also items 2837 and 2839)

C	D
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**Suture: large nerve:**

- 02769 Primary.  
02771 Secondary.

B	B
B	C

**Digital nerve:**

- 02773 Primary.  
02775 Secondary .

B	B
B	B

**Nerve graft:**

- 02777 Simple.

C	C
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**Fascicular :**

- 02779 First fasciculus.  
02781 Each additional fasciculus.  
02783 Nerve flap: To include all stages.  
02785 Facio-accessory or facio-hypoglossal anastomosis  
02787 Grafting of facial nerve.

C	C
C	C
B	C
C	B
C	C

**Trigeminal ganglion :**

- 02789 Injection of alcohol.  
02791 Injection of cortisone.  
02793 Coagulation through high frequency.

A	C
A	B
A	C

**Procedures for pain relief :**

- 02799 Intrathecal injections for pain.  
02800 Plexus nerve block.  
02802 Peripheral nerve block.

A	A
B	A
A	A

**Alcohol injection in peripheral nerves for pain:**

- 02803 Unilateral.  
02805 Bilateral.  
02809 Peripheral nerve section for pain.  
02811 Pudendal neurectomy: Bilateral.  
02813 Obturator or Stoffels.  
02815 Interdigital.  
02825 Excision: Neuroma: Peripheral.

A	A
A	A
A	A
A	B
B	B
B	A
C	B

**Other nerve procedures :**

- 02827 Transposition of ulnar nerve.

C	B
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**Neurolysis:**

- 02829 Minor.  
02831 Major.  
02833 Digital.  
02835 Scalenotomy.  
02837 Brachial plexus, suture or neurolysis (item 2767)  
02839 Total brachial plexus exposure with graft neurolysis and transplantation  
02841 Carpal Tunnel.

B	A
B	B
B	B
B	B
C	D
C	D
B	B

	Ana Grp	Proc Grp
<b>Lumbar sympathectomy:</b>		
<b>Lumbar sympathectomy:</b>		
02843 Unilateral.	B	C
02845 Bilateral.	B	D
<b>Cervical sympathectomy :</b>		
02846 Trans-thoracic approach (use item 2847 or item 2848 as appropriate)	C	
02847 Unilateral.	B	C
02848 Bilateral .	B	D
<b>Sympathetic block: other levels:</b>		
02849 Unilateral.	A	A
02851 Bilateral	A	A
02853 Diagnostic/Therapeutic nerve block (unassociated with surgery) - either intercostal, or brachial, or peripheral, or stellate	A	A
<b>Removal of skull tumour: with or without plastic repair:</b>		
02855 Small.	C	C
02857 Major.	C	C
<b>Repair of depressed fracture of skull: without brain laceration:</b>		
02859 Major.	C	C
02860 Small .	C	C
<b>With brain lacerations:</b>		
02861 Small.	C	C
02862 Major.	C	D
02863 Cranioplasty.	C	D
02864 Encephalocele (excluding frontal).	C	C
<b>Craniosostenosis:</b>		
02865 Few sutures.	C	C
02867 Multiple sutures	C	D
<b>Shunt procedures :</b>		
02869 Ventriculo-cisternostomy.	C	D
02871 Ventriculo-caval shunt.	C	D
02873 Ventriculo-peritoneal shunt.	C	D
02875 Theco-peritoneal C.S.F. shunt.	C	D
<b>Aneurysm repair :</b>		
02876 Repair of aneurysms or arteriovenous anomalies (Intracranial).	C	D
02877 Extracranial to intracranial vessel.	C	D
02878 Posterior fossa arteriovenous anomalies.	C	D
<b>Neurectomy :</b>		
02879 Glossopharyngeal nerve.	C	D
<b>Eighth nerve:</b>		
02881 Intracranial.	C	D
02883 Extracranial.	C	D
02884 Subtemporal section of the trigeminal nerve.	C	D
02885 Trigeminal tractotomy.	C	D
02886 Posterior fossa decompression with or without laminectomy with or without dural insertion for Arnold Chiari malformation or obstructive cysts e.g. Dandy Walker or parasites	C	D
02887 Vestibular nerve.	C	D
<b>Posterior fossa tumour removal :</b>		
02889 Acoustic neuroma, benign cerebello-pontine tumours, meningioma, clivus meningioma, chordoma, clivus chordoma, cholesteatoma	C	D
02891 Glioma, secondary deposits.	C	D
02893 Abscess.	C	D

**Excision of tumour of glomus jugulare:**

**Excision of tumour of glomus jugulare:**

	Ana Grp	Proc Grp
02895 Intracranial.	C	D
02897 Extracranial.	C	D
02898 Hemispherectomy .	C	D

**Supratentorial procedures :**

02899 Craniectomy for extra-dural haematoma or empyema	C	D
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**Craniotomy for :**

02900 Extra-dural orbital decompression or excision of orbital tumour.	C	D
02901 Osteoplastic Flap for removal of: Meningioma, basal extracerebral mass, intra ventricular tumours, Pineal tumours, pituitary adenoma, total excision cranio-pharyngioma/ pharyngioma	C	D
02903 Abscess, Glioma.	C	D
02904 Haematoma, foreign body: Cerebral or cerebellar.	C	D
02905 Focal epilepsy: Excision of cortical scar.	C	D
02906 With anterior fossa meningocoele and repair of bony skull defect.	C	D
02907 Temporal lobectomy.	C	D
02908 Torkildsen anastomosis.	C	D
02909 CSF-leaks.	C	D
02910 Removal of arteriovenous malformation.	C	D

**Stereo-tactic cerebral and spinal cord procedures:**

02911 First sitting.	B	D
02913 Repeat.	B	C
02915 Transnasal hypophysectomy	C	D
02916 Transfrontal hypophysectomy.	C	D
02917 Transnasal hypophyseal implants	C	C

**Spinal operations :**

02919 Laminectomy for spinal stenosis: At multiple levels	C	D
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**Laminectomy :**

02921 One level	C	C
02922 Multiple levels	C	C

**Chordotomy:**

02923 Unilateral	C	C
02925 Open	C	D

**Rhizotomy:**

02927 Extradural, but intraspinal	C	D
02928 Intradural:	C	D

**Removal of spinal cord tumour: Intramedullar :**

02929 Posterior approach	C	D
02930 Anterio-lateral approach	C	D

**Extramedullary, but intradural:**

02931 Posterior approach	C	D
02932 Anterio-lateral approach	C	D
02933 Intraspinal, but extradural: Posterior approach.	C	D
02935 Transcutaneous chordotomy .	C	C
02937 Repair of meningocele, involving nerve tissue	C	C
02938 Simple .	C	C
02939 Excision of arterial vascular malformations and cysts of the spinal cord	C	D
02940 Lumbar osteophyte removal	C	C
02941 Cervical or thoracic osteophyte removal	C	D

	Ana Grp	Proc Grp
<b>Carotis :</b>		
<b>Carotis :</b>		
02951 Trauma	C	B
02953 For aneurysm (A.V. anomaly)	C	C
02955 Removal of carotid body tumour (without vascular reconstruction).	C	C
<b>Physical treatment methods :</b>		
02970 Electro-convulsive treatment (ECT): Each time (See rule Va.).	B	A
<b>Thyroid :</b>		
02983 Partial lobectomy.	C	C
02985 Total lobectomy.	C	C
02987 Subtotal thyroidectomy.	C	C
02989 Total thyroidectomy.	C	C
02991 Thyroglossal cyst or fistula excision.	B	B
<b>Parathyroid :</b>		
02993 Exploration of parathyroid glands for hyperparathyroidism including removal.	C	D
<b>Adrenals :</b>		
02995 Adrenalectomy: Unilateral.	C	C
02997 Bilateral exploration of adrenal glands: Including removal	C	D
<b>Hypophysis :</b>		
02999 Transethmoidal hypophysectomy.	C	D
03000 Transnasal hypophysectomy (see item 2915).	C	D
<b>Special eye Investigations :</b>		
03022 Digital fluorescein video angiography	B	B
03023 Digital indocyanine video angiography	B	B
<b>Retina:</b>		
03037 Surgical treatment of retinal detachment including vitreous replacement but excluding vitrectomy.	C	D
03039 Prophylaxis and treatment of retina and choroid by cryotherapy and/or diathermy and/or photocoagulation and/or laser per eye	B	B
03041 Pan retinal photocoagulation (per eye): done in one sitting.	B	C
03044 Removal of encircling band and/or buckling material	B	B
<b>Cataract:</b>		
03045 Intra-capsular.	B	C
03047 Extra-capsular (including capsulotomy).	B	C
03049 Insertion of lenticulus in addition to item 3045 or item 3047 (cost of lens excluded) (modifier 0005 not applicable)	B	A
03051 Needling or capsulotomy.	B	B
03052 Laser capsulotomy.	A	B
03057 Removal of lenticulus.	B	C
03059 Insertion of lenticulus when item 3045 or item 3047 was not executed (cost of lens excluded).	B	C
<b>Glaucoma:</b>		
03061 Drainage operation.	B	C
03062 Implantation of aqueous shunt device/seton in glaucoma (procedural)	A	B
03063 Cyclocryotherapy or cyclodiathermy.	B	B
03064 Laser trabeculoplasty.	B	B
03065 Removal of blood from anterior chamber.	B	B
03067 Goniotomy.	B	C
<b>Intra-ocular foreign body:</b>		
03071 Anterior to Iris.	B	B
03073 Posterior to Iris (including prophylactic thermal treatment to retina)	B	C
<b>Strabismus:</b>		
03075 Operation on one or two muscles.	B	C



**Strabismus:**

- 03076 Operation on three or four muscles.  
03077 Subsequent operation one or two muscles.  
03078 Subsequent operation on three or four muscles

Ana Grp	Proc Grp
B	C
B	B
B	C

**Globe:**

- 03079 Transcleral biopsy.  
03080 Examination of eyes under general anaesthetic where no surgery is done  
03081 Treatment of minor perforating injury  
03083 Treatment of major perforating injury  
03085 Enucleation or Evisceration  
03087 Enucleation or Evisceration with mobile implant: Excluding cost of implant and prosthesis  
03088 Hydroxyapatite insertion (additional to item 3087) :  
03089 Subconjunctival injection if not done at time of operation  
03091 Retrobulbar injection (if not done at time of operation)  
03093 Treatment of tumors of retina or choroid by radioactive plaque and/or diathermy and/or cryotherapy and/or laser therapy and/or photocoagulation  
03095 Biopsy of vitreous body or anterior chamber contents  
03096 Adding of air or gas in vitreous as a post-operative procedure or pneumoretinopexy  
03097 Anterior vitrectomy  
03098 Removal of silicon from globe  
03099 Posterior vitrectomy including anterior vitrectomy, encircling of globe and vitreous replacement  
03100 Lensectomy done at time of posterior vitrectomy

B	B
A	B
B	B
B	C
B	B
B	C
A	A
A	A
A	A
B	C
B	B
B	B
B	D
B	D
C	D
B	A

**Orbit:**

- 03101 Drainage of orbital abscess  
03103 Removal of tumour  
03105 Exenteration  
03107 Orbitotomy requiring bone flap  
03108 Eye socket reconstruction  
03109 Hydroxyapatite implantation in eye cavity when evisceration or enucleation was done previously  
03110 Second stage hydroxyapatite implantation

B	B
C	C
C	D
C	C
B	C
C	D
B	B

**Cornea:**

- 03117 Removal of foreign body: On the basis of fee per consultation  
03119 Tattooing.  
03120 Excimer laser (per eye) for refractive keratectomy or Holmium laser thermo keratoplasty (LTK). Machine hire fee for LTK used item 3201: ADD  
03121 Graft (Lamellar of fullthickness)  
03123 Insertion of intra-corneal or intrascleral prosthesis for refractive surgery.  
03125 Keratectomy or conjunctival flap.  
03127 Cauterization of cornea (by chemical, thermal or cryotherapy methods).  
03128 Radial keratotomies or keratoplasty for astigmatism (cosmetic unless medical reasons can be proved).  
03130 Pterygium or conjunctival cyst or conjunctival tumor  
03131 Paracentesis  
03132 Lamellar keratectomy (per eye) for refractive surgery (LK, ALK, MLK)

A	
B	A
B	
C	D
B	C
B	B
A	A
B	C
B	A
B	A
B	C

**Ducts:**

- 03133 Probing and/or syringing, per duct  
03135 Insertion of polythene tubes (additional): Unilateral  
03137 Excision of lacrimal sac: Unilateral  
03139 Dacryocystorhinostomy (Single) with or without polythene tube  
03141 Sealing of punctum.  
03143 Three-snip operation.

A	A
B	A
B	B
B	C
A	A
A	A

		Ana Grp	Proc Grp
<b>Repair of canaliculus:</b>			
<b>Repair of canaliculus:</b>			
03145	Primary procedure.	B	B
03147	Secondary procedure.	B	C
<b>Iris:</b>			
03149	Iridectomy or iridotomy by open operation as isolated procedure.	B	B
03151	Excision of iris tumour.	B	C
03153	Iridectomy or iridotomy by laser or photo-coagulation as isolated procedure (maximum one procedure)	B	B
03155	Iridocyclectomy for tumour.	C	D
03157	Division of anterior synechiae as isolated procedure	B	B
<b>Lids:</b>			
03161	Tarsorrhaphy.	B	A
03163	Excision of superficial lid tumour.	B	A
03165	Repair of skin lacerations of the lid.	B	A
03167	Diathermy to wart on lid margin.	A	A
03171	Excision of Meibomian cyst. Additional fee for sterile tray (see item 0202).	A	A
03173	Epicanthal folds.	B	B
03176	Lid operation for facial nerve paralysis including tarsorrhaphy but excluding cost of material.	B	C
<b>Entropion or ectropion by:</b>			
03177	Cautery.	A	A
03179	Suture.	B	A
03181	Open operation.	B	B
03183	Free skin, mucosal grafting or flap	B	C
<b>Staged procedures for partial or total loss of eyelid</b>			
03185	First stage.	C	C
03187	Subsequent stage.	C	C
03189	Full thickness eyelid laceration for tumour or injury: Direct repair	B	B
03191	Blepharoplasty: upper lids for improvement in function	B	B
<b>Ptosis:</b>			
03193	Repair by superior rectus, levator or frontalis muscle operation	B	C
<b>Ptosis: by lesser procedure e.g. sling operation:</b>			
03195	Unilateral.	B	B
03197	Bilateral.	B	C
<b>Conjunctiva:</b>			
03199	Repair of conjunctiva by grafting.	B	B
03200	Repair of lacerated conjunctiva.	B	A
<b>Major congenital deformity reconstruction of external ear:</b>			
03267	Unilateral	C	B
03269	Bilateral	C	C
03270	Excision of superficial pre-auricular fistula	B	A
03272	Excision of complicated pre-auricular fistula.	B	B
<b>External ear canal:</b>			
03205	Removal of foreign body under general anaesthetic	A	A
<b>Meatus atresia:</b>			
03215	Repair of stenosis of cartilaginous portion	B	C
03217	Congenital	C	D
03219	Removal of osteoma from meatus: Solitary.	B	B
03221	Removal of osteoma from meatus: Multiple.	B	C

		Ana Grp	Proc Grp
<b>Middle ear:</b>			
<b>Middle ear:</b>			
03207	Unilateral myringotomy.	B	A
03209	Bilateral myringotomy.	B	A
03211	Unilateral myringotomy with insertion of ventilation tube	B	A
03212	Bilateral myringotomy with insertion of unilateral ventilation tube.	B	A
03213	Bilateral myringotomy with insertion of bilateral ventilation tubes.	B	B
03237	Exploratory tympanotomy	B	A
03243	Myringoplasty	B	B
03245	Functional reconstruction of tympanic membrane	C	D
03249	Stapedotomy and stapedectomy.	B	D
03257	Cortical mastoidectomy.	C	B
03259	Radical mastoidectomy (excluding minor procedures)	C	C
03261	Muscle grafting to mastoid cavity without tympanoplasty	C	C
03263	Autogenous bone graft to mastoid cavity	C	C
03264	Tympanomastoidectomy.	C	D
03265	Reconstruction of posterior canal wall, following radical mastoid	C	D
03266	Gentamycin instillation into the middle ear for Ménière's disease (myringotomy and cost of material excluded)	B	A
<b>Facial nerve tests:</b>			
03223	Percutaneous stimulation of the facial nerve.	B	A
03224	Electroneurography (ENOG).	B	B
<b>Exploration of facial nerve:</b>			
03227	Exploration of tympanomastoid segment	C	D
03228	Grafting of the tympanomastoid segment (including item 3227)	C	D
03230	Extratemporal grafting of the facial nerve.	C	D
03232	Facio-accessory or facio-hypoglossal anastomosis	C	B
<b>Balance tests:</b>			
03258	Otolith repositioning manoeuvre	A	A
<b>Inner ear surgery:</b>			
03233	Labyrinthectomy via the middle ear or mastoid.	C	D
03240	Endolymphatic sac surgery	C	D
03244	Fenestration and occlusion of the posterior semicircular canal (F.O.S.) for benign paroxysmal positioning vertigo (BPPV)	C	D
03246	Cochlear implant surgery	C	D
<b>Middle fossa approach (i.e. transtemporal or supralabyrinthine):</b>			
03229	Facial nerve: Exploration of the labyrinthine segment	C	D
05221	Facial nerve: Grafting of labyrinthine segment (graft removal and exploration of labyrinthine segment included)	C	D
05222	Facial nerve surgery inside the internal auditory canal (if grafting required and harvesting of graft included)	C	D
05223	Vestibular neurectomy, removal of supralabyrinthine tumours, or similar procedures	C	D
05224	Removal of acoustic neuroma via the middle fossa approach	C	D
<b>Translabyrinthine approach:</b>			
03239	Acoustic neuroma removal translabyrinthine	C	D
05227	Cochleo-vestibular neurectomy	C	D
05229	Facial nerve surgery in the internal auditory canal, translabyrinthine (if grafting and graft removal included)	C	D
<b>Transotic approach to the cerebellopontine angle:</b>			
05232	Removal of acoustic neuroma or cyst of the internal auditory canal	C	D
<b>Intratemporal fossa approach type a:</b>			
05235	Removal of tumour for the jugular foramen, internal carotid artery, petrous apex and large intratemporal tumours	C	D
<b>Intratemporal fossa approach type b:</b>			
05238	Removal of tumour of the petrous apex	C	D
05239	Removal of tumour of the clivus	C	D

		Ana Grp	Proc Grp
<b>Infratemporal approach type c:</b>			
<b>Infratemporal approach type c:</b>			
05242	Removal of nasopharyngeal angiofibroma or carcinoma	C	D
05243	Removal of tumour from the infratemporal fossa, pterygopalatine fossa, parasellar region or nasopharynx	C	D
<b>Subtotal petrosectomy:</b>			
05246	Subtotal petrosectomy for removal of temporal bone tumour	C	D
05247	Subtotal petrosectomy for CSF leak and/or for total obliteration of the mastoid cavity	C	D
<b>Petrosectomy and radical dissection of petromandibular fossa:</b>			
05250	Partial mastoido-tympanectomy for malignancy of the deep lobe of the parotid gland.	C	D
05251	Total mastoido-tympanectomy for more extensive malignancy of the deep lobe of the parotid gland	C	D
05252	Extended petrosectomy for extensive malignancy of the deep lobe of the parotid gland	C	D
<b>Physical treatment:</b>			
03299	Manipulation of large joints under general anaesthesia: Hip	A	A
<b>Myelography:</b>			
03333	Lumbar	B	
03334	Thoracic	B	
03335	Cervical	B	
03336	Multiple (lumbar, thoracic, cervical): Same fee as for first segment (no additional introduction of contrast medium)	B	
03345	Discography.	B	
<b>Teeth:</b>			
03381	Ventriculography	B	
03389	Dacryocystography.	B	
<b>Alimentary tract:</b>			
03395	Sialography (plus 80% for each additional gland)	B	
03415	Biliary Tract: E.R.C.P. own equipment: Cholelithogram and/or pancreatography screening included.	B	
03416	Pancreas: E.R.C.P. hospital equipment: Cholelithogram and/or pancreatography screening included	B	
<b>Bronchography:</b>			
03453	Unilateral	B	
03455	Bilateral	B	
03461	Pleurography	A	
<b>Cysto-urethrography:</b>			
03505	Retrograde-prograde pyelography	A	
<b>Gynaecology and obstetrics:</b>			
03519	Hystero-salpingography	A	
<b>Angiography:</b>			
03527	Cerebral angiography: First two series.	B	
03531	Peripheral angiography: per limb: First series	B	
03534	Digital vascular subtraction: Per series for first 6 series	B	
03535	Aortography: First series	B	
03547	Splenoportography	B	
<b>Introduction of contrast medium:</b>			
03561	Selective catheterisation of vena renalis and vena cava for selective catheterisation of a vein	B	
<b>Computed tomography:</b>			
03585	Head, single examination, full series	B	
03587	Head, repeat examination at the same visit, after contrast, full series	B	
03589	Chest	B	
03591	Abdomen (including base of chest and/or pelvis)	B	
03593	Multiple examinations: For an additional part the lesser fee shall be reduced to	B	
03595	Limbs and other limited examinations	B	

**Miscellaneous:**

**Ana Grp Proc Grp**

**Miscellaneous:**

03608 Repeat mammography procedure with fine needle aspiration biopsy utilising dedicated stereotactic equipment: Comprehensive procedure fee

05026 Amniocentesis.

05034 Fine needle aspiration or biopsy or core biopsy of mamma.

**Ultrasonic investigations:**

03619 Intravascular ultrasound imaging assesses the atherosclerotic process to guide the placement of an intracoronary stent. This item may be applied once per vessel (left anterior descending territory, circumflex territory and/or right coronary territory) in which a stent or multiple stents are deployed.

**Interventional radiological procedures:**

05002 Percutaneous transluminal angioplasty: Aortic/IVC

05004 Percutaneous transluminal angioplasty, arterial or venous, Iliac vessel/subclavian vessel/AV Fistula

05006 Percutaneous transluminal angioplasty: Femoral to popliteal bifurcation, axillary and brachial

05008 Percutaneous transluminal angioplasty: sub-popliteal sub brachial

05010 Percutaneous transluminal angioplasty: Renal/Visceral/Brachiocephalic

05012 Percutaneous transluminal angioplasty: extracranial Carotid/Vertebral

05018 On-table thrombolysis/Transcatheter infusion performed in angiography suite

05020 Transhepatic portal embolisation

05022 Embolisation non-intercranial, per vessel.

05028 Antegrade pyelography with insertion of the drainage catheter into the renal pelvis or ureter.

05030 Percutaneous nephrostomy for further procedure or drainage.

05031 Antegrade ureteric stent insertion

05032 Tumour embolisation.

05036 Percutaneous abdominal/pelvis/other drain insertion, any modality.

05038 Intracranial/Spinal AVM embolisation (per session).

05039 Intracranial thrombolysis (on-table) per session

05040 Intracranial aneurysm occlusion.

05041 Balloon occlusion/Wada test

05042 Carotico/Cavernous fistula/Head and neck AV fistula embolisation.

05043 Intracranial angioplasty

05044 Transhepatic portogram.

05045 Hepatic arterial infusion catheter insertion

05046 Percutaneous biliary drainage (external).

05047 Combined internal/external biliary drainage

05048 Biliary stent insertion.

05049 Percutaneous gall bladder drainage

05050 Percutaneous or renal gall bladder stone removal.

05052 Embolisation of spermatic vein.

05054 Selective catheterisation of spermatic vein.

05056 Percutaneous transluminal angioplasty performed by radiologists: Per lesion.

05058 Stent insertion: Aortic/IVC - including percutaneous transluminal angioplasty (PTA)

05060 Stent insertion: Iliac/subclavian/AV fistula - including percutaneous transluminal angioplasty (PTA)

05062 Stent insertion: Femoral popliteal bifurcation, axillary and brachial - including percutaneous transluminal angioplasty (PTA)

05064 Stent insertion: Sub-popliteal - including percutaneous transluminal angiography (PTA)

05066 Stent insertion: Renal/Visceral/Brachiocephali - including percutaneous transluminal angioplasty (PTA)

05070 Stent insertion: Aorto-iliac stent graft - including percutaneous transluminal angioplasty (PTA)

05072 Tunnelled/Subcutaneous arterial/venous line performed in radiology suite

05074 IVC filter insertion jugular or femoral route

05076 Intravascular foreign body removal, arterial or venous, any route

05078 Percutaneous sclerotherapy of an arteriovenous malformation (AVM) per session

05080 Transjugular intrahepatic portosystemic shunt

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**Interventional radiological procedures:**

	<u>Ana Grp</u>	<u>Proc Grp</u>
05082 Transjugular liver biopsy	B	B
05084 Endoluminal fallopian tube recanalisation	A	C
05088 Oesophageal stent insertion in radiology suite	A	B
05090 Tracheal stent insertion	A	B
05091 GIT Balloon dilatation under fluoroscopy	A	B
05092 Other GIT stent insertion	A	B

**Magnetic resonance imaging: per anatomical region:**

06200 Brain	B
06201 Orbits	B
06202 Paranasal sinuses	B
06203 Soft tissue: Face/skull	B
06204 Skull base/cranio-cervical joint	B
06205 Middle and internal ears	B
06206 Soft tissue: Neck	B
06207 Thyroid/para-thyroid	B
06208 Hypophysis (see modifiers 6104 and 6105 for limited examinations)	B
06209 Bone tumour (see modifier 6103)	B
06210 Cervical vertebrae	B
06211 Thoracic vertebrae	B
06212 Lumbar vertebrae	B
06213 Sacrum.	B
06214 Pelvis.	B
06215 Pelvic organs.	B
06216 Abdomen	B
06217 Thorax wall.	B
06218 Mediastinum.	B
06219 Soft tissue: Back.	B
06220 Left shoulder	B
06221 Right shoulder	B
06222 Both hips	B
06223 Left hip .	B
06224 Right hip	B
06225 Left upper arm	B
06226 Right upper-arm	B
06227 Left elbow	B
06228 Right elbow	B
06229 Left fore-arm	B
06230 Right fore-arm	B
06231 Left wrist and hand	B
06232 Right wrist and hand	B
06233 Left upper-leg	B
06234 Right upper-leg	B
06235 Left knee	B
06236 Right knee	B
06237 Left lower-leg	B
06238 Right lower-leg	B
06239 Left ankle	B
06240 Right ankle	B
06241 Left foot	B
06242 Right foot	B

**Magnetic resonance angiography**

Ana Grp    Proc Grp

**Magnetic resonance angiography**

06250	Brain	B
06251	Large vessels: Neck	B
06252	Large vessels: Chest	B
06253	Large vessels: Abdomen	B
06254	Large vessels: Legs	B
06255	Heart	B

**Low field strength peripheral joint magnetic resonance imaging**

06270	Low field strength peripheral joint examination (feet, knees, hands, and elbows), in dedicated limb units not able to perform body, spine, or head examinations	B
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# Oral Health (Dental) Procedure Groups

## Clinical oral evaluations

### Oral Grp

## Clinical oral evaluations

- 08101 Full mouth examination, charting and treatment planning (see Rule 001)
- 08102 Comprehensive consultation
- 08104 Examination or consultation for a specific problem not requiring full mouth examination, charting and treatment planning

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## Other preventive services

- 08151 Oral hygiene instructions
- 08153 Follow-up visit for re-evaluation of oral hygiene (if no other treatment is performed during the same visit)

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A

## Space maintenance (passive appliances)

- 08173 Space maintainer - fixed, per abutment unit
- 08175 Space maintainer - removable (all-inclusive fee)

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A

## Amalgam restorations (including polishing)

- 08341 Amalgam - one surface
- 08342 Amalgam - two surfaces
- 08343 Amalgam - three surfaces
- 08344 Amalgam - four or more surfaces

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A  
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## Resin restorations

- 08351 Resin - one surface, anterior
- 08352 Resin - two surfaces, anterior
- 08353 Resin - three surfaces, anterior
- 08354 Resin - four or more surfaces, anterior
- 08367 Resin - one surface, posterior
- 08368 Resin - two surfaces, posterior
- 08369 Resin - three surfaces, posterior
- 08370 Resin - four or more surfaces, posterior

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A

## Metal inlays

- 08361 Inlay, metallic - one surface, posterior
- 08362 Inlay, metallic - two surfaces, posterior
- 08363 Inlay, metallic - three surfaces, posterior
- 08364 Inlay, metallic - four or more surfaces, posterior

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A  
B  
B

## Ceramic and/or resin inlays

- 08371 Inlay, ceramic/resin - one surface
- 08372 Inlay, ceramic/resin - two surfaces
- 08373 Inlay, ceramic/resin - three surfaces
- 08374 Inlay, ceramic/resin - four or more surfaces

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A  
B  
B

## Crowns - single restorations

- 08401 Cast full crown
- 08403 Cast three-quarter crown
- 08407 Acrylic veneered crown
- 08409 Porcelain jacket crown
- 08411 Porcelain veneered crown

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B

## Other restorative services

- 08133 Re-cementing of inlays, crowns or bridges - per abutment
- 08135 Removal of inlays and crowns (per unit) and bridges (per abutment) or sectioning of a bridge, part of which is to be retained as a crown following the failure of a bridge
- 08137 Temporary crown placed as an emergency procedure
- 08157 Re-burnishing and polishing of restorations - complete dentition

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		<u>Oral Grp</u>
<b>Other restorative services</b>		
08330	Removal of fractured post or instrument and/or bypassing fractured endodontic instrument	A
08345	Preformed post retention, per post	A
08347	Pin retention for restoration, first pin	A
08348	Pin retention for restoration, each additional pin	A
08349	Carving or contouring a plastic restoration to accommodate an existing removable prosthesis	A
08355	Composite veneers (Direct)	A
08357	Preformed metal crown	A
08366	Pin retention as part of cast restoration, irrespective of number of pins	A
08376	Prefabricated post and core in addition to crown The core is built around a prefabricated post(s)	A
08391	Cast post and core - single	A
08393	Cast post and core - double	A
08395	Cast post and core - triple	A
08396	Cast coping	A
08397	Cast core with pins	A
08398	Core build-up, including any pins	A
08413	Facing replacement	A
08414	Additional fee for provision of crown within an existing clasp or rest	A
<b>Pulp capping</b>		
08303	Indirect pulp capping	A
<b>Pulpotomy</b>		
08307	Amputation of pulp (pulpotomy)	A
<b>Endodontic therapy preparatory visits</b>		
08332	Single-canal tooth, per visit	A
08333	Multi-canal tooth, per visit	A
<b>Obturation of root canals at a subsequent visit</b>		
08328	Obturation of root canal - Each additional canal - anteriors and premolars	A
08335	Obturation of root canal - First canal - anteriors and premolars	A
08336	Obturation of root canal - First canal - molars	B
08337	Obturation of root canal - Each additional canal - molars	A
<b>Preparation and obturation of root canals completed at a single visit</b>		
08329	Preparation and obturation of root canals completed at a single visit Each additional canal - anteriors and premolars	A
08338	Preparation and obturation of root canals completed at a single visit - First canal - anteriors and premolars	B
08339	Preparation and obturation of root canals completed at a single visit - First canal - molars	B
08340	Preparation and obturation of root canals completed at a single visit - Each additional canal - molars	A
<b>Endodontic retreatment</b>		
08334	Re-preparation of previously obturated canal, per canal	A
<b>Apexification/recalcification procedures</b>		
08305	Apexification of root canal, per visit	A
<b>Apicoectomy/periradicular services</b>		
08229	Apicoectomy including retrograde filling where necessary - incisors and canines	A
<b>Other endodontic procedures</b>		
08132	Emergency root canal treatment (See notes 2 and 3 in the preamble above)	A
08136	Access through a prosthetic crown or inlay to facilitate root canal treatment	A
<b>Surgical services (Including usual postoperative care)</b>		
08185	Gingivectomy-gingivoplasty, per quadrant	A
08186	Gingivectomy-gingivoplasty, per sextant	A

**Adjunctive periodontal services****Oral Grp****Adjunctive periodontal services**

- 08182 Root planing with or without periodontal curettage, per quadrant  
 08184 Root planing with or without periodontal curettage, per sextant

A  
A**Other periodontal services**

- 08176 Periodontal screening  
 08177 Oral hygiene instruction for the periodontally compromised patient  
 08178 Oral hygiene evaluation for the periodontally compromised patient  
 08179 Plaque removal for the periodontally compromised patient  
 08180 Scaling for the periodontally compromised patient

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A  
A**Complete dentures (including routine post-delivery care)**

- 08231 Full upper and lower dentures inclusive of soft bases or metal bases, where applicable  
 08232 Full upper or lower dentures inclusive of soft base or metal base, where applicable

B  
B**Partial dentures (including routine post-delivery care)**

- 08233 Partial denture, one tooth  
 08234 Partial denture, two teeth  
 08235 Partial denture, three teeth  
 08236 Partial denture, four teeth  
 08237 Partial denture, five teeth  
 08238 Partial denture, six teeth  
 08239 Partial denture, seven teeth  
 08240 Partial denture, eight teeth  
 08241 Partial denture, nine or more teeth  
 08281 Metal (e.g. chrome cobalt, gold, etc.) base to partial denture, per denture

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B  
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B  
B**Repairs to complete or partial dentures**

- 08269 Repair of denture or other intra-oral appliance  
 08270 Add clasp to existing partial denture  
 (One or more clasps)  
 08271 Add tooth to existing partial denture  
 (One or more teeth)

A  
A  
A**Denture rebase procedures**

- 08261 Re-model of denture

B

**Denture reline procedures**

- 08259 Reline of denture (laboratory)/ Opvulling van kunsgebit (laboratorium)  
 08263 Reline of denture in selfcuring acrylic (intra-oral)  
 08267 Soft base re-line per denture (heat cured)

A  
A  
A**Other removable prosthetic services**

- 08251 Cast gold clasp or rest per clasp or rest  
 08253 Wrought gold clasp or rest per clasp or rest  
 08255 Stainless steel clasp or rest per clasp or rest  
 08257 Lingual bar or palatal bar  
 08265 Tissue conditioner and soft self-cure interim re-line, per denture

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A**Endosteal implants**

- 08194 Placement of a single osseo-integrated implant per jaw  
 08195 Placement of a second osseo-integrated implant in the same jaw  
 08196 Placement of a third and subsequent osseo-integrated implant in the same jaw per implant  
 08198 Exposure of a single osseo-integrated implant and placement of a transmucosal element  
 08199 Exposure of a second osseo-integrated implant and placement of a transmucosal element in the same jaw  
 08200 Exposure of a third and subsequent osseo-integrated implant in the same jaw, per implant

B  
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A  
A

	Oral Grp
<b>Fixed partial denture pontics</b>	
<b>Fixed partial denture pontics</b>	
08420 Sanitary pontic	A
08422 Posterior pontic	B
08424 Anterior pontic (including premolars)	B
<b>Fixed partial denture retainers - inlays/onlays</b>	
08356 Bridge per abutment - only applicable to Maryland type bridges	A
<b>Fixed partial denture retainers - crowns</b>	
08193 Osseo-integrated abutment restoration, per abutment	B
<b>Surgical extractions (includes routine postoperative care)</b>	
08209 Surgical removal of a tooth, i.e. raising of mucoperiosteal flap, removal of bone and suturing	A
08210 Removal of unerupted or impacted tooth - first tooth	B
08211 Removal of unerupted or impacted tooth - second tooth	A
08212 Removal of unerupted or impacted tooth - each additional tooth	A
08213 Surgical removal of residual roots of first tooth	A
08214 Surgical removal of residual roots of each subsequent tooth	A
<b>Other surgical procedures</b>	
08188 Biopsy - intra-oral	A
08215 Surgical exposure of impacted or unerupted teeth for orthodontic reasons	B
<b>Reduction of dislocation &amp; management of temporomandibular joint dysfunction</b>	
08169 Bite plate for the treatment of TMJ dysfunction, or occlusal guards	A
<b>Repair of traumatic wounds</b>	
08192 Appositioning (i.e., suturing) of soft tissue injuries	A
<b>Unclassified treatment</b>	
08131 Emergency treatment where no other treatment item is applicable or applied for treatment of the same tooth	A
08221 Local treatment of post-extraction haemorrhage - initial visit (Excluding treatment of bleeding in the case of blood dyscrasias, e.g. haemophilia)	A
08223 Local treatment of post-extraction haemorrhage - each additional visit	A
08225 Treatment of septic socket - initial visit	A
08227 Treatment of septic socket - each additional visit	A
<b>Anaesthesia</b>	
08141 Inhalation sedation or electronic analgesia - first quarter-hour or part-thereof	A
08143 Inhalation sedation or electronic analgesia - each additional quarter-hour or part thereof	A
08144 Intravenous sedation	A
08145 Local anaesthetic, per visit	A
<b>Professional consultations</b>	
08106 Provision of a written treatment plan and quotation where prior authorisation is required by medical schemes	A
<b>Professional visits</b>	
08129 Additional fee/benefit for emergency treatment rendered outside normal working hours (including emergency treatment carried out at hospital) Not applicable where a practice offers an extended hours service as the norm	A
<b>Drugs, medicaments and materials</b>	
08183 Intra-muscular or sub-cutaneous injection therapy, per injection	A
<b>Miscellaneous services</b>	
08109 Infection control, per dentist, per hygienist, per dental assistant, per visit	A
08110 Provision of heat or vapour sterilized and wrapped instrumentation at the consulting rooms	A
08170 Minor occlusal adjustment	A
08304 Rubber dam, per arch	A
<b>Oral pathologists</b>	
09201 Consultation at rooms	A
09203 Consultation at hospital, nursing home or house	A

**Oral pathologists****Oral Grp**

09205 Subsequent consultation

A

09207 Night consultation

A

**Specialist prosthodontist**

08155 Polishing only (including removal of plaque) - complete dentition

A

08159 Scaling and polishing

A

08161 Topical application of fluoride (prophylaxis excluded) - complete dentition

A

08163 Fissure sealant - per tooth

A

08165 Application of fluoride using laboratory processed applicators

A

08167 Treatment of hypersensitive dentine, per visit

A

08501 Consultation

A

08503 Occlusal analysis on adjustable articulator

A

08505 Pantographic recording

A

08506 Detailed clinical examination, records, radiographic interpretation, diagnosis, treatment planning and case presentation

A

08507 Examination, diagnosis and treatment planning

A

08508 Electrognathographic recording

A

08509 Electrognathographic recording with computer analysis

B

**Specialist prosthodontist emergency treatment**

08511 Emergency treatment for relief of pain (where no other tariff item is applicable)

A

08513 Emergency crown

A

(Not applicable to temporary crowns placed during routine crown and bridge preparations)

08515 Recementing of inlay, crown or bridge, per abutment

A

08517 Re-implantation of an avulsed tooth, including fixation as required

A

**Specialist prosthodontist provisional treatment**

08521 Provisional splinting - extracoronal wire, per sextant

A

08523 Provisional splinting - extracoronal wire plus resin, per sextant

A

08527 Provisional splinting - intercoronal wire or pins or cast bar, plus amalgam or resin, per dental unit included in the splint

A

08529 Provisional crown, which is not placed during routine crown preparation

A

08530 Preformed metal crown

A

**Occlusal adjustment**

08551 Major occlusal adjustment

B

08553 Minor occlusal adjustment

A

**Ceramic and/or resin bonded inlays and veneers**

08554 Bonded veneers

B

08555 Ceramic and/or resin bonded inlays and veneers, One surface

B

08556 Ceramic and/or resin bonded inlays and veneers, Two surfaces

B

08557 Ceramic and/or resin bonded inlays and veneers, Three surfaces

B

08558 Ceramic and/or resin bonded inlays and veneers, Four or more surfaces

B

**Gold foil restorations**

08561 Gold foil restorations Class I and Class VI

B

08563 Gold foil restorations Class V

B

08565 Gold foil restorations Class III

B

**Gold restorations**

08571 Gold restorations One surface

B

08572 Gold restorations Two surfaces

B

08573 Gold restorations Three surfaces

B

08574 Gold restorations Four or more surfaces

B

08577 Pin retention

A

**Posts and copings**

08581 Single post

A

	Oral Grp
<b>Posts and copings</b>	
08582 Double post	A
08583 Triple post	B
08587 Copings	A
08589 Cast core with pins	A
<b>Preformed posts and cores</b>	
08591 Core build-up, including any pins	A
08593 Prefabricated post and core in addition to crown	A
<b>Implants</b>	
08590 Periodic maintenance of existing implant prosthesis, per abutment	A
08592 Osseo-integrated abutment restoration, per abutment	B
<b>Connectors</b>	
08597 Locks and milled rests	A
08599 Precision attachments	A
<b>Crowns</b>	
08601 Cast three-quarter crown	B
08603 Cast gold crown	B
08605 Acrylic veneered gold crown	B
08607 Porcelain jacket crown	B
08609 Porcelain veneered metal crown	B
<b>Bridges</b>	
08611 Sanitary pontic	B
08613 Posterior pontic	B
08615 Anterior pontic	B
<b>Resin bonded retainers</b>	
08617 Per abutment	B
<b>Conservative treatment for temporomandibular joint dysfunction</b>	
08621 First visit for treatment of TMJ dysfunction	A
08623 Follow-up visit for TMJ dysfunction	A
<b>Root canal therapy</b>	
08631 Root canal therapy, first canal	B
08633 Root canal therapy, Each additional canal	A
08634 Endodontic procedure on primary tooth	A
08636 Re-preparation of previously obturated canal, per canal	A
<b>Bleaching</b>	
08325 Bleaching of non-vital teeth, per tooth as a separate procedure	A
08327 Each additional visit for bleaching of non-vital tooth as a separate procedure	A
<b>Other endodontic procedure</b>	
08635 Apexification of root canal, per visit	A
08637 Hemisection of a tooth, resection of a root or tunnel preparation (as an isolated procedure)	B
08640 Removal of fractured post or instrument from root canal	A
<b>Prosthetics (removable)</b>	
08273 Additional fee/benefit where one or more impressions are required for 8269, 8270 and 8271	A
08275 Adjustment of denture	A
08641 Complete upper and lower dentures without primary complications	C
08643 Complete upper and lower dentures without major complications	C
08645 Complete upper and lower dentures with major complications	C
08647 Complete upper or lower denture without primary complications	C
08649 Complete upper or lower denture without major complications	C

**Prosthetics (removable)****Oral Grp**

- 08651 Complete upper or lower denture with major complications
- 08661 Diagnostic dentures (inclusive of tissue conditioning treatment)
- 08662 Remounting and occlusal adjustment of dentures
- 08663 Chrome cobalt base or gold base for full denture (extra charge)
- 08664 Remount of crown or bridge for extensive prosthetics
- 08665 Re-base, per denture
- 08667 Soft base, per denture (heat cured)
- 08668 Tissue conditioner, per denture
- 08669 Intra-oral relines of complete or partial denture
- 08671 Metal (e.g. Chrome cobalt or gold) partial denture
- 08672 Additional fee/benefit for altered cast technique for partial denture
- 08674 Additive partial denture
- 08679 Repairs

C  
C  
A  
B  
A  
A  
B  
A  
A  
C  
A  
B  
A

**Maxillary prostheses**

- 09101 Surgical obturator - Modified denture
- 09102 Surgical obturator - continuous base
- 09103 Surgical obturator - split base
- 09104 Interim obturator on existing denture
- 09105 Interim obturator on new denture
- 09106 Definitive obturator - open/hollow box
- 09107 Definitive obturator - silicone glove

A  
A  
B  
B  
C  
B  
C

**Mandibular resection prostheses**

- 09108 Prosthesis with guide flange
- 09109 Prosthesis without guide flange
- 09110 Prosthesis - Palatal augmentation

C  
C  
A

**Glossal resection prostheses**

- 09111 Simple prosthesis
- 09112 Complex prosthesis

B  
B

**Radiotherapy appliances**

- 09113 Carriers - simple
- 09114 Carriers - complex
- 09115 Shields - simple
- 09116 Shields - complex
- 09117 Cone locators

B  
C  
B  
C  
B

**Chemotherapy appliances**

- 09118 Chemotherapeutic agent carriers

B

**Intermediate/definitive prostheses**

- 09125 Speech aid/obturator with palatal modification
- 09126 Speech aid/obturator with velar modification
- 09127 Speech aid
- 09128 Speech aid/obturator adjustment
- 09129 Speech aid/obturator surgical prosthesis

A  
B  
C  
A  
B

**Speech appliances**

- 09130 Palatal lift
- 09131 Palatal stimulating
- 09132 Speech bulb
- 09133 Adjustments, Speech appliances

A  
B  
C  
A

**Extra-oral appliances**

- 09135 Auricular prosthesis - simple

C

**Extra-oral appliances**

**Oral Grp**

- 09136 Auricular prosthesis - complex
- 09137 Nasal prosthesis - simple
- 09138 Nasal prosthesis - complex
- 09139 Ocular prosthesis - conformer
- 09140 Ocular prosthesis using modified stock appliance
- 09141 Ocular prosthesis using custom appliance
- 09142 Orbital prosthesis - simple (excluding ocular section)
- 09143 Orbital prosthesis - complex (excluding ocular section)
- 09148 Other body prostheses - simple
- 09149 Other body prostheses - complex
- 09150 Surgical facial prostheses - simple
- 09151 Surgical facial prostheses - complex
- 09155 Cranial prosthesis

C  
C  
C  
B  
C  
C  
C  
C  
C  
C  
C  
C  
B

**Custom implants**

- 09156 Cranial - acrylic, elastomeric, metallic
- 09157 Facial - simple
- 09158 Facial - complex
- 09159 Ocular - custom made
- 09160 Body - special prosthesis

B  
B  
B  
B  
C

**Surgical appliances**

- 09161 Splints - simple
- 09162 Splints - complex
- 09163 Templates - simple
- 09164 Templates - complex
- 09165 Conformers - simple
- 09166 Conformers - complex

A  
B  
A  
B  
A  
B

**Trismus appliances**

- 09167 Trismus appliance - simple
- 09168 Trismus appliance - complex
- 09169 Orthoses (for paralysed patients)
- 09170 Facial palsy appliances
- 09171 Oral splints (per commissure)
- 09172 Dynamic oral retractors (per arm)

A  
B  
C  
B  
A  
A

**Attendance in theatre**

- 09175 Attendance in theatre, per hour

A

**Specialists in oral medicine and periodontics**

- 08140 Fee for treatment at a venue other than the surgery, inclusive of hospital visits, treatment under general anaesthetic, home visits; per visit
- 08701 Consultation
- 08703 Detailed clinical examination, records, radiographic interpretation, diagnosis, treatment planning and case presentation
- 08705 Periodic re-examination
- 08707 Periodontal screening
- 08711 Oral hygiene instruction
- 08713 Oral hygiene evaluation
- 08714 Full mouth clinical plaque removal
- 08715 Scaling
- 08721 Occlusal adjustment per visit
- 08723 Provisional splinting - extracoronal wire, per sextant
- 08725 Provisional splinting - extracoronal wire plus resin, per sextant
- 08727 Provisional splinting - intracoronal wire or pins or cast bar, plus amalgam or resin, per dental unit included in the splint

A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
A

**Temporomandibular joint procedures****Oral Grp****Temporomandibular joint procedures**

08625 Bite plate for TMJ dysfunction

A

**Surgical procedures**

08731 Periodontal abscess - treatment of acute phase (with or without flap procedure)

A

08737 Root planing with or without periodontal curettage, per quadrant

A

08739 Root planing with or without periodontal curettage, per sextant

A

08741 Gingivectomy-gingivoplasty, per quadrant

B

08743 Gingivectomy-gingivoplasty, per sextant

A

08749 Flap operation with root planing and curettage and which may include not more than 3 of the following: bone contouring, chemical treatment of root surfaces, root resection, tooth hemisection, a mucogingival procedure, wedge resection, apicectomy, clinical crown lengthening, per quadrant

B

08751 Flap operation with root planing and curettage with &lt;=3 additional interventions, per sextant

B

08753 Flap operation with root planing and curettage and will include more than 3 of the following: bone contouring, chemical treatment of root surfaces, root resection, tooth hemisection, a mucogingival procedure, wedge resection, apicectomy, clinical crown lengthening, per quadrant

B

08755 Flap operation with root planing and curettage with &gt;3 additional interventions, per sextant

B

08756 Flap operation with bone removal to increase the clinical crown length of a single tooth (as an isolated procedure)

B

08757 Frenectomy

B

08758 Surgical exposure of impacted or unerupted teeth for orthodontic reasons

B

08759 Pedicle flapped graft e.g. lateral sliding double papilla, rotated and similar (as an isolated procedure)

B

08760 Apicectomy including retrograde filling where necessary - anterior teeth

B

08762 Masticatory mucosal autograft and subepithelial connective tissue extending across more than four teeth (isolated procedure)

B

08763 Wedge resection (as an isolated procedure)

A

08764 Apicectomy including retrograde filling where necessary, posterior teeth

B

08765 Hemisection of a tooth, resection of a root or tunnel preparation (as an isolated procedure)

B

08766 Bone regenerative - repair procedure excluding cost of regenerative material as part of a flap operation as described in Items 8749, 8751, 8753 and 8755, per procedure

A

08768 Any other periodontal procedure involving a single tooth

A

08771 Prerestorative ridge augmentation using fibrous tissue, hydroxyapatite granules and/or bone particles

B

**Oral medical procedures**

08781 Consultation, examination, diagnosis and diagnosis of oral diseases, pathological conditions of the surrounding tissues, temporomandibular joint disorders or myofascial pain-dysfunction: Straight forward case

A

08782 Consultation, examination, diagnosis and treatment of oral diseases, pathological conditions of the surrounding tissues, temporomandibular joint disorders or myofascial pain dysfunction: Complex case

A

08783 Subsequent consultation for same disease/condition

A

08785 Biopsy - incisional/excisional (e.g. epulis)

A

08786 Surgical treatment of soft tissue tumours (e.g. epulis)

A

08787 Any other procedure connected with the practice of oral medicine

A

**Specialist orthodontists**

08801 First consultation

A

08803 Subsequent consultation, retention and/or post-treatment consultation

A

**Records and investigations**

08837 Diagnosis and treatment planning

A

08839 Orthodontic diagnostic setup

A

**Retainers, repairs and/or replacements**

08846 Removable: Repairs

A

08847 Removable: Replacement

A

08848 Fixed: Repair or replacement per unit  
(As a result of the patient's negligence)

A

08849 Retainer

A

**Treatment of mpds**

08850 First consultation

A

08851 Subsequent consultation

A



		Oral Grp
<b>Treatment of mpds</b>		
08852	Bite plate for TMJ dysfunction	A
<b>Occlusal adjustment</b>		
08853	Major occlusal adjustment	B
08854	Minor occlusal adjustment	A
<b>Cleft palate therapy</b>		
08855	Consultation and therapy at hospital/nursing home/residence	A
08856	Subsequent consultation	A
08857	Weekly maximum	B
<b>Neonatal prostheses</b>		
09119	Passive presurgical prosthesis/Neonatal feeding aid	B
09120	Active presurgical orthopaedic appliance - minor	B
09121	Active presurgical orthopaedic appliance - moderate	B
09122	Active presurgical orthopaedic appliance - severe	C
09123	Active presurgical orthopaedic appliance adjustment	A
<b>Removable appliance therapy</b>		
08862	Removable (single)	B
08863	Removable (per additional)	B
<b>Functional appliance therapy</b>		
08858	Functional appliance	C
<b>Partial fixed appliance therapy - preliminary treatment</b>		
08861	Minor fixed appliance	B
08865	Maxillary or mandibular arch	C
08866	Combined maxillary and mandibular arch	D
<b>Comprehensive fixed appliance therapy</b>		
08867	Single arch treatment Mild	C
08868	Single arch treatment Moderate	D
08869	Single arch treatment Severe	D
<b>Combined maxillary and mandibular arch therapy</b>		
08873	Class I malocclusions Mild	D
08875	Class I malocclusions Moderate	D
08877	Class I malocclusions Severe	D
08879	Severe plus complications	D
08881	Class II and III malocclusions Mild	D
08883	Class II and III malocclusions Moderate	D
08885	Class II and III malocclusions Severe	D
08887	Class II and III malocclusions Severe plus complications	D
<b>Lingual orthodontics</b>		
08841	Lingual orthodontics single arch treatment Mild	D
08842	Lingual orthodontics single arch treatment Moderate	D
08843	Lingual orthodontics single arch treatment Severe	D
<b>Combined maxillary and mandibular arch therapy</b>		
08874	Combined maxillary and mandibular arch therapy class I malocclusions Mild	D
08876	Combined maxillary and mandibular arch therapy class I malocclusions Moderate	D
08878	Combined maxillary and mandibular arch therapy class I malocclusions Severe	D
08880	Combined maxillary and mandibular arch therapy class I malocclusions Severe plus complications	D
08882	Combined maxillary and mandibular arch therapy class II and III malocclusions, Mild	D
08884	Combined maxillary and mandibular arch therapy class II and III malocclusions, Moderate	D
08886	Combined maxillary and mandibular arch therapy class II and III malocclusions, Severe	D
08888	Combined maxillary and mandibular arch therapy class II and III malocclusions, Severe plus complications	D

**Specialist maxillo-facial and oral surgeons****Oral Grp****Specialist maxillo-facial and oral surgeons**

- 08901 Consultation at consulting rooms
- 08902 Detailed clinical examination, radiographic interpretation, diagnosis, treatment planning and case presentation
- 08903 Consultation at hospital, nursing home or house
- 08904 Subsequent consultation at consulting rooms, hospital, nursing home or house
- 08905 Weekend visits and night visits between 18h00 - 07h00 the following day
- 08907 Subsequent consultations, per week, to a maximum of

A  
A  
A  
A  
A  
A

**Investigations and records**

- 08107 Intra-oral radiographs, per film
- 08108 Maximum for 8107
- 08113 Occlusal radiographs
- 08114 Hand-wrist radiograph
- 08115 Extra-oral radiograph, per film  
(i.e. panoramic, cephalometric, PA)
- 08117 Study models - unmounted or mounted on a hinge articulator
- 08119 Study models - mounted on a movable condyle articulator
- 08121 Photographs (for diagnostic, treatment or dento-legal purposes) per photograph
- 08811 Tracing and analysis of extra-oral film
- 08917 Biopsies - intra-oral
- 08919 Biopsy of bone - needle
- 08921 Biopsy of bone - open

A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
B

**Orthognathic surgery and treatment planning**

- 08840 Treatment planning for orthognathic surgery

B

**Removal of teeth**

- 08201 Extraction - Single tooth
- 08202 Extraction - Each additional tooth in the same quadrant
- 08931 Local treatment of post-extraction haemorrhage (excluding treatment of bleeding in the case of blood dyscrasias, e.g. haemophilia)
- 08933 Treatment of haemorrhage in the case of blood dyscrasias, e.g. hemophilia, per week
- 08935 Treatment of post-extraction septic socket where patient is referred by another registered person
- 08937 Surgical removal of a tooth i.e.: raising of muco-periosteal flap, removal of bone and suturing
- 08957 Alveolotomy or alveolectomy - concurrent with or independent of extractions (per jaw)
- 08961 Auto-transplantation of teeth

A  
A  
A  
B  
A  
A  
B  
B

**Removal of roots**

- 08953 Surgical removal of residual roots of first tooth

A

**Unerupted or impacted teeth**

- 08941 Unerupted or impacted teeth, First tooth
- 08943 Unerupted or impacted teeth, Second tooth
- 08945 Unerupted or impacted teeth, Third tooth
- 08947 Unerupted or impacted teeth, Fourth and subsequent tooth

B  
A  
A  
A

**Diverse procedures**

- 08761 Masticatory mucosal autograft and subepithelial connective tissue autograft extending across not more than four teeth (isolated procedure)
- 08767 Bone regenerative - repair procedure at a single site  
(Excluding cost of regenerative material - see code 8770)
- 08769 Subsequent removal of membrane used for guided tissue regeneration procedure
- 08908 Removal of roots from maxillary antrum involving Caldwell-Luc and closure of oral antral communication
- 08909 Closure of oral antral fistula - acute or chronic
- 08911 Caldwell-Luc procedure
- 08965 Peripheral neurectomy
- 08966 Functional repair of oronasal fistula (local flaps)
- 08977 Major repairs of upper or lower jaw (i.e. by means of bone grafts or prosthesis, with jaw splintage)

B  
B  
A  
B  
B  
A  
B  
B  
C

	Oral Grp
<b>Diverse procedures</b>	
08978 Harvesting of autogenous grafts (extra-oral)	A
08979 Harvesting of autogenous grafts (intra-oral)	A
<b>Cysts of jaws</b>	
08967 Cysts of jaws, Intra-oral approach	B
08969 Cysts of jaws, Extra-oral approach	C
<b>Neoplasms</b>	
08971 Surgical treatment of soft tissue tumours	A
08973 Surgical treatment of tumours of the jaws	C
08975 Hemiresection of jaw, with splintage of segments	C
<b>Para-orthodontic surgical procedures</b>	
08981 Surgical exposure of impacted or unerupted teeth for orthodontic reasons	B
08983 Corticotomy - first tooth	B
08984 Corticotomy - adjacent or subsequent tooth	A
08985 Frenectomy	B
<b>Surgical preparation of jaws for prosthetics</b>	
08987 Reduction of mylohyoid ridges, per side	B
08989 Torus mandibularis reduction, per side	B
08991 Torus palatinus reduction	B
08993 Reduction of hypertrophic tuberosity, per side	A
08995 Gingivectomy, per jaw	B
08997 Sulcoplasty/Vestibuloplasty	C
09003 Repositioning mental foramen and nerve, per side	B
09005 Alveolar ridge augmentation by bone graft	C
09007 Alveolar ridge augmentation by alloplastic material	B
09008 Alveolar ridge augmentation across 1 to 2 adjacent tooth sites	B
09009 Alveolar ridge augmentation across 3 or more tooth sites	B
09010 Sinus lift procedure/ Sinus lift procedure	B
<b>Sepsis</b>	
09011 Incision and drainage of pyogenic abscesses (intra-oral approach)	A
09013 Extra-oral approach, e.g. Ludwig's angina	A
09015 Apicectomy including retrograde root filling where necessary - anterior teeth	B
09016 Apicectomy including retrograde root filling where necessary - posterior teeth	B
09017 Decortication, saucerisation and sequestrectomy for osteomyelitis of the mandible	C
09019 Sequestrectomy - intra-oral, per sextant and/or per ramus	A
<b>Trauma</b>	
09021 Treatment of associated soft tissue injuries, Minor	B
09023 Treatment of associated soft tissue injuries, Major	B
09024 Dento-alveolar fracture, per sextant	B
<b>Mandibular fractures</b>	
09025 Mandibular fractures, Treatment by closed reduction, with intermaxillary fixation	B
09027 Treatment of compound fracture, involving eyelet wiring.	B
09029 Treatment by metal cap splintage or Gunning's splints	C
09031 Treatment by open reduction with restoration of occlusion by splintage	C
<b>Maxillary fractures with special attention to occlusion</b>	
09035 Le Fort I or Guerin fracture	B
09037 Le Fort II or middle third of face	C
09039 Le Fort III or craniofacial disjunction or comminuted mid-facial fractures requiring open reduction and splintage	C
<b>Zygoma/orbit/antral - complex fractures</b>	
09041 Gillies or temporal elevation	B

**Zygoma/orbit/antral - complex fractures****Oral Grp**

- 09043 Unstable and/or comminuted zygoma, treatment by open reduction or Caldwell-Luc operation C  
 09045 Requiring multiple osteosynthesis and C

**Functional correction of malocclusions**

- 09047 Operation for the improvement or restoration of occlusal and masticatory function, e.g. bilateral osteotomy, open operation (with immobilisation) C  
 09049 Anterior segmental osteotomy of mandible (Köle) C  
 09050 Total subapical osteotomy D  
 09051 Genioplasty C  
 09052 Midfacial exposure (for maxillary and nasal augmentation or pyramidal Le Fort II osteotomy) C  
 09055 Maxillary posterior segment osteotomy (Schukardt) - 1 or 2 stage procedure C  
 09057 Maxillary anterior segment osteotomy (Wassmund) - 1 or 2 stage procedure C  
 09059 Le Fort I osteotomy - one piece D  
 09060 Le Fort I osteotomy with inferior repositioning and inter positional grafting D  
 13.295.00  
 09061 Palatal osteotomy C  
 09062 Le Fort I osteotomy - multiple segments D  
 09063 Le Fort II osteotomy for correction of facial deformities or faciosclerosis and post-traumatic deformities D  
 09065 Le Fort III osteotomy for correction of severe congenital deformities, viz. Crouzon's disease and malunited craniomaxillary disjunction D  
 09069 Functional tongue reduction (partial glossectomy) B  
 09071 Geniohyoidotomy B  
 09072 Functional closure of the secondary oro-nasal fistula and associated structures with bone grafting (complete procedure) D

**Temporomandibular joint procedures**

- 09053 Coronoidectomy (intra-oral approach) B  
 09073 Bite plate for TMJ dysfunction A  
 09074 Diagnostic arthroscopy B  
 09075 Condylectomy or coronoidectomy or both (extra-oral approach) C  
 09076 Arthrocentesis TMJ B  
 09077 Intra-articular injection, per injection A  
 09079 Trigger point injection, per injection A  
 09081 Condyle neck osteotomy (Ward) B  
 09083 Temporomandibular joint arthroplasty C  
 09085 Reduction of temporomandibular joint dislocation without anaesthetic A  
 09087 Reduction of temporomandibular joint dislocation, with anaesthetic A  
 09089 Reduction of temporomandibular joint dislocation, with anaesthetic and immobilisation B  
 09091 Reduction of temporomandibular joint dislocation requiring open reduction C  
 09092 Total joint reconstruction with alloplastic material or bone (includes condylectomy and coronoidectomy) D

**Salivary glands**

- 09093 Removal of salivary calculus B  
 09095 Removal of sublingual salivary gland B  
 09096 Removal of salivary gland (extra-oral) C

**Implants**

- 09180 Placement of sub-periosteal implant - Preparatory procedure/operation B  
 09181 Placement of sub-periosteal implant prosthesis B  
 09182 Placement of endosteal implant, per implant B  
 09183 Placement of a single osseo-integrated implant per jaw B  
 09184 Placement of a second osseo-integrated implant in the same jaw B  
 09185 Placement of a third and subsequent osseo-integrated implant in the same jaw, per implant B  
 09190 Exposure of a single osseo-integrated implant and placement of a transmucosal element A  
 09191 Exposure of a second osseo-integrated implant and placement of a transmucosal element in the same jaw A  
 09192 Exposure of a third and subsequent osseo-integrated implant in the same jaw, per implant A

**Cleft lip and palate**

**Oral Grp**

**Cleft lip and palate**

09220	Repair of cleft hard palate (unilateral)	C
09222	Repair of cleft hard palate (bilateral, one procedure)	D
09224	Repair of cleft hard palate (bilateral, in two procedures)	D
09226	Repair of cleft soft palate (without muscle reconstruction)	C
09228	Repair of soft palatum (with muscle reconstruction)	D
09230	Repair of submucosal cleft and/or bifid uvula (with muscle reconstruction)	C
09232	Velopharyngeal reconstruction (uncomplicated)	C
09234	Velopharyngeal reconstruction (complicated type)	C
09238	Functional repair of oro-nasal fistula (distant flaps - in a single procedure)	C
09240	Functional repair of oro-nasal fistula (distant flaps - in two procedures)	C
09246	Secondary periosteal swivel flaps for bone induction	C
09248	Lipadhesion	B
09250	Unilateral cleft lip repair (without muscle reconstruction)	B
09252	Unilateral cleft lip repair (with muscle reconstruction)	C
09254	Bilateral cleft lip repair (without muscle reconstruction)	C
09256	Bilateral cleft lip repair (with muscle reconstruction)	C
09258	Anterior nasal floor repair (between alveolus)	B
09260	Partial revision of secondary cleft lip deformity	B
09262	Total revision of secondary cleft lip deformity (with functional muscle reconstruction)	B
09264	Abbe-flap (in two stages)	C
09266	Columella reconstruction	B
09268	Partial reconstruction of nose due to cleft deformity	B
09270	Complete reconstruction of the nose due to cleft deformity	C
09272	Paranasal augmentation for nasal base deviation	B

# Imaging (Radiology) Groups

## Limbs:

### Limbs:

- 03305 Finger, toe.  
 03307 Limb per region e.g. shoulder, elbow, knee, foot, hand, wrist, or ankle (an adjacent part which does not require an additional set of views should not be added e.g. wrist or hand)  
 03309 Smith-Petersen or equivalent control, in theatre.  
 03311 Stress studies, e.g. joint.  
 03313 Length studies per right and left pair of long bones  
 03315 Skeletal survey under 5 years  
 03317 Skeletal survey over 5 years  
 03319 Arthrography per joint  
 03320 Introduction of contrast medium or air: Add

Image Grp Ana Grp

A  
A  
B  
A  
A  
B  
B  
A  
B

## Spinal column:

- 03321 Per region, e.g. cervical, sacral, coccygeal, one region thoracic  
 03325 Stress studies  
 03329 Scoliosis studies  
 03331 Pelvis (Sacro-iliac or hip joints only to be added where an extra set of views is required).

A  
A  
B  
A

## Myelography:

- 03333 Lumbar  
 03334 Thoracic  
 03335 Cervical  
 03344 Introduction of contrast medium: Add  
 03345 Discography.  
 03347 Introduction of contrast medium per disc level: Add

B  
B  
B  
B  
B  
B

## Skull:

- 03349 Skull studies  
 03351 Paranasal sinuses  
 03353 Facial bones and/or orbits  
 03355 Mandible  
 03357 Nasal bone  
 03359 Mastoid: Bilateral

A  
A  
A  
A  
A  
A

## Teeth:

- 03361 One quadrant  
 03363 Two quadrants  
 03365 Full mouth  
 03366 Rotation tomography of the teeth and jaws.  
 03367 Temporo-mandibular joints: Per side.  
 03369 Tomography: Per side  
 03371 Localisation of foreign body in the eye.  
 03381 Ventriculography  
 03385 Post-nasal studies: Lateral neck  
 03387 Maxillo-facial cephalometry  
 03389 Dacryocystography.  
 03391 For introduction of contrast medium add

A  
A  
A  
A  
A  
A  
A  
B  
A  
A  
A  
B

## Alimentary tract:

- 03393 Bowel washout: Add  
 03395 Sialography (plus 80% for each additional gland)

A  
A

		<u>Image Grp</u>	<u>Ana Grp</u>
<b>Alimentary tract:</b>			
03397	Introduction of contrast medium (plus 80% for each additional gland) : Add	B	
03399	Pharynx and oesophagus	A	
03403	Oesophagus, stomach and duodenum (control film of abdomen included) and limited follow through.	B	
03405	Double contrast: Add	B	
03406	Small bowel meal (control film of abdomen included except when part of item 3408)	B	
03408	Barium meal and dedicated gastro-intestinal tract follow through (including control film of the abdomen, oesophagus, duodenum, small bowel and colon)	B	
03409	Barium enema(control film of abdomen included)	A	
03411	Air contrast study : Add	B	
03415	Biliary Tract: E.R.C.P. own equipment: Cholelogram and/or pancreatography screening included.	B	B
03416	Pancreas: E.R.C.P. hospital equipment: Cholelogram and/or pancreatography screening included	A	B
03417	Gastric/oesophageal/duodenal intubation control	A	
03419	Gastric/oesophageal intubation insertion of tube Add	A	
03421	Duodenal intubation: Insertion of tube: Add	A	
03423	Hypotonic duodenography (item 3403 and item 3405 included) : Add	B	
<b>Biliary tract:</b>			
03425	Oral cholecystography.	A	
<b>Cholangiography:</b>			
03427	Intravenous	B	
03431	Operative: First series: Add item 3607 only when the Radiologist attends personally in theatre	B	
03432	Subsequent series	B	
03433	Post operative: T-tube	A	
03435	Introduction of contrast medium: Add	A	
03437	Trans hepatic, percutaneous	A	
03439	Introduction of contrast medium: Add.	B	
03441	Tomography of biliary tract: Add.	B	
<b>Chest:</b>			
03443	Larynx (Tomography included)	A	
03445	Chest (item 3601 included).	A	
03447	Chest and cardiac studies (item 3601 included)	A	
03449	Ribs	A	
03451	Sternum or sterno-clavicular joints	A	
<b>Bronchography:</b>			
03453	Unilateral	A	B
03455	Bilateral	B	B
03457	Introduction of contrast medium included	B	
03461	Pleurography	A	A
03463	For introduction of contrast medium: Add	A	
03465	Laryngography	A	
03467	For introduction of contrast medium: Add	B	
03468	Thoracic inlet	A	
<b>Abdomen:</b>			
03477	Control films of the Abdomen (not being part of examination for barium meal, barium enema, pyelogram, cholecystogram, cholangiogram etc.)	A	
03479	Acute abdomen or equivalent studies	A	
<b>Excretory urogram:</b>			
03487	Control film included and bladder views before and after mictrurition (intravenous pyelogram) (item 0206 not applicable)	B	
03493	Waterload test: Add.	B	
03497	Cystography only or urethrography only (retrograde).	A	

	<u>Image Grp</u>	<u>Ana Grp</u>
<b>Cysto-urethrography:</b>		
<b>Cysto-urethrography:</b>		
03499 Retrograde	B	
03503 Introduction of contrast medium : Add	B	
03505 Retrograde-prograde pyelography	A	A
03511 Aspiration renal cyst	A	
03513 Tomography of renal tract: Add	B	
<b>Gynaecology and obstetrics:</b>		
03515 Pregnancy	A	
03517 Pelvimetry	A	
03519 Hystero-salpingography .	A	A
03521 Introduction of contrast medium: Add	B	
<b>Angiography:</b>		
03527 Cerebral angiography: First two series.	B	B
03529 Additional series: Each	B	
03531 Peripheral angiography: per limb: First series	A	B
03533 Other arteriography: per field: First series	B	
03534 Digital vascular subtraction: Per series for first 6 series	B	B
03535 Aortography: First series	B	B
03536 Dedicated angiography suite: analogue monoplaner unit. Once off charge per patient by owner of equipment	D	
03537 Dedicated angiography suite: Digital monoplaner unit. Once off charge per patient by owner of equipment	D	
03538 Analogue monoplaner table with DSA attachment	D	
03539 Dedicated angiography suite: Digital bi-plane unit. Once off charge per patient by owner of equipment	D	
03540 Radiography fee for coronary catheterisation laboratory, per radiographer, per half hour or part thereof (also chargeable by cardiologist who employs radiographer)	A	
03543 Vena cavography: First series	B	
03545 Venography: Per limb	A	
03547 Splenoportography	B	B
03548 Analogue monoplaner screening table	D	
03549 Lymphangiography	B	
03550 Digital monoplaner screening table	D	
<b>Introduction of contrast medium:</b>		
03553 Femoral artery: Direct injection	A	
03555 Other artery or aorta: Direct injection	B	
03561 Selective catheterisation of vena renalis and vena cava for selective catheterisation of a vein	B	B
03563 Direct intravenous for limb : Add	B	
03565 Direct intravenous for angiocardiology, aortography, cavography, pulmonary arteriography, etc : Add	B	
03567 Venous catheterisation for angiocardiology, aortography cavography, pulmonary arteriography and peripheral venography :	B	
03571 Splenoportography: Direct injection or catheter : Add	B	
03573 Splenoportography: With pressure studies: Add	B	
03575 "Cut-downs" for venography: Add	B	
<b>Computed tomography:</b>		
03585 Head, single examination, full series	C	B
03587 Head, repeat examination at the same visit, after contrast, full series	D	B
03589 Chest	C	B
03591 Abdomen (including base of chest and/or pelvis)	D	B
03593 Multiple examinations: For an additional part the lesser fee shall be reduced to	B	B
03595 Limbs and other limited examinations	B	B
<b>Miscellaneous:</b>		
03600 Peripheral bone densitometry utilizing ionizing radiation	A	
03601 Fluoroscopy: Per half hour: (not applicable for items 3445 and 3447) Add	A	



**Miscellaneous:**

03602	Where a C-arm portable X-ray unit is used in hospital or theatre: Per half hour: Add	A	
03603	Sinography	A	
03604	Bone densitometry (to be charged once only for one or more levels done at the same session)	B	
03605	Mammography: Unilateral or bilateral	B	
03606	Repeat mammography, unilateral or bilateral, for localisation of tumour	B	
03607	Attendance at operation in theatre or at radiological procedure performed by a surgeon or physician in x-ray department except item 3309: Per half hour: Plus fee for examination performed	A	
03608	Repeat mammography procedure with fine needle aspiration biopsy utilising dedicated stereotactic equipment: Comprehensive procedure fee	B	A
03611	Foreign body localisation: Introduction of sterile needle markers: Add	A	
03613	Setting of sterile trays	A	
05026	Amniocentesis.	B	B
05034	Fine needle aspiration or biopsy or core biopsy of mamma.	A	B

**Ultrasonic investigations:**

03596	Intravascular ultrasound per case, arterial or venous, for intervention	A	
03610	Transrectal ultrasonographic prostate volume study for prostate brachytherapy (own equipment).	B	
03612	Ultrasonic bone densitometry	A	
03614	Transvaginal aspiration of ova	B	
03615	Fetal maturity	B	
03617	Fetal maturity follow up (same pregnancy)	A	
03618	Pelvic organs (vaginal or abdominal probe)	B	
03619	Intravascular ultrasound imaging assesses the atherosclerotic process to guide the placement of an intracoronary stent. This item may be applied once per vessel (left anterior descending territory, circumflex territory and/or right coronary territory) in which a stent or multiple stents are deployed.	A	B
03620	Cardiac examination plus Doppler colour mapping	B	
03621	Cardiac examination (M.Mode)	A	
03622	Cardiac examination: 2 Dimensional	B	
03623	Cardiac examination + effort : Add	B	
03624	Cardiac examinations + contrast : Add	B	
03625	Cardiac examinations + doppler : Add	B	
03626	Cardiac examination + phonocardiography : Add	B	
03627	Examination of the whole abdomen (including liver, gall bladder, spleen, pancreas, abdominal vascular anatomy, para-aortic area, renal tract)	B	
03628	Renal tract	B	
03629	High definition (small parts) scan: thyroid, breast lump, scrotum, etc.	B	
03630	Examination of a mass (extra abdominal)	B	
03631	Ophthalmic examination	B	
03632	Axial length measurement and calculation of intraocular lens power: per eye	B	
03633	Neonatal head scan	B	
03634	Peripheral vascular scan	A	
03635	+ Doppler	B	
03636	Trans-oesophageal echocardiography including passing the device	B	
03637	Duplex scan	B	

**Portable unit and theatre examinations:**

03639	Where portable X-ray unit is used in the hospital or theatre: Add	A	
03640	Theatre investigations with fixed installation : Add	A	

**Diagnostic procedures requiring the use of radio-isotopes:**

03641	Tracer test	B	
03642	Repeat of further tracer tests for same investigation: Half of above fee	A	
03644	Tracer test of complete body or brain tumour location .	C	
03645	Other organ scanning with use of relevant radio isotopes	C	

**Diagnostic procedures requiring the use of radio-isotopes:**

03646 Thyroid scanning

**Image Grp** **Ana Grp**

B

**Interventional radiological procedures:**

05002	Percutaneous transluminal angioplasty: Aortic/IVC	D	B
05004	Percutaneous transluminal angioplasty, arterial or venous, Iliac vessel/subclavian vessel/AV Fistula	D	B
05006	Percutaneous transluminal angioplasty: Femoral to popliteal bifurcation, axillary and brachial	D	B
05008	Percutaneous transluminal angioplasty: sub-popliteal sub brachial	D	B
05010	Percutaneous transluminal angioplasty: Renal/Visceral/Brachiocephalic	D	B
05014	Atherectomy (per vessel)	D	
05016	Aspiration thrombectomy (per vessel)	D	
05018	On-table thrombolysis/Transcatheter infusion performed in angiography suite	D	A
05020	Transhepatic portal embolisation	C	C
05022	Embolisation non-intercranial, per vessel.	D	B
05028	Antegrade pyelography with insertion of the drainage catheter into the renal pelvis or ureter.	B	B
05030	Percutaneous nephrostomy for further procedure or drainage.	C	B
05031	Antegrade ureteric stent insertion	C	A
05032	Tumour embolisation.	A	B
05033	Percutaneous cystostomy in radiology suite	B	
05035	Urethral balloon dilatation in radiology suite	B	
05036	Percutaneous abdominal/pelvis/other drain insertion, any modality.	B	B
05037	Urethral stenting in radiology suite	D	
05038	Intracranial/Spinal AVM embolisation (per session).	D	C
05039	Intracranial thrombolysis (on-table) per session	D	B
05040	Intracranial aneurysm occlusion.	D	C
05041	Balloon occlusion/Wada test	D	B
05042	Carotico/Cavernous fistula/Head and neck AV fistula embolisation.	D	C
05043	Intracranial angioplasty	D	B
05044	Transhepatic portogram.	D	B
05045	Hepatic arterial infusion catheter insertion	D	A
05046	Percutaneous biliary drainage (external).	D	B
05047	Combined internal/external biliary drainage	D	B
05048	Biliary stent insertion.	D	B
05049	Percutaneous gall bladder drainage	C	B
05050	Percutaneous or renal gall bladder stone removal.	D	B
05052	Embolisation of spermatic vein.	B	A
05054	Selective catheterisation of spermatic vein.	B	A
05056	Percutaneous transluminal angioplasty performed by radiologists: Per lesion.	C	C
05058	Stent insertion: Aortic/IVC - including percutaneous transluminal angioplasty (PTA)	D	B
05060	Stent insertion: Iliac/subclavian/AV fistula - including percutaneous transluminal angioplasty (PTA)	D	B
05062	Stent insertion: Femoral popliteal bifurcation, axillary and brachial - including percutaneous transluminal angioplasty (PTA)	D	B
05064	Stent insertion: Sub-popliteal - including percutaneous transluminal angioplasty (PTA)	D	B
05066	Stent insertion: Renal/Visceral/Brachiocephali - including percutaneous transluminal angioplasty (PTA)	D	B
05070	Stent insertion: Aorto-iliac stent graft - including percutaneous transluminal angioplasty (PTA)	D	B
05072	Tunnelled/Subcutaneous arterial/venous line performed in radiology suite	C	A
05074	IVC filter insertion jugular or femoral route	D	B
05076	Intravascular foreign body removal, arterial or venous, any route	D	B
05078	Percutaneous sclerotherapy of an arteriovenous malformation (AVM) per session	C	A
05080	Transjugular intrahepatic portosystemic shunt	D	B
05082	Transjugular liver biopsy	C	B
05084	Endoluminal fallopian tube recanalisation	D	A
05086	Renal cyst aspiration/ablation	B	

<u>image Grp</u>	<u>Ana Grp</u>
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05088	Oesophageal stent insertion in radiology suite
05090	Tracheal stent insertion
05091	GIT Balloon dilatation under fluoroscopy
05092	Other GIT stent insertion
05093	Percutaneous gastrostomy in radiology suite
05094	Cutting needle biopsy with image guidance
05095	Chest drain insertion in radiology suite
05096	Percutaneous cyst or tumour ablation (non aspiration)

06200 Brain  
06201 Orbits  
06202 Paranasal sinuses  
06203 Soft tissue: Face/skull  
06204 Skull base/cranio-cervical joint  
06205 Middle and internal ears  
06206 Soft tissue: Neck  
06207 Thyroid/para-thyroid  
06208 Hypophysis (see modifiers 6104 and 6105 for limited examinations)  
06209 Bone tumour (see modifier 6103)  
06210 Cervical vertebrae  
06211 Thoracic vertebrae  
06212 Lumbar vertebrae  
06213 Sacrum.  
06214 Pelvis.  
06215 Pelvic organs.  
06216 Abdomen  
06217 Thorax wall.  
06218 Mediastinum.  
06219 Soft tissue: Back.  
06220 Left shoulder  
06221 Right shoulder  
06222 Both hips  
06223 Left hip  
06224 Right hip  
06225 Left upper arm  
06226 Right upper-arm  
06227 Left elbow  
06228 Right elbow  
06229 Left fore-arm  
06230 Right fore-arm  
06231 Left wrist and hand  
06232 Right wrist and hand  
06233 Left upper-leg  
06234 Right upper-leg  
06235 Left knee  
06236 Right knee  
06237 Left lower-leg  
06238 Right lower-leg  
06239 Left ankle  
06240 Right ankle

**Magnetic resonance imaging: per anatomical region:**

	<u>Image Grp</u>	<u>Ana Grp</u>
06241 Left foot	D	B
06242 Right foot	D	B

**Magnetic resonance angiography**

06250 Brain	D	B
06251 Large vessels: Neck	D	B
06252 Large vessels: Chest	D	B
06253 Large vessels: Abdomen	D	B
06254 Large vessels: Legs	D	B
06255 Heart	D	B

**Low field strength peripheral joint magnetic resonance imaging**

06270 Low field strength peripheral joint examination (feet, knees, hands, and elbows), in dedicated limb units not able to perform body, spine, or head examinations	B	B
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# Ambulatory and Theatre Procedure

## Inhalation sedation

Proc Grp Ana Grp

### Inhalation sedation

- 00203 Use of analgesic nitrous oxide for alcohol and other withdrawal states: First quarter-hour or part thereof  
00204 Per additional quarter-hour or part thereof

A  
A

### Intravenous treatment (see note: how to charge for intravenous infusions)

- 00205 Intravenous infusions (cutdown or push-in) (patients under two years): Cutdown and/or insertion of cannula - chargeable once per 24 hours  
00206 Intravenous infusions (push-in) (patients over two years): Insertion of cannula - chargeable once per 24 hours  
00207 Intravenous infusions (cutdown) (patients over two years): Cutdown and insertion of cannula - chargeable once per 24 hours

A  
A  
A

### Venesection

- 00208 Therapeutic venesection (Not to be used when blood is drawn for the purpose of laboratory investigations)  
00209 Umbilical artery cannulation at birth  
00211 Exchange transfusion: First and subsequent (including after-care)

A  
A  
B

### Intravenous treatment with cytostatic agents

- 00213 Chemotherapy: Intramuscular or subcutaneous: per injection. UNDER REVIEW  
00214 Chemotherapy: Intravenous bolus technique: per injection. UNDER REVIEW  
00215 Chemotherapy: Intravenous infusion technique: per injection. UNDER REVIEW

A  
A  
A

### Patch tests

- 00217 First patch  
00219 Each additional patch

A  
A

### Skin prick tests

- 00218 Skin-prick testing: Insect vermin, latex and drugs  
00220 Immediate hypersensitivity testing (Type I reaction): per antigen: Inhalant and food allergens  
00221 Delayed hypersensitivity testing (Type IV reaction): per antigen

A  
A  
A

### Intralesional injection into areas of pathology e.g. keloids

- 00222 Single  
00223 Multiple  
00225 Epilation: per session  
00227 Special treatment of severe acne cases, including draining of cysts, expressing of comedones and/or steaming, abrasive cleaning of skin and UVR per session  
00228 PUVA Treatment: Maximum of 21 treatments  
00229 PUVA: Follow-up or maintenance once a week.  
00230 UVR-Treatment  
00231 UVR-Follow-up - for use of ultraviolet lamp (applied personally by the dermatologist) No charge to be levied if a nurse or physiotherapist applies the ultraviolet lamp

A  
A  
A  
A  
A  
A  
A  
A  
A

A

### Biopsy without suturing

- 00233 First lesion  
00234 Subsequent lesions, each .  
00235 Maximum for multiple additional lesions.  
00237 Deep skin biopsy by surgical incision with local anaesthetic and suturing.

A  
A  
A  
A

A  
A  
A  
A

### Treatment of benign skin lesion by chemo-cryotherapy

- 00241 First Lesion.  
00242 Subsequent lesions, each.  
00243 Maximum for multiple additional lesions.  
00244 Repair of nail bed.

A  
A  
A  
A

A  
A  
A  
A

### Removal of benign lesion by curetting under local or general anaesthesia followed by diathermy and curetting or electrocautery

- 00245 First Lesion.

A

A

		<u>Proc Grp</u>	<u>Ana Grp</u>
<b>Removal of benign lesion by curetting under local or general anaesthesia followed by diathermy and curetting or electrocautery</b>			
00246	Subsequent lesions, each	A	A
<b>Removal of malignant lesions by curetting under local or general anaesthesia followed by electrocautery</b>			
00251	First Lesion.	A	A
00252	Subsequent lesions, each.	A	A
00255	Drainage of subcutaneous abscess onychia, paronychia, pulp space or avulsion of nail.	A	A
00257	Drainage of major hand or foot infection: drainage of major abscess with necrosis of tissue, involving deep fascia or requiring debridement, complete excision of pilonidal cyst or sinus	B	A
00259	Removal of foreign body superficial to deep deep fascia (except hands).	A	A
00261	Removal of foreign body deep to deep fascia (except hands).	A	A
<b>Kurtin planing for acne scarring</b>			
00271	Whole face .	C	B
00273	Extensive.	B	B
00275	Limited .	A	B
00277	Subsequent planing of whole face within 12 months	B	B
00279	Surgical treatment for axillary hyperhidrosis.	B	B
<b>Laser treatment for small skin lesions</b>			
00280	First lesion.	A	A
00281	Subsequent lesions (each).	A	A
00282	Maximum for multiple additional lesions.	A	A
<b>Laser treatment for large skin lesions</b>			
00283	Limited area.	A	A
00284	Extensive area.	B	A
00285	Whole face or other areas of equivalent size or larger	C	A
<b>Major plastic repair</b>			
00289	Large skin grafts, composite skin grafts, large full thickness free skin grafts.	C	C
00290	Reconstructive procedures (including all stages) and skin graft by myocutaneous or fasciocutaneous flap	D	C
00291	Reconstructive procedures (including all stages) grafting by microvascular reanastomosis.	D	C
00292	Distant flaps: First stage.	C	C
00293	Contour grafts (excluding cost of material)	C	C
00294	Vascularised bone graft with or without soft tissue with one or more sets microvascular anastomoses	D	C
00295	Local skin flaps (large, complicated).	C	C
00296	Other procedures of major technical nature.	C	C
00297	Subsequent major procedures for repair of same lesion.	B	C
00298	Lower abdominal demo lipectomy.	C	C
00299	Major abdominal lipectomy with repositioning of umbilicus.	D	C
<b>Stitching of soft-tissue injuries</b>			
00300	Stitching of wound (with or without local anaesthesia): Including normal after-care	A	A
00301	Additional wounds stitched at same session (each)	A	A
00302	Deep laceration involving limited muscle damage	B	B
00303	Deep laceration involving extensive muscle damage	B	B
00304	Major debridement of wound, sloughectomy or secondary suture	A	B
00305	Needle biopsy - soft tissue	A	A
00307	Excision and repair by direct suture; excision nail fold or other minor procedures of similar magnitude	A	A
00308	Each additional small procedure done at the same time	A	A
00310	Radical excision of nailbed	A	A
00311	Excision of large benign tumour (more than 5 cm).	A	A
00313	Extensive resection for malignant soft tissue tumour including muscle	B	B
00314	Requiring repair by large skin graft or large local flap or other procedures of similar magnitude	B	C
00315	Requiring repair by small skin graft or small local flap or other procedures of similar magnitude	A	C

		Proc Grp	Ana Grp
<b>Breasts</b>			
<b>Breasts</b>			
00316	Fine needle aspiration for soft tissue (all areas).	A	
00317	Aspiration of cyst or tumour.	A	A
00319	Mastotomy with exploration, drainage of abscess or removal of mammary implant.	A	A
00321	Biopsy or excision of cyst, benign tumour, aberrant breast tissue, duct papilloma.	B	A
00323	Subareola cone excision of ducts or wedge excision of breast	B	A
00324	Wedge excision of breast and axillary dissection.	C	C
00325	Total mastectomy.	C	C
00327	Total mastectomy with axillary gland biopsy.	C	C
00329	Total mastectomy with axillary gland dissection.	D	C
00330	Nipple and areola reconstruction	B	B
<b>Subcutaneous mastectomy for disease of breast; including reconstruction but excluding cost of prosthesis</b>			
00331	Unilateral.	C	C
00333	Bilateral.	D	C
00334	Removal of breast implant by means of capsulectomy: Per breast	C	C
00335	Implantation of internal subpectoral mammary prosthesis in post mastectomy patients.	C	C
<b>Reduction: mammoplasty for pathological hypertrophy</b>			
00337	Unilateral.	C	C
00339	Bilateral.	D	C
<b>Gynaecomastia</b>			
00341	Unilateral.	B	A
00343	Bilateral.	C	B
<b>Burns</b>			
00351	Major Burns: Resuscitation (including supervision and intravenous therapy - first 48 hours).	D	B
00353	Tangential excision and grafting: Small.	B	B
00354	Tangential excision and grafting: Large.	C	C
<b>Hands (skin)</b>			
00355	Skin flap in acute hand injuries where a flap is taken from a site remote from the injured finger or in cases of advancement flap e.g. Cutler	B	C
00357	Small skin graft in acute hand injury.	A	C
00359	Release of extensive skin contracture and or excision of scar tissue with major skin graft resurfacing	C	C
00361	Z-plasty.	B	B
00363	Local flap and skin graft.	C	B
00365	Cross finger flap (all stages).	C	B
00367	Palmar flap (all stages).	C	B
00369	Distant flap: First stage.	C	B
00371	Distant flap: Subsequent stage (not subject to general modifier 0007)	B	A
00373	Transfer neurovascular island flap.	C	B
00374	Syndactyly: Separation of, including skin graft for one web.	C	B
<b>Dupuytren's contracture</b>			
00375	Fasciotomy.	A	A
00376	Fasclectomy.	C	A
<b>Acupuncture</b>			
00377	Standard acupuncture.	A	
00378	Laser acupuncture using more than 6 points.	A	
00379	Electro-acupuncture.	A	
00380	Scalp acupuncture.	A	
00381	Micro-acupuncture (ear, hand)	A	

**Fractures (reduction under general anaesthetic)****Proc Grp Ana Grp****Fractures (reduction under general anaesthetic)**

- 00389 Humerus.
- 00391 Radius and/or Ulna.
- 00392 Open reduction of both radius and ulna (Modifier 0051 not applicable)
- 00402 Carpal bone.
- 00403 Bennett's fracture-dislocation
- 00405 Metacarpal: Simple.

B	A
B	A
C	A
B	A
A	A
A	A

**Finger phalanx: distal**

- 00411 Compound.

A	A
---	---

**Proximal or middle**

- 00413 Simple.
- 00415 Compound.

A	A
B	A

**Pelvis**

- 00419 Operative reduction and fixation.
- 00421 Femur: Neck or Shaft.
- 00425 Patella.
- 00429 Tibia with or without fibula.
- 00435 Malleolus of ankle.
- 00437 Fracture-dislocation of ankle.
- 00439 Tarsal bones and Os calcis.

D	B
C	A
A	A
B	A
A	A
B	A
B	A

**Toe phalanx**

- 00445 Compound.

A	A
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**Other**

- 00447 Simple.
- 00449 Compound.

A	A
A	A

**Sternum and/or ribs**

- 00452 Open reduction and fixation of multiple fractured ribs for flail chest

C	C
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**Operations for fractures**

- 00465 Fractures involving large joints (includes the item for the relative bone) (this item may not be used as a modifier)
- 00473 Percutaneous insertion plus subsequent removal of Kirschner wires or Steinmann pins (no after-care), modifier 0005 not applicable

D	C
A	B

**Bonegrafting or internal fixation for mal- or non-union**

- 00475 Femur, Tibia, Humerus, Radius and Ulna.
- 00479 Other bones.

D	C
C	C

**Bone grafting**

- 00497 Resection of bone or tumour with or without grafting.

D	C
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**Grafts to cysts**

- 00499 Large bones.
- 00501 Small bones.
- 00503 Cartilage graft.
- 00505 Inter-metacarpal bone graft
- 00507 Removal of autogenous bone for grafting (not subject to general modifier 0005)

C	B
B	B
C	B
C	B
A	A

**Acute or chronic osteomyelitis**

- 00512 Sternum sequestrectomy and drainage: including six weeks after-care

B	A
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**Osteotomy**

- 00514 Sternum: Repair of pectus excavatum.
- 00515 Sternum: Repair of pectus carinatum.
- 00516 Pelvic.

D	B
D	B
D	B



		<u>Proc Grp</u>	<u>Ana Grp</u>
<b>Osteotomy</b>			
00521	Femoral: Proximal.	D	B
<b>Knee region</b>			
00523	Children.	B	B
00527	Adults.	D	B
00528	Os Calcis (Dwyer operation).	B	C
00530	Metacarpal and phalanx: Corrective for mal-union or rotation	B	C
00532	Rotation osteotomies of the Radius, Ulna or Humerus	C	C
00533	Osteotomy, single metatarsal	A	A
00534	Multiple metatarsal osteotomies.	C	B
<b>Exostosis</b>			
00535	Exostosis: Excision: Readily accessible sites.	A	A
00537	Exostosis: Excision: Less accessible sites.	B	A
<b>Biopsy</b>			
00539	Needle Biopsy: Spine (no after-care), modifier 0005 not applicable.	A	A
00541	Needle Biopsy: Other sites (no after-care), modifier 0005 not applicable.	A	A
<b>Open</b>			
00543	Readily accessible site.	B	
00545	Less accessible site.	B	
<b>Dislocations</b>			
00547	Clavicle: either end.	A	A
00549	Shoulder.	A	A
00551	Elbow.	A	A
00552	Wrist.	B	A
00553	Peritunar trans-scaphoid fracture dislocation	B	A
00555	Lunate.	B	A
00556	Carpo-metacarpo dislocation	A	A
00557	Metacarpo-phalangeal and interphalangeal (hand)	A	A
00559	Hip.	B	A
00561	Knee.	B	A
00563	Patella.	A	A
00565	Ankle.	B	A
00567	Sub-Talar dislocation.	B	A
00569	Intertarsal or Tarsometatarsal or Midtarsal.	B	A
00571	Metatarsophalangeal and interphalangeal joints (foot)	A	A
<b>Operations for dislocations</b>			
00578	Recurrent dislocation of shoulder	C	B
00579	Recurrent dislocation of all other joints.	C	B
<b>Capsular operations</b>			
00582	Capsulotomy or arthrotomy or biopsy or drainage of joint: Small joint (including three weeks after-care)	A	A
00583	Capsulotomy or arthrotomy or biopsy or drainage of joint: Large joint (including three weeks after-care).	B	A
00585	Capsulectomy digital joint.	B	A
00586	Multiple percutaneous capsulotomies of metacarpophalangeal joints.	B	A
00587	Release of digital joint contracture.	B	B
<b>Synovectomy</b>			
00589	Digital joint.	B	B
00592	Large joint.	C	C
00593	Tendon synovectomy.	B	C

		Proc Grp	Ana Grp
<b>Arthrodesis</b>			
<b>Arthrodesis</b>			
00597	Shoulder.	C	C
00598	Elbow.	C	C
00599	Wrist.	C	C
00600	Digital joint.	B	C
00601	Hip.	D	C
00602	Knee.	C	C
00603	Ankle.	C	C
00604	Sub-talar.	B	C
00605	Stabilization of foot (triple-arthrodesis).	C	C
00607	Mid-tarsal wedge resection	C	C
<b>Arthroplasty</b>			
00614	Debridement large joints	C	B
00615	Excision medial or lateral end of clavicle.	B	B
00617	Shoulder: Acromioplasty.	C	B
00619	Shoulder: Partial replacement	D	C
00620	Shoulder: Total replacement.	D	C
00621	Elbow: Excision head of radius.	B	B
00622	Elbow: Excision.	C	C
00623	Elbow: Partial replacement	C	C
00624	Elbow: Total replacement.	D	C
00625	Wrist: Excision distal end of ulna.	B	B
00626	Wrist: Excision single bone	B	B
00627	Wrist: Excision proximal row	C	B
00631	Wrist: Total replacement.	C	C
00635	Digital Joint: Total replacement.	C	C
00637	Hip: Total replacement	D	C
00639	Hip: Cup.	D	C
00641	Hip: Prosthetic replacement of femoral head.	D	C
00643	Hip: Girdlestone.	D	C
00645	Knee: Partial replacement	D	C
00646	Knee: Total replacement.	D	C
00649	Ankle: Total replacement	C	C
00650	Ankle: Astragalectomy.	C	B
<b>Miscellaneous (joints)</b>			
00661	Aspiration of joint or intra-articular injection (not including after-care), modifier 0005 not applicable.	A	A
<b>Multiple Intra-articular injections for rheumatoid arthritis</b>			
00663	First joint.	A	A
00665	Additional (each).	A	A
00667	Arthroscopy (excluding after-care), modifiers 0005 and 0013 not applicable.	A	A
00669	Manipulation large joint under general anaesthetic (not including after-care), modifier 0005 not applicable: Hip	A	A
00673	Meniscectomy or operation for other internal derangement of knee.	B	B
<b>Joint ligament reconstruction or suture</b>			
00675	Ankle: Collateral.	C	B
00677	Knee: Collateral.	C	B
00678	Knee: Cruciate.	C	B
00679	Ligament augmentation procedure of knee.	D	B
00680	Digital joint ligament.	B	B

**Specific amputations**

**Specific amputations**

- 00682 Fore-quarter amputation.
- 00683 Through shoulder.
- 00685 Upper arm or fore-arm.
- 00687 Partial amputation of the hand: One ray.
- 00691 Part of or whole of finger.
- 00693 Hindquarter amputation.
- 00695 Through hip joint region.
- 00697 Through thigh
- 00699 Below knee, through knee or Syme.
- 00701 Trans metatarsal or trans tarsal.
- 00703 Foot: One ray.
- 00705 Toe.

<u>Proc Grp</u>	<u>Ana Grp</u>
D	C
C	B
B	B
B	A
A	A
D	B
C	B
B	B
C	B
B	A
B	A
A	A

**Post-amputation reconstruction**

- 00706 Skin flap taken from a site remote from the injured finger or in cases of an advanced flap e.g. Cutler
- 00707 Krukenberg reconstruction
- 00709 Metacarpal transfer.
- 00711 Pollicization of the finger (to include all stages).
- 00712 Toe to thumb transfer.

B	A
C	C
C	B
D	C
D	C

**Investigations :**

- 00713 Electromyography.
- 00714 Electromyographic neuromuscular junctional study, including edrophonium response.
- 00715 Strength duration curve per session.
- 00717 Electrical examination of single nerve or muscle.
- 00718 Oxidative study for mitochondrial function.
- 00721 Voltage integration during isometric contraction
- 00723 Tonometry with edrophonium
- 00725 Isometric tension studies with edrophonium.

B	A
A	A
A	A
A	A
B	
A	A
A	A
A	A

**Cranial reflex study (both early and late responses) supra occulofacial or corneo-facial or fiabellofacial**

- 00727 Unilateral.
- 00728 Bilateral.
- 00729 Tendon reflex time.
- 00730 Limb-brain somatosensory studies (per limb).
- 00731 Visio and audio-sensory studies.
- 00733 Motor nerve conduction studies (single nerve).
- 00735 Examinations of sensory nerve conduction by sweep averages (single nerve).
- 00737 Biopsy for motor nerve terminals and end plates.
- 00739 Combined muscle biopsy with end plates and nerve terminal biopsy.
- 00740 Muscle fatigue studies.
- 00741 Muscle biopsy.
- 00742 Global fee for all muscle studies, including histochemical studies

A	A
A	A
A	A
A	
A	
A	
A	A
A	A
A	B
A	A
A	B
C	

**Decompression operations**

- 00743 Major compartmental decompression.
- 00744 Fasciotomy only.

B	A
A	A

**Muscle and tendon repair**

- 00745 Biceps humeri.
- 00746 Removal of calcification in Rotator cuff.
- 00747 Rotator cuff.
- 00755 Infrapatellar or quadriceps tendon

B	B
B	A
B	B
B	B

		Proc Grp	Ana Grp
<b>Muscle and tendon repair</b>			
00757	Achilles tendon.	B	B
00759	Other single tendon.	B	A
00763	Tendon or ligament injection	A	A
<b>Flexor tendon suture</b>			
00767	Primary (per tendon).	B	A
00769	Secondary (per tendon)	C	A
<b>Extensor tendon suture</b>			
00771	Primary (per tendon).	B	A
00773	Secondary (per tendon).	B	A
00774	Repair of Boutonniere deformity or Mallet finger.	B	B
<b>Tendon graft</b>			
00775	Free tendon graft.	C	C
00776	Reconstruction of pulley for flexor tendon.	A	B
<b>Finger</b>			
00777	Flexor.	C	C
00779	Extensor.	B	C
00780	Two stage flexor tendon graft using silastic rod.	C	C
<b>Tenolysis</b>			
00781	Tendon freeing operation, except where specified elsewhere	B	B
00782	Carpal tunnel syndrome.	B	B
00783	De Quervain.	A	B
00784	Trigger finger.	A	B
00785	Flexor tendon freeing operation following free tendon graft or suture.	C	B
00787	Extensor tendon freeing operation following graft or suture	B	B
00788	Intrinsic tendon release per finger .	B	B
00789	Central tendon tenotomy for Boutonniere deformity	B	B
<b>Tenodesis</b>			
00790	Digital joint.	B	A
<b>Muscle tendon and fascia transfer</b>			
00791	Single tendon transfer.	B	B
00792	Multiple tendon transfer.	B	C
00793	Hamstring to quadriceps transfer.	B	C
00794	Pectoralis major or Latissimus dorsi transfer to biceps tendon	D	C
00795	Tendon transfer at elbow	B	C
00796	Iliopsoas at hip.	C	C
00797	Knee (Eggers).	B	C
<b>Hand tendons</b>			
00803	Single tendon transfer (first)	B	B
00809	Substitution for intrinsic paralysis of hand.	C	C
00811	Opponens transfers.	B	C
<b>Muscle slide operations and tendon lengthening</b>			
00812	Percutaneous Tenotomy: All sites.	A	A
00813	Torticollis.	B	B
00815	Scalenotomy.	B	B
00817	Scalenotomy with excision of first rib.	C	B
00821	Tennis elbow.	B	C
00823	Excision or slide for Volkmann's Contracture.	C	C
00825	Hip: Open muscle release.	B	C

**Muscle slide operations and tendon lengthening**

00829 Knee: Quadricepsplasty.  
00831 Knee: Open tenotomy.  
00835 Calf.  
00837 Open elongation tendon Achilles.  
00845 Foot: Plantar fasciotomy.  
00846 Foot: Postero-medial release for club-foot.

Proc Grp	Ana Grp
C	B
B	B
B	B
B	B
B	A
C	C

**Excision**

00847 Semimembranosus.  
00849 Prepatellar.  
00851 Olecranon.  
00853 Small bursa or ganglion.  
00855 Compound palmar ganglion or synovectomy.  
00857 Aspiration or injection (no after-care), modifier 0005 not applicable

B	B
A	A
A	A
A	A
B	A
A	A

**Leg equalisation and congenital hips and feet**

00859 Leg shortening.  
00861 Leg lengthening.  
00863 Epiphysiodesis at one level.

D	C
D	C
B	C

**Initial non-operative reduction and application of plastercast**

00865 One hip.  
00867 Two hips.  
00868 Open reduction of congenital dislocation of the hip  
00869 Subsequent plaster

B	A
C	A
C	C
A	

**Manipulation and plaster**

00873 One foot.

A	A
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**Removal of internal fixatives or prosthesis**

00883 Removal of internal fixatives or prosthesis: Readily accessible.  
00884 Removal of internal fixatives or prosthesis: Less accessible  
00885 Removal of prosthesis for infection soon after operation

A	
B	
B	

**Plasters (exclusive of after-care)**

00887 Limb cast (excluding after-care) (modifier 0005 not applicable).  
00889 Spica, plaster jacket or hinged cast brace (excluding after-care).  
00891 Tumbuckle cast (excluding after-care).  
00893 Adjustment or repair of tumbuckle cast (excluding after-care).

A	A
A	B
A	B
A	A

**Toes: multiple claw toes: radical operation**

00897 One foot.  
00901 Tenotomy extensor tendons  
00903 Hammer toe or overlapping toe  
00905 Filleting toe or syndactyly.

B	C
A	C
A	C
A	C

**Big toe**

00906 Arthrodesis Hallux.  
00907 Hallux Valgus: Bunionectomy  
00909 Excision arthroplasty.  
00910 Prosthetic replacement big toe.  
00911 Osteotomy first metatarsal including bunionectomy.

B	B
B	B
B	B
C	B
B	B

**Reimplantations**

00912 Replant of amputated upper limb proximal to wrist joint  
00913 Replantation of thumb.  
00914 Replantation of a single digit (to be motivated), for multiple digits, modifier 0005 applicable.

D	C
D	C
D	C

		Proc Grp	Ana Grp
<b>Reimplantations</b>			
00915	Replantation operation through the palm.	D	C
<b>Tumours</b>			
00919	Epidermoid cysts.	A	A
00920	Ganglion or fibroma.	A	A
00921	Nodular synovitis (Giant cell tumour of tendon sheath)	B	A
<b>Removal of foreign bodies requiring incision</b>			
00922	Under local anaesthetic.	A	A
00923	Under general or regional anaesthetic.	A	A
<b>Crushed hand injuries</b>			
00924	Initial extensive soft tissue toilet under general anaesthetic (sliding scale).	A	A
00925	Subsequent dressing changes under general anaesthetic	A	B
<b>Spine</b>			
00927	Excision of one vertebral body, for a lesion within the body (no decompression)	C	C
00928	Excision of each additional vertebral segment for a lesion within the body (no decompression)	C	C
00929	Manipulation of spine under general anaesthetic: (no after-care), modifier 0005 not applicable.	A	B
00930	Posterior osteotomy of spine: One vertebral segment	D	C
00931	Posterior spinal fusion: One level.	D	C
00932	Posterior osteotomy of spine: Each additional vertebral segment	D	C
00933	Anterior spinal osteotomy with disc removal: One vertebral segment	D	C
00934	Spinal fusion: Multiple levels	D	C
00935	Occipito-cervical fusion.	D	C
00936	Anterior spinal osteotomy with disc removal: Each additional vertebral segment	D	C
00937	Sacro-iliac fusion.	C	C
00938	Anterior fusion base of skull to C2	D	C
00939	Trans-abdominal anterior exposure of the spine for spinal fusion only if done by a second surgeon	C	B
00940	Trans-thoracic anterior exposure of the spine if done by a second surgeon	C	B
00941	Anterior interbody fusion: One level	D	C
00942	Anterior interbody fusion: Each additional level	D	C
00944	Posterior fusion: Occiput to C2	D	C
00945	Lumbar discectomy: Multiple levels on both sides.	C	C
00946	Posterior spinal fusion: Each additional level	D	C
00947	Surgical removal cervical or thoracic disc: One level	C	C
00948	Posterior interbody lumbar fusion: One level	D	C
00949	Surgical removal cervical or thoracic disc: Multiple levels	D	C
00950	Posterior interbody lumbar fusion: Each additional interspace	D	C
00951	Removal disc plus spinal fusion: One level.	D	C
00953	Removal disc plus spinal fusion: Multiple levels.	D	C
00959	Excision of coccyx.	B	B
00961	Costo-transversectomy.	C	B
00963	Antero-lateral decompression of spinal cord or anterior debridement	D	C
<b>Spinal deformities</b>			
00952	Posterior fusion for spinal deformity: Up to 6 levels	D	A
00954	Posterior fusion for spinal deformity: 7 to 12 levels	D	A
00955	Posterior fusion for spinal deformity: 13 or more levels	D	A
00956	Anterior fusion for spinal deformity 2 or 3 levels	D	A
00957	Anterior fusion for spinal deformity: 4 to 7 levels	D	A
00958	Anterior fusion for spinal deformity: 8 or more levels	D	A
00973	Spinal fusion.	D	C
00975	Internal mechanical fixation and spinal fusion	D	C

**Spinal deformities**

00976	Internal mechanical fixation by using Harrington/Zielke/or similar procedure and spinal fusion with sub-laminal wires	D	C
00977	Cotrel-Dubboiset/or similar procedure (8 to 10 hooks) and spinal fusion	D	C
00978	Internal mechanical fixation without fusion.	D	C
00979	Revision of fusion and repair of pseudo-arthrosis at one or more levels: Posterior approach	D	C
00981	Osteotomy of posterior elements and fusion.	D	C
00983	Osteotomy, excision or release of anterior spinal elements	D	C
00984	Dwyer type of procedure.	D	C
00985	Removal of internal mechanical fixation.	B	C
00986	Removal of internal mechanical fixation: Multiple levels .	B	C

**All spinal problems**

00943	Laminectomy with decompression of nerve roots and disc removal: One level.	C	C
00960	Posterior non-segmental instrumentation	C	B
00962	Posterior segmental instrumentation : 2 to 6 vertebrae	C	B
00964	Posterior segmental instrumentation: 7 to 12 vertebrae	C	B
00966	Posterior segmental instrumentation: 13 or more vertebrae	C	B
00968	Anterior instrumentation: 2 to 3 vertebrae	C	B
00969	Skull or skull-femoral traction including two weeks after-care	B	
00970	Anterior instrumentation: 4 to 7 vertebrae	C	B
00971	Halo-splint and POP jacket including two weeks after-care	B	
00972	Anterior instrumentation: 8 or more vertebrae	C	B
00974	Additional pelvic fixation of instrumentation other than sacrum	B	B
05750	Reinsertion of instrumentation	D	B
05751	Removal of posterior non-segmental instrumentation	C	B
05752	Removal of posterior segmental instrumentation	C	B
05753	Removal of anterior instrumentation	C	B
05755	Laminectomy for spinal stenosis (exclude discectomy, foraminotomy and spondylolisthesis): One or two levels	D	A
05756	Laminectomy with full decompression for spondylolisthesis (Gill procedure)	D	A
05757	Laminectomy for decompression without foraminotomy or discectomy more than two levels	D	A
05758	Laminectomy with decompression of nerve roots and disc removal: Each additional level	D	A
05759	Laminectomy for decompression discectomy etc., revision operation	D	B
05760	Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: One level	D	A
05761	Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: Each additional level	D	A
05763	Anterior disc removal and spinal decompression cervical: One level	D	A
05764	Anterior disc removal and spinal decompression cervical: Each additional level	D	A
05765	Vertebral corpectomy for spinal decompression: One level	D	A
05766	Vertebral corpectomy for spinal decompression: Each additional level	D	A

**Facial bone procedures**

00987	Repair of orbital floor (blowout fracture).	C	C
00988	Genioplasty.	C	C

**Open reduction and fixation of central mid-third facial fracture with displacement**

00989	Le Fort I.	C	B
00990	Le Fort II.	D	C
00991	Le Fort III.	D	C
00992	Le Fort I Osteotomy.	D	C
00993	Palatal Osteotomy.	D	C
00994	Le Fort II Osteotomy (team fee).	D	C
00995	Le Fort III Osteotomy (team fee).	D	C

**Mandible: fractured nose and zygoma****Proc Grp Ana Grp****Mandible: fractured nose and zygoma**

00997	Open reduction and fixation.	D	C
00999	Closed reduction by inter-maxillary fixation.	C	C
01001	Temporo-mandibular joint: Reconstruction for dysfunction	C	C
01003	Manipulation: Immobilisation and follow-up of fractured nose.	A	A
01007	Mandibulectomy.	D	C
01009	Maxillectomy	D	C
01011	Bone graft to mandible.	C	C
01012	Adjustment of occlusion by ramisection.	C	C
01015	Fracture of arch of zygoma with displacement requiring operative manipulation but not including associated fractures, recent fractures (within four weeks)	B	C
01017	Fracture of arch of zygoma with displacement requiring operative manipulation but not including associated fractures; (after four weeks)	C	C

**Nose and sinuses**

01019	Nasendoscopy in rooms with either rigid or flexible endoscope (may only be charged for together with a first consultation)	A	
01020	Septum perforation repair, by any method.	B	C
01022	Functional reconstruction of nasal septum.	B	C
01024	Insertion of silastic obturator into nasal septum perforation (excluding material)	A	B
01025	Intranasal antrostomy, uni- or bilateral.	A	B
01027	Dacryocystorhinostomy.	C	B
01029	Turbinectomy, uni- or bilateral	A	B
01030	Endoscopic turbinectomy: laser or microdebrider	B	B
01031	Removal of single nasal polyp at rooms (at initial consultation only)	A	
01033	Removal of multiple polyps in hospital under general anaesthetic	A	B
01034	Autogenous nasal bone transplant: Bone removal included	B	C
01035	Functional endoscopic sinus surgery: Unilateral	B	C
01036	Bilateral functional endoscopic sinus surgery.	C	C

**Diathermy to nose or pharynx exclusive of consultation fee, uni- or bilateral**

01037	Under local anaesthetic.	A	
01039	Under general anaesthetic	A	B

**Severe epistaxis, requiring hospitalisation**

01041	Anterior plugging (including after-care).	A	B
01043	Anterior and posterior plugging (including after-care)	A	B
01045	Ligation anterior ethmoidal artery.	A	B
01047	Caldwell-Luc operation (unilateral).	B	B
01049	Ligation internal maxillary artery.	B	B
01050	Vidian neurectomy (transantral or transnasal).	B	B
01051	Removal nasopharyngeal fibroma.	D	C
01052	Instrumental examination of the nasopharynx including biopsy under general anaesthetic.	A	B
01053	Frontal sinus drainage only	B	B
01054	Antroscopy through the canine fossa (uni- or bilateral)	A	
01055	External frontal ethmoidectomy	C	C
01057	External ethmoidectomy and/or sphenoidectomy	C	C
01058	Sublabial transseptal sphenoidotomy.	B	C
01059	Frontal osteomyelitis.	C	B
01060	Obliteration of frontal sinus.	C	B
01061	Lateral rhinotomy.	C	C
01063	Removal of foreign bodies from nose at rooms.	A	
01065	Removal of foreign body from nose under general anaesthetic	A	A
01067	Proof puncture at rooms (unilateral).	A	A



**Severe epistaxis, requiring hospitalisation**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01069 Proof puncture, uni- or bilateral under general anaesthetic	A	A
01071 Proetz treatment (consultation fee only to be charged for first treatment).	A	
01077 Septum abscess, at rooms, including after-care.	A	
01079 Septum abscess, under general anaesthetic.	A	A
01081 Oro-antral fistula (without Caldwell-Luc).	B	B
01083 Choanal atresia: Intranasal approach.	B	B
01084 Choanal atresia: Transpalatal approach.	C	C
01085 Total reconstruction of the nose: including reconstruction of nasal septum (septumplasty) nasal pyramid (osteotomies) and nose	D	C
01087 Sub-total reconstruction consisting of any two of the following: septumplasty, osteotomies, nasal tip reconstruction	C	B

**Forehead rhinoplasty (all stages)**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01089 Total.	D	C
01091 Partial.	D	C
01093 Rhinophyma without skin graft	B	B
01095 Full nasal reconstruction for secondary cleft lip deformity	D	C
01097 Partial nasal reconstruction for cleft lip deformity	C	B
01099 Columella reconstruction or lengthening.	B	B

**Throat**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01101 Tonsillectomy (dissection of tonsils)	B	B
01102 Laser tonsillectomy	B	B
01105 Removal of adenoids	A	B
01106 Laser assisted functional reconstruction of palate and uvula: In the rooms (+ item 3201 for hire of laser) (a 25% reduction in applicable should further follow-up operations be performed by the same surgeon)	B	B
01107 Opening of quinsy - at rooms.	A	B
01108 Laser assisted functional reconstruction of palate and uvula: In rooms (+ item 3201 for hire of laser): Follow-up operation performed by the same surgeon	B	A
01109 Opening of quinsy under general anaesthetic	A	B
01110 Ludwig's Angina: Drainage.	A	B
01111 Post tonsillectomy or adenoidectomy haemorrhage	A	B
01112 Pharyngeal pouch operation.	C	C
01113 Retropharyngeal abscess internal approach.	A	B
01115 Retropharyngeal abscess external approach.	B	B
01116 Functional reconstruction of palate and uvula	B	C

**Larynx**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01117 Laryngeal intubation.	A	
01118 Laryngeal stroboscopy with video capture	A	B

**Laryngectomy**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01119 Laryngectomy without block dissection of the neck.	D	C
01123 Botulinum toxin injection for adductor dysphonia (+ item 0201 + item 0202).	A	
01125 Endolaryngeal operations (with full details of the procedure performed)	A	B
01126 Post laryngectomy for voice restoration.	B	C
01127 Tracheotomy.	B	B
01128 Endolaryngeal operations using a laser.	B	B
01129 External laryngeal operation e.g. laryngeal stenosis, laryngocoele, abductor paralysis, laryngo- fissure.	C	C

**Direct laryngoscopy**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01130 Diagnostic laryngoscopy including biopsy (also to be applied when a flexible fibre-optic laryngoscope was used)	A	B
01131 Plus foreign body removal	B	B

**Bronchoscopy**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01132 Diagnostic bronchoscopy	B	B
01133 With removal of foreign body.	B	B

**Bronchoscopy**

- 01134 Bronchoscopy with use of laser.
- 01135 With bronchography.
- 01136 Nebulisation (in rooms)
- 01138 Thoracotomy: for broncho-pleural fistula(including ruptured bronchus, any cause)

**Proc Grp Ana Grp**

B	B
B	B
A	A
D	C

**Pleura**

- 01139 Pleural needle biopsy: (no after-care), modifier 0005 not applicable
- 01141 Insertion of intercostal catheter (under water drainage)
- 01142 Intra-pleural block.
- 01143 Paracentesis chest: Diagnostic.
- 01145 Paracentesis chest: Therapeutic.
- 01147 Pneumothorax: Induction (diagnostic).
- 01149 Pleurectomy.
- 01151 Decortication of lung.
- 01153 Chemical pleurodesis (instillation silver nitrate, tetracycline, talc, etc)

A	A
A	B
A	B
A	A
A	A
A	A
C	C
D	C
A	A

**Surgical**

- 01155 Needle biopsy lung: (no after-care) modifier 0005 not applicable
- 01157 Pneumonectomy.
- 01159 Pulmonary lobectomy.
- 01161 Segmental lobectomy.

A	A
D	C
D	C
D	C

**Excision tracheal stenosis**

- 01163 Cervical.
- 01164 Intra thoracic.
- 01167 Thoracoplasty associated with lung resection or done by the same surgeon within 6 weeks.
- 01168 Thoracoplasty: Complete.
- 01169 Thoracoplasty: Limited/osteoplastic.
- 01171 Drainage empyema (including six weeks after treatment)
- 01173 Drainage of lung abscess (including six weeks after treatment)
- 01175 Thoracotomy (limited): For lung or pleural biopsy.
- 01177 Major: Diagnostic, as for inoperable carcinoma
- 01179 Thoracoscopy.
- 01181 Unilateral lung transplant.
- 01182 Harvesting donor lung: Unilateral.

D	C
D	C
C	C
C	C
C	C
C	C
C	C
B	C
C	C
B	C
D	C
B	B

**Excision or plication of emphysematous cyst**

- 01183 Unilateral.
- 01184 Bilateral synchronous (Median sternotomy).
- 01185 Re-exploration following sternal dehiscence.

C	C
D	C
B	C

**Pulmonary function tests**

- 01186 Flow volume test: Inspiration/expiration.
- 01188 Flow volume test: Inspiration/expiration pre- and post bronchodilator (to be charged for only with first consultation - thereafter item 1186 applies)
- 01189 Forced expirogram only
- 01191 N2 single breath distribution
- 01192 Peak expiratory flow only.
- 01193 Closed circuit or body plethysmograph determination of F.R.C.
- 01195 Airway resistance, body plethysmograph.
- 01196 Airway resistance, body plethysmograph: pre- and post bronchodilator (to be charged for only with first consultation - thereafter item 1195 applies)
- 01197 Compliance and resistance, using oesophageal balloon
- 01198 Histamine/metacholine inhalation test.

A	B
A	B
A	A
A	A
A	A
A	B
A	B
A	B
A	B
A	B

		Proc Grp	Ana Grp
<b>Pulmonary function tests</b>			
01199	Cardio-respiratory exercise test (treadmill or cycle to be charged for separately) with recording of V.E., V.O <sub>2</sub> , H.R., R.R., ECG and oximetry	A	B
01200	C.O. diffusion test, single breath or steady state.	A	B
01201	Maximum inspiratory/expiratory pressure.	A	A
<b>Neonatal procedures</b>			
01202	Insertion of central venous catheter via peripheral vein in neonates.	A	B
<b>Ventilation</b>			
01215	Insertion of arterial pressure cannula.	A	A
01216	Insertion of Swan Ganz catheter for haemodynamic monitoring.	A	B
01217	Insertion of central venous line via peripheral vein.	A	A
01218	Insertion of central venous line via subclavian or jugular veins.	A	A
01221	Professional fee for managing a patient-controlled analgesic pump: Once off charge per patient.	A	B
<b>Mediastinal procedures</b>			
01222	Mediastinal tumours.	D	C
01223	Mediastinoscopy.	B	B
01224	Mediastinotomy.	B	C
01225	Excision of malignant chest wall tumours involving sternum and multiple ribs.	D	C
01226	Removal of single rib with a lesion.	D	C
<b>General practitioner's fee for the taking of an ecg only</b>			
01228	Without effort: 1/2 (item 1232).	A	
01229	Without and with effort: 1/2 (item 1233).	A	
<b>Physician's fee for interpreting an ecg</b>			
01230	Without effort.	A	
01231	Without and with effort.	A	
<b>Electrocardiogram</b>			
01232	Without effort.	A	
01233	Without and with effort.	A	
01234	Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated	A	
01235	Multi-stage treadmill test.	A	
01236	ECG without effort: Under 4 years.	A	
01239	24 Hour ambulatory ECG monitoring (holter): Interpretation	A	
01240	Signal averaged electrocardiogram.	B	
01241	X-ray Screening: Chest.	A	
01242	X-ray screening: Prosthetic valves.	A	
01244	Two week event triggered ambulatory ECG monitoring: Interpretation.	A	
01245	Angiography cerebral: First two series.	A	B
01246	Angiography peripheral: Per limb.	A	B
01247	Cardioversion for arrhythmias (any method) with doctor in attendance	B	B
01248	Paracentesis of pericardium.	A	B
<b>Cardiac catheterisation</b>			
01249	Right and left cardiac catheterisation without coronary angio-graphy (with or without biopsy).	B	C
01250	Endomyocardial biopsy.	B	B
01251	Transseptal puncture.	B	B
01252	Left heart catheterisation with coronary angiography (with or without biopsy).	B	C
01253	Right heart catheterisation (with or without biopsy)	B	C
01254	Catheterisation of coronary artery bypass grafts and/or internal mammary grafts.	A	C
01255	Tilt test.	A	
<b>Electrophysiological study</b>			
01256	Ventricular stimulation study.	C	C

**Electrophysiological study**

01257 Full electrophysiological study

Proc Grp	Ana Grp
D	C

**Pacemakers**

01258 Permanent - single chamber.

C B

01259 Permanent - dual chamber.

C B

01260 AV nodal ablation.

D C

01261 Accessory pathway ablation.

D C

01262 Electrophysiological mapping.

D

01263 Insertion transvenous implantable defibrillator.

D C

01264 Test for implantable transvenous defibrillator

B C

01265 Renewal of pacemaker unit only, team fee.

B B

01266 Resiting pacemaker generator.

B

01267 Repositioning of catheter electrode.

A B

01268 Threshold testing: Own equipment.

A

01269 Threshold testing: Hospital equipment.

A

01270 Programming of atrio-ventricular sequential pacemaker

A

01273 Insertion of temporary pacemaker (modifier 0005 not applicable).

B B

01275 Termination of arrhythmia - programmed stimulation and lead insertion of temporary pacer.

C B

**Percutaneous transluminal angioplasty**

01276 First cardiologist: single lesion

C C

01277 Second cardiologist: single lesion.

B C

01278 First cardiologist: second lesion.

A C

01279 Second cardiologist: second lesion.

A C

01280 First cardiologist: third or subsequent lesions (each)

A C

01281 Second cardiologist: third or subsequent lesions (each)

A C

01282 Use of balloon procedures including - first cardiologist

C C

- Atrial septostomy

- Pulmonary valve valvuloplasty

- Aortic valve valvuloplasty

- Coarctation dilation

- Mitral valve valvuloplasty.

01283 Use of balloon procedure as in item 1282 - second cardiologist

B C

01284 Atherectomy: single lesion: first cardiologist.

D

01285 Atherectomy: single lesion: second cardiologist.

C

01286 Insertion of intravascular stent: first cardiologist.

B

01287 Insertion of intravascular stent: second cardiologist

A

01290 Use of balloon procedures including - first paediatric cardiologist ("33")

D

- Arterial septostomy

- Pulmonary valve valvuloplasty

- Aortic valve valvuloplasty

- Coarctation dilation

- Mitral valve valvuloplasty

- Closure atrial septal defect

- Closure of patent ductus arteriosus

01291 Use of balloon procedure as in item 1290 - second paediatric cardiologist ("33")

C

**Paediatric cardiac catheterisation**

01288 Paediatric cardiac catheterisation

C C

01289 Paediatric cardiac catheterisation: Infants below the age of one year.

C C

**Cardiac surgery**

01294 Patent ductus arteriosus.

D C

01295 Pericardiectomy for constrictive pericarditis.

D C

01297 Coarctation of aorta.

D C

01299 Systemo-pulmonary anastomosis.

D C

**Cardiac surgery**

	<u>Proc Grp</u>	<u>Ana Grp</u>
01301 Mitral valvotomy: Closed heart technique.	D	C
01302 Heart transplant.	D	C
01303 Harvesting donor heart.	B	B
01305 Operative implantation of cardiac pacemaker by thoracotomy	C	C
01307 Re-exploration after cardiac-surgery.	C	C
01308 Heart and lung transplant.	D	C
01309 Harvesting donor heart and lungs.	B	B
01311 Pericardial drainage.	B	C

**Open heart surgery**

01312 Evaluation of coronary angiogram by cardio-thoracic surgeon	A	
01320 Repeat open heart surgery (additional fee above procedure fee)	C	C
01321 Stand-by fee for coronary angioplasty.	A	B
01322 Attendance at other operations or monitoring at bedside, by physician e.g. heart block etc.: Per hour.	A	

**Atrial septal defect**

01323 Ostium secundum.	D	C
01325 Sinus venosus or ostium primum.	D	C
01327 Ventricular septal defect.	D	C
01329 Fallof's tetralogy.	D	C
01330 Pulmonary stenosis.	D	C
01331 Transposition of large vessels (venous repair).	D	C
01332 Transposition of great arteries (arterial repair).	D	C
01333 Ebstein's Anomaly.	D	C
01335 Total anomalous venous drainage.	D	C
01337 Creation of atrial septal defect by thoracotomy with or without cardiac bypass.	D	C
01338 Fontan type repair	D	C

**Acquired conditions**

01339 Mitral valve replacement.	D	C
01340 Mitral valvuloplasty	D	C
01341 Aortic valve replacement.	D	C
01342 Tricuspid annulo plasty.	C	C
01343 Double valve replacement.	D	C
01344 Acute dissecting aneurysm repair.	D	C
01345 Aortic arch aneurysm repair utilising deep hypothermal and circulatory arrest.	D	C

**Aorta-coronary bypass operation (including interpretation of angiogram)**

01346 Harvesting of saphenous veins: Unilateral (modifier 0005 not applicable).	B	
01347 Harvesting of saphenous veins: Bilateral (modifier 0005 not applicable).	C	
01348 Utilizing saphenous veins.	D	C
01349 Additional arterial implant: any artery.	D	C
01350 Additional double arterial implant: any artery.	D	C
01351 Aorta-coronary bypass operation with valve replacement or excision of cardiac aneurysm	D	C
01352 Cardiac aneurysm.	D	C
01353 Ascending/descending thoracic aortic aneurysm repair	D	C
01354 Arrhythmia surgery.	D	C
01355 Cardiac tumour.	D	C
01356 Insertion and removal of intra-aortic balloon pump (modifier 0005 not applicable).	C	C

**Skin temperature test**

01357 Response to reflex heating.	A	
01359 Response to reflex cooling	A	
01361 Cold sensitivity test.	A	

		Proc Grp	Ana Grp
<b>Skin temperature test</b>			
01363	Oscillometry test.	A	
01365	Sweat test.	A	
01366	Transcutaneous oximetry - single site	A	
01367	Doppler blood tests.	A	
05369	Doppler arterial pressures	A	
05371	Doppler arterial pressures with exercise	A	
05373	Doppler segmental pressures and wave forms	A	
05375	Venous doppler examination (both limbs)	A	
05377	Venous plethysmography	A	
05379	Supra-orbital doppler test	A	
05381	Carotid non-invasive complex tests	A	
<b>Abdominal aorta and iliac artery</b>			
01372	Unruptured	D	C
01373	Ruptured.	D	C
01375	Grafting and/or thrombo-endarterectomy for thrombosis	D	C
01376	Aorta bifemoral graft, including proximal and distal endarterectomy and preparation for anastomosis	D	C
<b>Iliac artery</b>			
01379	Prosthetic grafting and/or Thrombo-endarterectomy	D	C
<b>Peripheral</b>			
01385	Prosthetic grafting.	C	C
01396	Suture major blood vessel (artery or vein) - trauma (major blood vessel are define as aorta, innominate artery, carotid artery and vetebral artery, subclavian artery, axillary artery, iliac artery, common femoral and popliteal artery. The vertebral and popliteal arteries are included because of the relevant inaccessibility of the arteries and difficult surgical exposure.)	C	C
<b>Grafting vein</b>			
01387	Vein grafting proximal to knee joint.	D	C
01388	Distal to knee joint	D	C
01389	Endarterectomy when not part of another specified procedure	C	C
01390	Carotid endarterectomy.	D	C
<b>Embolectomy</b>			
01393	Peripheral embolectomy transfemoral .	C	B
<b>Miscellaneous arterial procedures</b>			
01395	Arterial suture: trauma.	B	B
01397	Profundoplasty.	C	B
01399	Distal tibial (Ankle region).	D	C
01401	Femoro-femoral.	C	C
01402	Carotid-subclavian.	D	C
01403	Axillo-femoral: (Bifemoral + 50%).	D	C
<b>Veins</b>			
01407	Ligation of saphenous vein.	A	A
01408	Placement of Hickman catheter or similar.	B	B
<b>Ligation of inferior vena cava :</b>			
01410	Abdominal.	C	B
<b>"Umbrella" operation on inferior vena cava :</b>			
01412	Abdominal.	B	C
<b>Combined procedure for varicose veins: ligation of saphenous vein, stripping, multiple ligation including of perforating veins as indicated :</b>			
01413	Unilateral.	B	B
01415	Bilateral.	C	B
01417	Extensive sub-fascial ligation of perforating veins.	B	B

	Proc.Grp	Ana.Grp
<b>Combined procedure for varicose veins: ligation of saphenous vein, stripping, multiple ligation including of perforating veins as indicated :</b>		
01419 Lesser varicose vein procedures	A	A
<b>Compression sclerotherapy of varicose veins</b>		
01421 Per injection to a maximum of nine injections per leg (excluding cost of material)	A	
<b>Thrombectomy</b>		
01425 Inferior vena cava (Trans abdominal).	C	C
01427 Ilio-femoral.	C	B
<b>Portal hypertension</b>		
01429 Porto-caval shunt.	D	C
<b>Cardiac rehabilitation</b>		
01431 Phase II: Exercise rehabilitation: Per patient per 60 min session with a maximum of 5 patients per group	A	
01432 Phase III: Exercise rehabilitation: Per patient per 60 min session with a maximum of 10 patients per group	A	
<b>Splenectomy</b>		
01435 Splenectomy (In all cases)	C	C
01436 Splenorrhaphy.	C	C
<b>Excision of lymph node for biopsy</b>		
01439 Neck or axilla.	B	A
01441 Groin.	B	A
01443 Simple excision of lymph nodes for tuberculosis	B	A
<b>Radical excision of lymph nodes of neck: total</b>		
01445 Unilateral.	D	C
01447 Suprahyoid unilateral.	C	C
01449 Radical excision of lymph nodes of axilla.	C	C
<b>Radical excision of lymph nodes of groin</b>		
01451 Ilio-inguinal.	C	C
01453 Inguinal.	C	C
01455 Retroperitoneal lymphadenectomy including pelvic, aortic and renal nodes.	D	C
<b>Bone marrow biopsy</b>		
01457 By trephine.	A	A
01458 Simple aspiration of marrow by means of trocar or cannula	A	
01459 Staging laparotomy for lymphoma (including splenectomy)	C	B
<b>Bone marrow transplantation</b>		
01450 Cryopreservation of bone marrow or peripheral blood stem cells	A	B
01454 Plasma/cell separation using designated cell separator equipment (per hour) (specify time used)	A	B
01456 Preparation of extra-corporeal equipment by the medical practitioner for plasma, platelet and leucocyte pheresis	A	B
<b>Oral cavity</b>		
01463 Surgical biopsy of tongue or palate: Under general anaesthetic.	A	A
01465 Surgical biopsy of tongue or palate: Under local anaesthetic	A	A
01467 Drainage of intra-oral abscess.	A	A
01469 Local excision of mucosal lesion of oral cavity.	A	A
01471 Resection of malignant lesion of buccal mucosa including radical neck dissection (Commando operation), but not including reconstructive plastic procedure	D	C
01475 Cleft palate: Repair primary deformity with or without pharyngoplasty	D	C
01477 Cleft palate: Secondary repair.	C	C
01478 Velopharyngeal reconstruction with myoneurovascular transfer (dynamic repair)	C	A
01479 Velopharyngeal reconstruction with or without pharyngeal flap (static repair).	C	C
01480 Repair of oronasal fistula (large) e.g. distant flap	C	A
01481 Repair of oronasal fistula (small) e.g. trapdoor: One stage or first stage	B	C
01482 Repair of oronasal fistula (large): Second stage	B	A

		Proc Grp	Ana Grp
<b>Oral cavity</b>			
01483	Alveolar periosteal or other flaps for arch closure	B	C
01486	Closure of anterior nasal floor	B	A
<b>Lips</b>			
01485	Local excision of benign lesion of lip.	A	A
01487	Resection for lip malignancy.	B	B
<b>Cleft lip</b>			
01484	Lip adhesion (cleft lip)	B	A
01489	Repair unilateral cleft lip (with muscle reconstruction).	C	B
01490	Repair bilateral cleft lip (with muscle reconstruction) (one of two stages)	C	A
01491	Repair bilateral cleft lip (with muscle reconstruction) (one stage).	D	B
01492	Repair bilateral cleft lip (second stage)	C	A
01493	Total revision of secondary cleft lip deformities.	C	B
01494	Partial revision of secondary cleft lip deformity	B	A
01495	Abbé or Estlander type flap (all stages included).	C	B
01497	Vermilionectomy.	B	B
01499	Lip reconstruction following an injury: Direct repair	B	B
<b>Lip reconstruction following an injury or tumour removal</b>			
01501	Flap repair.	C	B
01503	Total reconstruction (first stage).	C	B
01504	Subsequent stages (see item 0299).	B	B
<b>Tongue</b>			
01505	Partial glossectomy.	C	B
01507	Local excision of lesion of tongue.	A	A
<b>Palate, uvula and salivary glands</b>			
01509	Wide excision of lesion of palate.	B	B
01511	Radical resection of palate (including skin graft).	C	C
01513	Excision of ranula.	A	B
01515	Excision of sublingual salivary gland.	B	C
01517	Excision of submandibular salivary gland.	C	C
01519	Excision of submandibular salivary gland with suprahyoid dissection.	C	C
01521	Excision of submandibular salivary gland: With radical neck dissection.	D	C
01523	Local resection of parotid tumour.	B	B
01525	Partial parotidectomy.	C	C
01527	Total parotidectomy.	C	C
01529	Extracapsular Parotidectomy	D	C
01531	Drainage of parotid abscess.	A	A
01533	Closure of salivary fistula.	B	B
01535	Dilatation of salivary duct.	A	B
01537	Operative removal of salivary calculus.	A	B
01539	Meatotomy: Salivary duct.	A	B
01541	Branchial cyst and/or fistula: Excision.	B	B
01543	Excision of cystic hygroma	B	B
01544	Ludwig's Angina: Drainage	A	B
<b>Oesophagus</b>			
01545	Oesophagoscopy with rigid instrument: First and subsequent	A	B
01547	Oesophageal acid perfusion test	A	
01549	Oesophagoscopy with dilatation of stricture.	B	B
01550	With removal of foreign body.	B	B
01551	With insertion of indwelling oesophageal tube.	B	B



**Oesophagus**

- 01552 Injection of oesophageal varices (endoscopy inclusive)  
01553 Subsequent injection of oesophageal varices (endoscopy inclusive).  
01554 Per-oral small bowel biopsy.  
01555 Repair of tracheal oesophageal fistula and oesophageal atresia.  
01557 Oesophageal dilatation.

**Proc Grp Ana Grp**

B B  
B B  
A B  
D C  
A B

**Oesophagectomy**

- 01559 Two stage.  
01560 Three stage.  
01561 Thoraco-abdominal oesophagogastrectomy .

D C  
D C  
D C

**Hiatus hernia and diaphragmatic hernia repair**

- 01563 With anti-reflux procedure.  
01565 With Collis Nissen oesophageal lengthening procedure  
01566 Private fee: Gastroplasty.  
01567 Bochdalek hernia repair in newborn.  
01568 Hiatus hernia and diaphragmatic repair: Revision after previous repair.  
01569 Heller's operation.  
01575 Insertion of indwelling oesophageal tube - laparotomy  
01578 Oesophageal motility (2 channel + pneumograph)  
01579 Oesophageal substitution (without oesophagectomy) using colon, small bowel or stomach  
01580 Oesophageal motility (3 Channel + pneumograph + pH pull-through)  
01581 Removal of benign oesophageal tumours.  
01582 Oesophageal motility (3 channel + pneumograph - ECG + provocative tests for oesophageal spasm vs. myocardial ischaemia)  
01583 Excision of intrathoracic oesophageal diverticulum.  
01584 24 Hour oesophageal pH studies: Hire fee (Item 0201 applicable for pro-rata of probe: 50 examinations per pH probe)  
01585 24 Hour oesophageal pH studies: Interpretation

D C  
D C  
D C  
C C  
D C  
C C  
C C  
B B  
B C  
D C  
B C  
D C  
C C  
C C  
A A

**Stomach**

- 01587 Upper gastro-intestinal fibre-optic endoscopy - Own equipment  
01588 Plus polypectomy  
01589 Endoscopic control of gastrointestinal haemorrhage from upper gastrointestinal tract, intestines or large bowel by injection of vasoconstrictors and/or scleroses (endoscopic haemostasis) to be added to gastroscopy (item 1587) or colonoscopy (item 1653) : Add  
01591 Upper gastro-intestinal endoscopy with removal of foreign bodies (stomach)  
01593 Augmented histamine test: Gastric intubation with x-ray screening.  
01597 Gastrostomy or Gastrotomy  
01599 Pyloromyotomy (Rammstedt).  
01601 Local excision of ulcer or benign neoplasm

B B  
C B  
B A  
  
B B  
A B  
B B  
B B  
B B

**Vagotomy**

- 01603 Abdominal.  
01604 Thoracic.  
01605 Truncal or selective with drainage procedures.  
01607 Vagotomy and antrectomy  
01609 Highly selective vagotomy.  
01611 Pyloroplasty.  
01613 Gastroenterostomy  
01615 Suture of perforated gastric or duodenal ulcer or wound or injury  
01617 Partial gastrectomy.  
01619 Total gastrectomy  
01621 Revision of gastrectomy or gastro-enterostomy.  
01625 Gastro-oesophageal operation for portal hypertension (Tanner)

C B  
C C  
C B  
D B  
C B  
B B  
B B  
C B  
D C  
D C  
D C  
D C

		<u>Proc Grp</u>	<u>Ana Grp</u>
<b>Duodenum</b>			
<b>Duodenum</b>			
01626	Endoscopic examination of the small bowel beyond the duodenojejunal flexure with biopsy with or without polypectomy with or without arrest of haemorrhage (enteroscopy)	B	A
01627	Duodenal intubation (under X-ray screening)	A	
01629	Duodenal intubation with biliary drainage after gall bladder stimulation	A	
01631	Duodenal intubation: Under three years	A	
<b>Intestines</b>			
01632	H2 breath test (Intestines)	A	
01633	Complete test using lactose or lactulose.	A	
01634	Enterotomy or Enterostomy.	B	B
01635	Intestinal obstruction of the newborn.	C	C
01637	Operation for relief of intestinal obstruction	C	C
01639	Resection of small bowel with enterostomy or anastomosis	C	C
01641	Entero-enterostomy or entero-colostomy for bypass	B	C
01645	Suture of intestine (small or large): Perforated ulcer, wound or injury	B	B
01647	Closure of intestinal fistula	C	B
01649	Excision of Meckel's diverticulum	B	B
01651	Excision of lesion of mesentery.	B	B
01652	Laparotomy for mesenteric thrombosis	D	C
<b>Total fibre-optic colonoscopy</b>			
01653	With own equipment (including biopsy)	B	B
01654	Fibre-optic colonoscopy with removal of polyps: Own equipment.	C	B
01656	Left sided fibre-optic colonoscopy.	B	B
01657	Right or left hemicolectomy or segmental colectomy.	D	C
01658	Reconstruction of colon after Hartman's procedure	C	B
01661	Colotomy: Including removal of tumour or foreign body.	B	B
01663	Total colectomy.	D	C
01665	Colostomy or ileostomy isolated procedure.	B	B
01666	Continent ileostomy pouch (all types).	D	C
01667	Colostomy Closure	C	B
01668	Revision of ileostomy pouch	D	C
01669	Total proctocolectomy and ileostomy.	D	C
01670	Proctocolectomy, ileostomy and ileostomy pouch	D	C
01671	Colomyotomy (Reilly operation)	C	B
<b>Appendix</b>			
01673	Drainage of appendix abscess	C	B
01675	Appendicectomy.	B	B
<b>Rectum and anus</b>			
01676	Fibre-optic sigmoidoscopy	B	A
01677	Sigmoidoscopy: First and subsequent, with or without biopsy.	A	A
01678	Fibre-optic sigmoidoscopy, plus polypectomy.	B	A
01679	Sigmoidoscopy with removal of polyps, first and subsequent	A	A
<b>Proctoscopy with removal of polyps</b>			
01681	First time.	A	A
01683	Subsequent times.	A	A
01685	Endoscopic fulguration of tumour.	A	B
01687	Anterior resection of rectum performed for carcinoma of rectum including excision of any part of proximal colon necessary	D	C
01688	Total mesorectal excision with colo-anal anastomosis and defunctioning enterostomy or colostomy	D	B
01689	Perineal resection of rectum	B	C

**Abdomino-perineal resection of rectum**

Proc Grp Ana Grp

**Abdomino-perineal resection of rectum**

- 01691 Abdominal surgeon.
- 01692 Perineal surgeon.
- 01693 Local excision of rectal tumour (posterior approach)
- 01695 Combined abdomino-anal pull-through procedure for Hirschsprung's disease, rectal agenesis or tumour.

D C  
B  
C B  
D C

**Repair of prolapsed rectum: abdominal**

- 01697 Roscoe Graham Moskovitz
- 01699 Ivalon sponge.
- 01701 Perineal.
- 01703 Thierisch suture.
- 01705 Incision and drainage of peri-anal abscess.
- 01707 Drainage of submucous abscess.
- 01709 Drainage of ischio-rectal abscess.
- 01711 Excision of pelvi-rectal fistula
- 01713 Excision of fistula-in-ano
- 01715 Operation for fissure-in-ano
- 01719 Rubber band ligation of haemorrhoids: per haemorrhoid
- 01721 Sclerosing injection for haemorrhoids: per injection
- 01723 Haemorrhoidectomy.
- 01725 Drainage of external thrombosed pile.
- 01727 Multiple procedures (haemorrhoids, fissure, etc.).
- 01729 Excision of anal skin tags
- 01731 Operation for low imperforate anus.
- 01733 Anoplasty: Y-V-plasty.
- 01735 Anal sphincteroplasty for incontinence.
- 01737 Dilation of ano-rectal stricture.
- 01739 Closure of recto-vesical fistula
- 01741 Closure of recto-urethral fistula
- 01742 Bio-feedback training for faecal incontinence during anorectal manometry performed by doctor

D C  
C C  
C C  
A B  
A A  
A A  
B A  
C B  
B A  
A A  
A A  
A A  
B A  
A A  
B A  
A A  
A C  
B C  
A C  
C C  
C C  
A

**Liver**

- 01743 Needle biopsy of liver.
- 01745 Biopsy of liver by laparotomy.
- 01747 Drainage of liver abscess or cyst.

A A  
B B  
B B

**Hemi-hepatectomy**

- 01749 Right.
- 01751 Left.
- 01753 Partial or segmental hepatectomy.
- 01755 Liver transplant.
- 01756 Harvesting donor hepatectomy.
- 01757 Suture of liver wound or injury.

D C  
D C  
D C  
D C  
C B  
C C

**Biliary tract**

- 01759 Cholecystostomy.
- 01761 Cholecystectomy.
- 01762 Cholecystectomy and operative cholangiogram.
- 01763 With exploration of common bile duct.
- 01765 Exploration of common bile duct: Secondary operation
- 01767 Reconstruction of common bile duct.
- 01769 Cholecysto-enterostomy or gastrostomy.

B B  
C C  
C C  
D C  
D C  
D C  
C B

		Proc Grp	Ana Grp
<b>Biliary tract</b>			
01770	Endoscopic placement of bilioduodenal endoprosthesis (125,00 units for sphincterectomy + 25,00 units for insertion of endoprosthesis)	C	C
01772	Endoscopic placement of a nasobiliary stent.	B	C
01773	Transduodenal sphincteroplasty.	C	C
01774	Balloon dilatation of common bile duct strictures.	B	C
01775	Excision choledochal cyst with reconstruction.	D	C
01777	Porto-enterostomy for biliary atresia.	D	C
<b>Pancreas</b>			
01778	Pancreas: ERCP: Endoscopy + catheterisation of pancreas duct or choledochus.	B	C
01779	Endoscopic exploration of the common bile duct performed following endoscopic retrograde choangiography to be added to ERCP (item 1778) : Add	B	A
01780	Gastric and duodenal intubation.	A	
01781	Procedure (excluding laboratory tests)	A	
01782	Endoscopic sphincterotomy.	B	C
01783	Drainage of pancreatic abscess	C	B
01785	Internal drainage of pancreatic cyst.	C	B
01787	Operative pancreatogram: Add.	A	
01789	Pancreatico-duodenectomy	D	C
01791	Local, partial or subtotal pancreatectomy.	C	C
01793	Distal pancreatectomy with internal drainage.	D	C
01795	Triple anastomosis for carcinoma of pancreas.	C	C
<b>Pneumo-peritoneum</b>			
01797	First.	A	B
01799	Repeat.	A	B
01800	Peritoneal lavage.	A	
01801	Diagnostic paracentesis: Abdomen.	A	
01803	Therapeutic paracentesis: Abdomen.	A	
01807	Add to open procedure where procedure was performed through a laparoscope (for anaesthetic refer to modifier 0027).	A	B
01809	Laparotomy.	C	B
01810	Radical removal of retro-peritoneal malignant tumours: including sacro-coccygeal and pre-sacral.	D	C
01811	Suture of burst abdomen	B	B
01812	Laparotomy for control of surgical haemorrhage.	B	C
01813	Drainage of subphrenic abscess.	C	B
<b>Drainage of other intraperitoneal abscess (excluding appendix abscess)</b>			
01815	Per abdomen.	C	B
01817	Transrectal drainage of pelvic abscess.	B	A
<b>Inguinal or femoral hernia :</b>			
01819	Adult.	B	B
01821	Child, under 14 years.	B	B
01823	Inguinal hernia: Infant under one year.	B	B
01825	Recurrent inguinal or femoral hernia.	C	B
01827	Strangulated hernia requiring resection of bowel.	C	C
01829	Epigastric hernia.	A	B
<b>Umbilical hernia</b>			
01831	Adult.	B	B
01833	Child under 14 years.	A	B
01835	Incisional hernia.	C	B
01837	Repair of omphalocele in new-born (one or more procedures).	D	C

		Proc Grp	Ana Grp
<b>Kidney</b>			
<b>Kidney</b>			
01839	Renal biopsy, per kidney, open.	B	B
01841	Renal biopsy (needle).	A	A
<b>Nephrectomy:</b>			
01853	Primary nephrectomy.	C	C
01855	Secondary nephrectomy.	D	C
01857	Radical nephrectomy with regional lymphadenectomy for tumour.	D	C
01859	Partial	D	C
01861	Symphysiotomy for horse-shoe kidney.	D	B
01863	Nephro-ureterectomy.	D	C
01865	Nephrotomy with drainage nephrostomy.	C	B
01869	Nephrolithotomy.	C	B
01870	Nephrolithotomy: Multiple calculi: repeat open operation + 25%	D	
01871	Staghorn stone - surgical.	D	B
01873	Suture renal laceration (renorrhaphy).	C	B
01875	Percutaneous aspiration cyst: Nephrostomy, pyelostomy	A	A
01877	Operation for renal cyst: Marsupialisation or excision	C	B
01879	Closure renal fistula.	C	B
01881	Pyeloplasty.	C	C
01883	Pyelostomy.	C	B
01885	Pyelolithotomy	C	C
01887	Complicated pyelolithotomy (e.g. solitary, ectopic, horse-shoe kidney or secondary operation).	C	C
01889	Nephrectomy for Allograft: Living or dead	C	C
01891	Perinephric abscess or renal abscess: Drainage.	B	B
01893	Aberrant renal vessels : Repositioning with pyeloplasty	C	C
01894	Auto transplantation of kidney.	D	C
01895	Allo transplantation of kidney.	D	C
<b>Ureter</b>			
01897	Ureterorrhaphy: Suture of ureter	C	B
01898	Lumbar approach.	C	B
01899	Ureteroplasty.	C	B
01901	Ureterolysis.	B	B
01902	Lumbar approach.	C	B
01903	Ureterectomy only.	B	B
01905	Ureterolithotomy.	B	B
<b>Cutaneous ureterostomy :</b>			
01907	Unilateral.	B	B
01909	Bilateral .	C	B
<b>Uretero-enterostomy :</b>			
01911	Unilateral.	B	C
01913	Bilateral.	C	C
01915	Uretero-ureterostomy.	B	C
01917	Transuretero-ureterostomy.	C	C
01919	Closure of ureteric fistula.	C	C
01921	Immediate deligation of ureter.	C	B
01923	Ureterolysis for retrocaval ureter with anastomosis.	C	B
01925	Uretero-pyelostomy.	C	B
<b>Uretero-neo-cystostomy :</b>			
01927	Unilateral.	C	C



**Transurethral resection of bladderneck :**

**Proc Grp Ana Grp**

- 01997 Bladder catheterisation - female (not at operation)  
01999 Percutaneous cystostomy.

A  
A A

**Total cystectomy :**

- 02001 After previous urinary diversion.  
02003 With conduit construction and ureteric anastomosis  
02005 Cystectomy with substitute bowel bladder construction with anastomosis to urethra or trigone  
02006 Cystectomy with continent urinary diversion (e.g. Kocks Pouch).  
02007 Partial cystectomy.  
02008 Continent urinary diversion without cystectomy (e.g. Kocks Pouch).  
02009 Radical total cystectomy with block dissection, ileal conduit and transplantation of ureters.  
02010 Reversion of temporary conduit.  
02011 Partial cystectomy with uretero-neo-cystostomy  
02012 Reversion of conduit with major urinary tract reconstruction  
02013 Diverticulectomy (independent procedure): Multiple or single .  
02015 Suprapubic cystostomy.  
02016 Abdomino-neo-urethrostomy.  
02017 Open loop fulguration or excision of bladder tumour  
02019 Operation for vesico-vaginal or urethra- vaginal fistula  
02020 Repair of vesico vaginal fistula: Abdominal approach.  
02021 Vesico-plication (Hamilton Stewart).  
02023 Vesico-urethrapexy for correction or urinary incontinence: Abdominal approach.  
02025 Vesico-urethrapexy with rectus sling.

D C  
D C  
D C  
D C  
C C  
D C  
D C  
D C  
C C  
D C  
B B  
B B  
C B  
C C  
C C  
B C  
C C  
C C

**Open operation for ureterocele:**

- 02027 Unilateral.  
02029 Bilateral.

B C  
C C

**Reconstruction of ectopic bladder exclusive of orthopaedic operation (if required) :**

- 02031 Initial .  
02033 Subsequent.  
02035 Cutaneous vesicostomy.  
02037 Cystoplasty, cysto-urethraplasty, vesicolysis.  
02039 Operation for ruptured bladder.  
02041 Enterocystoplasty.  
02043 Cysto-lithotomy.  
02045 Excision of patent-urachus or urachal cyst.  
02047 Drainage of perivesical or prevesical abscess

C C  
A C  
B C  
B C  
B B  
C C  
B B  
B B  
B A

**Evacuation of clots from bladder :**

- 02049 Other than post-operative.  
02051 Simple bladder lavage; including catheterisation.

A A  
A A

**Bladder neck plasty :**

- 02053 Male.  
02057 Female.

B B  
B B

**Open biopsy of urethra:**

- 02059 Male.  
02061 Female.

A A  
A A

**Dilatation of urethral stricture: by passage sound:**

- 02063 Initial (male).  
02065 Subsequent (male).  
02067 By passage of filiform and follower (male).  
02069 Dilatation of female urethra

A A  
A A  
A A  
A A

**Dilatation of urethral stricture: by passage sound:**

- 02071 Urethrorraphy: Suture of urethral wound or injury  
 02073 External urethrotomy: Pendulous urethra (anterior).

Proc Grp	Ana Grp
B	C
B	B

**Urethraplasty: pendulous urethra**

- 02075 First stage.  
 02077 Second stage.  
 02079 Reconstruction of female urethra.  
 02081 Reconstruction or repair of male anterior urethra (one stage).

B	B
C	B
C	B
C	B

**Reconstruction or repair of prostatic or membranous urethra**

- 02083 First stage.  
 02085 Second stage .  
 02086 If done in one stage.  
 02087 Urethral diverticulectomy: Male or female  
 02088 Peri-urethral teflon injection: Male or female - fee as for cystoscopy (item 1949) plus 42,00 units.  
 02089 Marsupialisation of urethral diverticula: Male or female

C	B
C	B
D	B
C	B
B	
A	B

**Total urethrectomy**

- 02091 Female.  
 02093 Male .  
 02095 Drainage of simple localised perineal urinary extravasation .  
 02097 Drainage of extensive perineal urinary extravasation.  
 02099 Fulguration for urethral caruncle or polyp.  
 02101 Excision of urethral caruncle.  
 02103 Simple urethral meatotomy.

C	B
C	B
A	A
B	B
A	A
A	A
A	A

**Incision of deep peri-urethral abscess**

- 02105 Female.  
 02107 Male .  
 02109 Badenoch pull-through for intractable stricture or incontinence .  
 02111 External sphincterotomy.  
 02113 Drainage of Skene's gland abscess or cyst.  
 02115 Operation for correction of male urinary incontinence with or without introduction of prostheses (excluding cost of prostheses)  
 02116 Urethral meatoplasty.  
 02117 Closure of urethrostomy or urethro-cutaneous fistula (independent procedure).  
 02121 Closure of urethrovaginal fistula: Including diversionary procedures.

A	A
A	A
C	B
B	B
A	A
C	C
A	B
A	A
C	C

**Penis**

- 02123 Biopsy of penis (independent procedure).

A	A
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**Destruction of condylomata : chemo- or cryotherapy:**

- 02125 Limited number (see item 2317).  
 02127 Multiple extensive.

A	A
A	A

**Electrodesiccation:**

- 02129 Limited number.  
 02131 Multiple extensive.

A	A
A	A

**Circumcision:**

- 02132 Ligation of abnormal venous drainage.  
 02133 Clamp procedure.  
 02137 Surgical excision other than by clamp or dorsal slit, any age.  
 02139 Dorsal slit of prepuce (independent procedure).

A	A
A	A
A	A
A	A

**Plastic operation on penis**

- 02141 Plastic operation for insertion of prostheses.  
 02143 For straightening of chordee e.g. hypospadias with or without mobilisation of urethra.

B	C
B	C



		<u>Proc Grp</u>	<u>Ana Grp</u>
<b>Plastic operation on penis</b>			
02145	For straightening of chordee with transplantation of prepuce	B	C
02147	For injury: Including fracture of penis and skin graft if required.	C	C
02149	For epispadias distal to the external sphincter	C	C
02153	Plastic operation for epispadias with incontinence.	C	C
02154	Induction of artificial erection	A	A
<b>Hypospadias</b>			
02155	Urethral reconstruction.	C	C
02157	Subsequent procedures for repair of urethra: Total	B	B
02159	Urethraplasty: Complete, one stage for hypospadias	D	C
<b>Total amputation of penis</b>			
02161	Without gland dissection.	C	B
02163	With gland dissection.	D	C
<b>Partial amputation of penis</b>			
02165	With gland-dissection.	C	C
02167	Without gland-dissection.	B	B
02169	Injection procedure for Peyronies disease	A	A
<b>Priapism operation</b>			
02171	Irrigation of corpora cavernosa for priapism.	A	A
02173	Shunt procedure: Any type	C	C
02174	Stab shunt.	A	B
<b>Testis and epididymis</b>			
02175	Testis biopsy, needle (independent procedure).	A	A
<b>Testis biopsy, incisional: independent procedure</b>			
02177	Unilateral.	A	A
02179	Bilateral.	A	A
02181	Biopsy of epididymis, needle.	A	A
02183	Puncture aspiration hydrocoele with or without injection of medication	A	A
02185	Operation for maldescended testicle: Including hemiotomy	B	B
02187	Operation for torsion appendix testis.	A	B
02189	Operation for torsion testis with fixation of contralateral testis	B	B
<b>Orchidectomy (total or subcapsular):</b>			
02191	Unilateral.	A	B
02193	Bilateral.	B	B
02195	Radical operation for malignant testis: Excluding gland dissection.	B	B
02197	Operation for hydrocoele or spermatocele.	A	B
02199	Varicocelectomy.	A	B
02201	Abdominal ligation of spermatic vein for varicocele	A	B
<b>Epididymectomy:</b>			
02203	Unilateral.	B	B
02205	Bilateral.	B	B
02207	Vasectomy: Unilateral or bilateral (no extra fee to be charged if done in combination with prostatectomy)	A	A
02209	Vasotomy: Unilateral or bilateral.	A	A
<b>Vasogram, seminal vesiculogram:</b>			
02210	Unilateral	A	B
02211	Bilateral.	A	B
02212	Insertion of testicular prosthesis: Independent procedure (exclusive of cost of material).	A	B
02213	Suture or repair of testicular injury.	A	B
02215	Incision and drainage of testis or epididymis e.g. abscess or haematoma.	B	B

**Vasogram, seminal vesiculogram:**

02217 Excision of local lesion of testis or epididymis.

**Proc Grp Ana Grp**

A B

**Vaso-vasostomy:**

02219 Unilateral.

B A

02221 Bilateral.

B A

**Epididymo-vasostomy:**

02223 Unilateral.

B A

02225 Bilateral.

B A

02227 Incision and drainage of scrotal wall abscess.

A A

02229 Excision of Mullerian duct cyst.

C B

02231 Excision of lesion of spermatic cord.

B A

02233 Seminal Vesiculectomy.

C B

**Prostate**

02235 Biopsy prostate: Needle or punch, single or multiple, any approach.

A A

02237 Biopsy, prostate, incisional, any approach.

B B

02239 Transurethral drainage of prostatic abscess.

A B

02241 Perineal drainage of prostatic abscess.

B B

02243 Trans-urethral cryo-surgical removal of prostate.

B B

02245 Trans-urethral resection of prostate.

C C

02247 Trans-urethral resection of residual prostatic tissue 90 days post-operative or longer.

A B

02249 Trans-urethral resection of post-operative bladder neck contracture.

B B

**Prostatectomy: perineal:**

02251 Sub-total.

C C

02253 Radical.

D C

02254 Pelvic lymphadenectomy.

C C

02255 Supra-pelvic, transvesical.

C C

**Retropubic:**

02257 Sub-total.

C C

02259 Radical.

D C

02260 Prostate brachytherapy

C B

**Vulva and introitus**

02271 Removal of tag or polyp.

A A

02272 Removal of small superficial benign lesions.

A A

02273 Biopsy with suture in theatre (excluding after-care).

A A

02274 Laser therapy of vulva and/or vagina (colposcopically directed)

B A

02275 Reduction labial hypertrophy.

B B

02277 Removal of extensive benign vulva tumour.

B B

**Secondary perineal repair**

02279 Repair second degree tear

A B

02280 Repair third degree tear.

B B

02281 Excision of inclusion cyst

A B

02283 Hymenectomy.

A B

02285 Drainage haematocolpos.

A A

02287 Clitoris repair for injury: Including skin graft if required

B B

02288 Clitoral reduction

C B

02289 Denervation or alcohol infiltration vulva (Woodruff)

A A

02291 Vulva: Undercutting skin (ball).

A B

02293 Vulva and introitus: Drainage of abscess.

A A

		Proc Grp	Ana Grp
<b>Bartholin gland</b>			
<b>Bartholin gland</b>			
02295	Bartholin abscess marsupialisation.	A	A
02297	Bartholin gland excision.	A	A
02299	Bartholin radical excision for malignant lesion.	D	B
<b>Operation for enlarging introitus</b>			
02301	Fenton plasty.	A	B
02303	Bilateral Z-plasty.	B	B
<b>Vulvectomy</b>			
02305	Partial vulvectomy	C	B
02307	Vulvectomy.	C	B
02309	Radical vulvectomy with bilateral lymphadenectomy	D	C
02311	Radical vulvectomy with bilateral lymphadenectomy, plus deep lymph gland dissection.	D	C
<b>Vaginal procedures and operations</b>			
02312	Artificial insemination.	A	
02313	Examination under anaesthetic when no other procedures are performed.	A	A
02314	Intra uterine insemination.	A	
02315	Simms Huhner test plus wet smear.	A	
<b>Destruction of condylomata by chemo-, cryo- or electrotherapy, or harmonic scalpel:</b>			
02316	First lesion.	A	A
02317	Limited repeat.	A	A
02318	Widespread.	A	A
02319	Excision of cysts or tumours.	A	A
02321	Drainage of vaginal abscess	A	A
02322	Pudendal nerve block.	A	
02323	Reconstruction of vagina after atresia.	B	C
<b>Construction of artificial vagina:</b>			
02325	Construction of artificial vagina: Labial fusion.	C	C
02327	Construction of artificial vagina: Macindoe type	C	C
02329	Construction of vagina: Bowel pull-through operation: Two surgeons: Each.	C	C
02331	Vaginal septum removal	B	B
<b>Colpotomy</b>			
02339	Colpotomy: Diagnostic (excluding after-care).	A	A
02341	Colpotomy: Therapeutic, with or without sterilisation	B	B
<b>Vaginal hysterectomy</b>			
02343	Vaginal hysterectomy. Without repair.	C	C
02345	Vaginal hysterectomy. With repair.	D	C
02357	Vaginal hysterectomy and repair with unilateral or bilateral salpingo-oophorectomy.	D	C
02361	Vaginal hysterectomy and repair for total prolapse	D	C
02363	Fothergill or Manchester repair operation	C	C
02365	Repair of recurrent enterocele or vault prolapse (except at the time of hysterectomy).	C	C
02366	Posterior repair alone.	B	B
02367	Other operations for prolapse: Anterior repair - with or without posterior repair.	C	B
02368	Uterovesical fistula.	C	C
02369	Repair of Vesico- or urethro-vaginal fistula.	C	C
02370	Repair of V.V.F. - Obstetric or radiation.	C	C
02371	Closure of uretero-vaginal fistula.	C	C
02372	Closure of uretero-vaginal fistula: Obstetric or radiation	C	C
02373	Closure of recto-vaginal fistula	B	C

**Vaginal hysterectomy**

- 02374 Closure of recto-vaginal fistula: Obstetric or radiation  
 02375 Colpocleisis.  
 02377 Le Fort operation.  
 02379 Schauta operation.  
 02381 Vaginectomy.  
 02383 Synchronous combined hysterocolpectomy: (one or two surgeons - total fee).  
 02385 Vaginal laceration or trauma: Repair.

**Proc Grp Ana Grp**

C C  
 B B  
 B B  
 D C  
 D C  
 D C  
 A B

**Cervix**

- 02389 Paracervical nerve block.  
 02391 Cervix: Canal reconstruction.  
 02392 Cryo- or electro-cauterisation, or Lletz of cervix (excluding cost of disposable loop electrode): In consulting room  
 02395 Cryo- or electro-cauterisation, or Lletz of cervix (excluding cost of disposable loop electrode): Under anaesthetic  
 02396 Laser or harmonic scalpel treatment of the cervix  
 02397 Dilatation of cervix for stenosis and insertion prosthesis and Budge suture.

A  
 C B  
 A  
 A B  
 B A  
 A B

**Biopsy**

- 02399 Punch biopsy (excluding after-care).  
 02400 Biopsy during pregnancy (excluding after-care).  
 02403 Wedge biopsy: Cervix (excluding after-care).  
 02404 Biopsy: Wedge during pregnancy: Cervix (excluding after-care).  
 02405 Cone biopsy: Cervix (excluding after-care).  
 02407 Amputation: Cervix.  
 02409 Cervix encircage: McDonald stitch.  
 02411 Cervix encircage: Shirodkar suture.  
 02413 Cervix encircage: Lash.  
 02415 Cervix encircage: Removal items 2409 and 2411 without anaesthetic.  
 02416 Cervix: Removal items 2409 and 2411 with anaesthetic in theatre.

A A  
 A A  
 A A  
 A A  
 A A  
 B B  
 A B  
 A B  
 A B  
 A A  
 A A

**Repair of tears**

- 02417 Emmet repair of tears.  
 02418 Sturmdorff repair of tears.

A B  
 A B

**Extirpation of cervical stump**

- 02421 Extirpation of cervical stump: Vaginal.  
 02423 Extirpation of cervical stump: Abdominal.  
 02425 Removal of cervical polyps (excluding after-care).  
 02427 Removal of cervical myomata.

B C  
 B C  
 A A  
 A B

**Colposcopy**

- 02429 Colposcopy (excluding after-care).

A A

**Uterus**

- 02433 Embryo transfer.  
 02434 Endometrial biopsy (excluding after-care).

A B  
 A A

**Hysteroscopy**

- 02435 Hysterosalpingogram (excluding after-care).  
 02436 Hysteroscopy (excluding after-care).  
 02437 Hysteroscopy and D&C (excluding after-care).  
 02438 Hysteroscopy and removal of uterine septum (excluding after-care).  
 02439 Hysteroscopy and division of endometrial and endocervical bands (excluding after-care).  
 02440 Hysteroscopy and polypectomy (excluding after-care).  
 02441 Hysteroscopy and myomectomy (excluding after-care).  
 02442 Insertion of I.U.C.D. (excluding after-care).

A A  
 A B  
 A B  
 B B  
 A B  
 B B  
 B B  
 A A

**Evacuation of uterus**

Proc Grp Ana Grp

**Evacuation of uterus**

- 02443 D&C: (excluding after-care).
- 02444 Fractional D&C (excluding after-care).
- 02445 Evacuation of uterus: Incomplete abortion: Before 12 weeks gestation
- 02447 Evacuation of uterus, incomplete abortion: After 12 weeks gestation.
- 02448 Termination of pregnancy before 12 weeks.
- 02449 Evacuation: Missed abortion: Before 12 weeks gestation
- 02451 Evacuation: Missed abortion: After 12 weeks gestation
- 02452 Termination of pregnancy after 12 weeks - administration of intra/extra amniotic prostaglandin.
- 02453 Evacuation hydatidiform mole.
- 02455 Evacuation uterus post-partum.
- 02461 Ventrosuspension.
- 02463 Uteroplasty: Strassman.
- 02465 Uteroplasty: Tompkins.
- 02467 Myomectomy.
- 02469 Subtotal hysterectomy with or without unilateral or bilateral salpingo-oophorectomy.
- 02471 Total abdominal hysterectomy: With or without unilateral/ bilateral salpingo-oophorectomy - uncomplicated
- 02473 Total abdominal hysterectomy plus vaginal cuff with or without unilateral or bilateral salpingo-oophorectomy
- 02475 Radical abdominal hysterectomy with bilateral lymphadenectomy (Wertheim).
- 02477 Abdominal hysterotomy with or without sterilisation
- 02478 Non-surgical endometrial destruction, any method, not utilising hysteroscopic instrumentation or assistance.
- 02479 Surgical endometrial destruction: Any method, utilising hysteroscopic instrumentation or assistance.

A A  
A A  
A B  
B B  
A B  
A B  
B B  
A B  
B B  
B C  
B C  
B C  
B B  
C B  
C B  
C B  
C B  
C B  
C B

**Fallopian tubes**

- 02480 Laparoscopy by second gynaecologist during RaFEA procedure (item 2478) or hysteroscopy and endometrial ablation (item 2478)
- 02481 Insufflation Fallopian tubes (excluding after-care).
- 02483 Salpingolysis.
- 02485 Salpingostomy.
- 02487 Tuboplasty tubal anastomosis or re-implantation.
- 02489 Ectopic pregnancy under 12 weeks (salpingectomy)
- 02490 Ectopic pregnancy under 12 weeks (salpingostomy)
- 02491 Ectopic pregnancy - after 12 weeks.
- 02492 Salpingectomy: Uni- or bilateral or sterilisation for accepted medical reasons

B  
A A  
B B  
C C  
C C  
B C  
C C  
C C  
B B

**Laparoscopy**

- 02493 Laparoscopy (excluding after-care).
- 02496 Plus aspiration of a cyst (excluding after-care).
- 02497 Plus sterilisation.
- 02499 Plus biopsy (excluding after-care).
- 02500 Plus ablation of endometriosis by laser, harmonic scalpel or cautery
- 02501 Plus cauterisation and/or lysis of adhesions.
- 02502 Plus aspiration of follicles (IVF) (excluding after-care)
- 02503 Plus ovarian drilling: add
- 02504 Plus Gamete intra fallopian tube transfer (includes follicle aspiration) (GIFT).
- 02505 Plus laparoscopic uterosacral nerve ablation: add
- 02506 Transcervical gamete/embryo intra-fallopian tube transfer (TET/TEST)

B B  
B B  
B B  
B B  
B B  
B B  
B B  
B B  
C B  
B B  
A

**Ovaries**

- 02525 Wedge resection of ovaries, unilateral or bilateral.
- 02527 Removal of ovarian tumour or cyst.
- 02529 Oophorectomy: Uni- or bilateral
- 02531 Ovarian carcinoma debulking and omentectomy.

B B  
B B  
B B  
D C

		Proc Grp	Ana Grp
<b>Ovaries</b>			
02532	Ovarian carcinoma - Abdominal hysterectomy, bilateral salpingo-oophorectomy, debulking and omentectomy.	D	C
<b>Exenteration</b>			
02535	Exenteration: Anterior.	D	C
02537	Posterior exenteration.	D	C
02539	Exenteration total.	D	C
02541	Presacral neurectomy.	B	C
02543	Moschowitz operation.	B	C
<b>Operations for stress incontinence</b>			
02545	Marshall-Marchetti-Krantz: Operation.	C	B
02546	Urethro-vesicopexy (Abdominal approach).	C	B
02547	Burch colposuspension.	C	B
02549	Sacro-colposuspension with or without mesh	C	C
02550	Urethro-vesicopexy (combined abdominal and vaginal approach).	C	B
02551	Laparotomy.	C	B
02552	Removal benign retroperitoneal tumour.	C	C
02553	Radical removal of malignant retro-peritoneal tumour	D	C
02554	Drainage of pelvic abscess per abdomen	C	B
02556	Drainage of pelvic abscess per vagina (refer item 2341)	B	B
02558	Drainage intra-abdominal abscess - delayed closure.	D	B
02560	Surgery for moderate endometriosis (AFS stages 2 + 3) any method.	C	C
02561	Surgery for severe endometriosis (AFS stage 4 - rectovaginal septum), any method (may not be used with another procedure or as a modifier)	C	A
02565	Implantation hormone pellets (excluding after-care).	A	
02570	Ligation of internal iliac vessels (when not part of another procedure)	C	C
<b>Pre-natal care and procedures</b>			
02603	External cephalic version (excluding after-care).	A	
02605	Amniocentesis (excluding after-care).	A	
02607	Amnioscopy (excluding after-care).	A	
02609	Intra-uterine transfusion of foetus or cordocentesis	B	
02610	Tococardiography pre-natal and intrapartum (including stress and non-stress test, Own machine) (excluding after-care)	A	
02611	Chorion villus sampling (excluding after-care).	A	
<b>Operative procedures (excluding antenatal care)</b>			
02653	Caesarean - hysterectomy.	D	C
02657	Post-partum hysterectomy.	D	C
02669	Abdominal operation for ruptured gravid uterus: Repair.	C	C
<b>Diagnostic procedures</b>			
02681	Visual evoked potentials (V.E.P.): Unilateral.	A	
02682	Bilateral.	B	
02683	Electro-retinography (Ganzfeld method): Unilateral.	A	
02684	Bilateral.	B	
02685	Electro-oculography: Unilateral	A	
02686	Bilateral.	A	
02687	V.E.P. stable condition: (photic drive) Unilateral	A	
02689	Bilateral.	B	
02690	Total fee for full evaluation of visual tracts, including bilateral electroretinography and V.E.P.	C	
02703	Somatosensory evoked potentials (S.E.P.) single nerve examination to brachial- or lumbosacral plexus, spinal cord and cortex	A	
02705	Transcutaneous nerve stimulation in the treatment of post-operative and chronic intractable pain, per treatment	A	
02707	Full fee for complete neurological evoked potential evaluation including neurological A.E.P., bilateral V.E.P., and bilateral median and/or posterior tibial stimulation	C	
02708	Evaluation of cognitive evoked potential with visual or audiology stimulus.	B	

		<u>Proc Grp</u>	<u>Ana Grp</u>
<b>Diagnostic procedures</b>			
02709	Full spinogram including bilateral median and posterior-tibial studies	B	
02711	Electro-encephalography - Taking of record	A	
02712	Electro-encephalography - Interpretation.	A	
<b>Sleep electro-encephalography</b>			
02713	Lumbar puncture and/or intrathecal injections.	A	
02714	Cisternal puncture and/or intrathecal injections.	A	
02716	8 Hour ambulatory EEG monitoring (Holter): Interpretation	A	
06001	Sleep electro-encephalography - infants that fit into a perambulator - taking of record.	A	
06002	Sleep electro-encephalography - infants that fit into a perambulator - interpretation.	A	
06003	Sleep electro-encephalography - adults and children over infant age - taking of record.	A	
06004	Sleep electro-encephalography - adults and children over infant age - interpretation.	A	
<b>Electromyography.</b>			
02717	First	B	
02718	Subsequent	B	
02720	Overnight polysomnogram and sleep staging: Interpretation	A	
02722	Daytime polysomnogram: Interpretation.	A	
02723	Multiple sleep latency test - interpretation.	B	
02724	Overnight continuous positive airways pressure (CPAP) titration	C	
<b>Angiography carotis</b>			
02725	Unilateral.	A	B
02726	Bilateral.	A	B
02727	Vertebral artery: Direct needling.	A	B
02729	Vertebral catheterisation.	A	B
<b>Air encephalography and posterior fossa tomography</b>			
02731	Injection of air (independent procedure).	A	B
02735	Posterior fossa tomography attendance by clinician	A	
02737	Visual field charting on Bjerrum Screen.	A	
<b>Ventricular needling without burring</b>			
02739	Tapping only.	A	B
02741	Plus introduction of air and/or contrast dye for ventriculography.	A	B
<b>Subdural tapping:</b>			
02743	First sitting.	A	A
02745	Subsequent .	A	A
<b>Introduction of burr holes for:</b>			
02747	Ventriculography.	C	B
02749	Catheterisation for ventriculography and/or drainage	C	B
02751	Biopsy of brain tumor.	C	B
02753	Subdural haematoma or hygroma.	C	B
02755	Subdural empyema.	C	B
02757	Brain abscess.	C	B
<b>Nerve biopsy:</b>			
02759	Peripheral.	A	A
02763	Cranial nerves: Extra-cranial	A	A
02765	Nerve conduction studies (see item 0733 and 3285)	A	B
<b>Botulinum toxin injections</b>			
06005	For blepharospasm (+ item 0201+ item 0202)	A	
06006	For hemifacial spasm (+ item 0201 + item 0202)	A	
06007	For adductor dysphonia (+ item 0201 + item 0202)	A	

**Botulinum toxin injections**

- 06008 In extra-ocular muscles (+ item 0201 + item 0202)  
 06009 For spasmodic torticollis and/or cranial dystonia (+ item 0201 + item 0202).

**Proc Grp Ana Grp**A  
A**Nerve repair or suture :**

- 02767 Suture brachial plexus (see also items 2837 and 2839)

D C

**Suture: large nerve:**

- 02769 Primary.  
 02771 Secondary.

B B  
C B**Digital nerve:**

- 02773 Primary.  
 02775 Secondary.

B B  
B B**Nerve graft:**

- 02777 Simple.

C C

**Fascicular :**

- 02779 First fasciculus.  
 02781 Each additional fasciculus.  
 02783 Nerve flap: To include all stages.  
 02785 Facio-accessory or facio-hypoglossal anastomosis  
 02787 Grafting of facial nerve.

C C  
C C  
C B  
B C  
C C**Trigeminal ganglion :**

- 02789 Injection of alcohol.  
 02791 Injection of cortisone.  
 02793 Coagulation through high frequency.

C A  
B A  
C A**Procedures for pain relief :**

- 02799 Intrathecal injections for pain.  
 02800 Plexus nerve block.  
 02801 Epidural injection for pain. (See modifier 0045 for post-operative pain relief) (refer to modifier 0021 for epidural anaesthetic).  
 02802 Peripheral nerve block.

A A  
A B  
A A  
A A**Alcohol injection in peripheral nerves for pain:**

- 02803 Unilateral.  
 02805 Bilateral.  
 02809 Peripheral nerve section for pain.  
 02811 Pudendal neurectomy: Bilateral.  
 02813 Obturator or Stoffels.  
 02815 Interdigital.  
 02825 Excision: Neuroma: Peripheral.

A A  
A A  
A A  
B A  
B B  
A B  
B C**Other nerve procedures :**

- 02827 Transposition of ulnar nerve.

B C

**Neurolysis:**

- 02829 Minor.  
 02831 Major.  
 02833 Digital.  
 02835 Scalenotomy.  
 02837 Brachial plexus, suture or neurolysis (item 2767)  
 02839 Total brachial plexus exposure with graft neurolysis and transplantation  
 02841 Carpal Tunnel.

A B  
B B  
B B  
B B  
D C  
D C  
B B**Lumbar sympathectomy:**

- 02843 Unilateral.  
 02845 Bilateral.

C B  
D B



**Cervical sympathectomy :**

**Proc Grp Ana Grp**

**Cervical sympathectomy :**

02847 Unilateral.

C B

02848 Bilateral .

D B

**Sympathetic block: other levels:**

02849 Unilateral.

A A

02851 Bilateral

A A

02853 Diagnostic/Therapeutic nerve block (unassociated with surgery) - either intercostal, or brachial, or peripheral, or stellate

A A

**Removal of skull tumour: with or without plastic repair:**

02855 Small.

C C

02857 Major.

C C

**Repair of depressed fracture of skull: without brain laceration:**

02859 Major.

C C

02860 Small .

C C

**With brain lacerations:**

02861 Small.

C C

02862 Major.

D C

02863 Cranioplasty.

D C

02864 Encephalocele (excluding frontal).

C C

**Craniostenosis:**

02865 Few sutures.

C C

02867 Multiple sutures

D C

**Shunt procedures :**

02869 Ventriculo-cisternostomy.

D C

02871 Ventriculo-caval shunt.

D C

02873 Ventriculo-peritoneal shunt.

D C

02875 Theco-peritoneal C.S.F. shunt.

D C

**Aneurysm repair :**

02876 Repair of aneurysms or arteriovenous anomalies (Intracranial) .

D C

02877 Extracranial to intracranial vessel.

D C

02878 Posterior fossa arteriovenous anomalies.

D C

**Neurectomy :**

02879 Glossopharyngeal nerve.

D C

**Eighth nerve:**

02881 Intracranial.

D C

02883 Extracranial.

D C

02884 Subtemporal section of the trigeminal nerve.

D C

02885 Trigeminal tractotomy.

D C

02886 Posterior fossa decompression with or without laminectomy with or without dural insertion for Arnold Chiari malformation or obstructive cysts e.g. Dandy Walker or parasites

D C

02887 Vestibular nerve.

D C

**Posterior fossa tumour removal :**

02889 Acoustic neuroma, benign cerebello-pontine tumours, meningioma, clivus meningioma, chordoma, clivus chordoma, cholesteatoma

D C

02891 Glioma, secondary deposits.

D C

02893 Abscess.

D C

**Excision of tumour of glomus jugulare:**

02895 Intracranial.

D C

02897 Extracranial.

D C

02898 Hemispherectomy .

D C

**Supratentorial procedures :****Proc Grp Ana Grp****Supratentorial procedures :**

02899 Craniectomy for extra-dural haematoma or empyema

D C

**Craniotomy for :**

02900 Extra-dural orbital decompression or excision of orbital tumour.

D C

02901 Osteoplastic Flap for removal of: Meningioma, basal extracerebral mass, intra ventricular tumours, Pineal tumours, pituitary adenoma, total excision cranio-pharyngioma/ pharyngioma

D C

02903 Abscess, Glioma.

D C

02904 Haematoma, foreign body: Cerebral or cerebellar.

D C

02905 Focal epilepsy: Excision of cortical scar.

D C

02906 With anterior fossa meningocele and repair of bony skull defect.

D C

02907 Temporal lobectomy.

D C

02908 Torkildsen anastomosis.

D C

02909 CSF-leaks.

D C

02910 Removal of arteriovenous malformation.

D C

**Stereo-tactic cerebral and spinal cord procedures:**

02911 First sitting.

D B

02913 Repeat.

C B

02915 Transnasal hypophysectomy

D C

02916 Transfrontal hypophysectomy.

D C

02917 Transnasal hypophyseal implants

C C

**Spinal operations :**

02919 Laminectomy for spinal stenosis: At multiple levels

D C

**Laminectomy :**

02921 One level

C C

02922 Multiple levels

C C

**Chordotomy:**

02923 Unilateral

C C

02925 Open

D C

**Rhizotomy:**

02927 Extradural, but intraspinal

D C

02928 Intradural:

D C

**Removal of spinal cord tumour: Intramedullar :**

02929 Posterior approach

D C

02930 Anterio-lateral approach

D C

**Extramedullary, but intradural:**

02931 Posterior approach

D C

02932 Anterio-lateral approach

D C

02933 Intraspinal, but extradural: Posterior approach.

D C

02935 Transcutaneous chordotomy.

C C

02937 Repair of meningocele, involving nerve tissue

C C

02938 Simple.

C C

02939 Excision of arterial vascular malformations and cysts of the spinal cord

D C

02940 Lumbar osteophyte removal

C C

02941 Cervical or thoracic osteophyte removal

D C

**Carotis :**

02951 Trauma

B C

02953 For aneurysm (A.V. anomaly)

C C

02955 Removal of carotid body tumour (without vascular reconstruction).

C C

**Physical treatment methods :**

Proc Grp    Ana Grp

**Physical treatment methods :**

02970 Electro-convulsive treatment (ECT): Each time (See rule Va.).  
02971 Intravenous anti-depressive medication through infusion: Per push in (Maximum 1 push in per 24 hours)

A                      B  
A

**Psychiatric examination methods :**

02972 Narco-analysis (Maximum of 3 sessions per treatment): Per session  
02973 Psychometry (specify examination): Per session (Maximum of 3 sessions per examination)

A  
A

### Thyroid :

02983	Partial lobectomy.
02985	Total lobectomy.
02987	Subtotal thyroidectomy.
02989	Total thyroidectomy.
02991	Thyroglossal cyst or fistula excision.

C	C
C	C
C	C
C	C
B	B

### Parathyroid :

02993 Exploration of parathyroid glands for hyperparathyroidism including removal.

D                      C

**Adrenals :**

02995 Adrenalectomy: Unilateral.  
02997 Bilateral exploration of adrenal glands: Including removal

C	C
D	C

**Hypophysis :**

02999 Transethmoidal hypophysectomy.  
03000 Transnasal hypophysectomy (see item 2915).

D	C
D	C

**General :**

**03001 Implantation of pellets (excluding cost of material) (excluding after-care).**

A

### Procedures performed in rooms :

- 03002 Gonioscopy.
- 03003 Fundus contact lens or 90 D lens examination
- 03004 Peripheral fundus examination with indirect ophthalmoscope
- 03005 Endothelial cell count.
- 03006 Keratometry.
- 03007 Potential acuity measurement
- 03008 Contrast sensitivity test.
- 03010 Orthoptic consultation.
- 03011 Orthoptic subsequent sessions.
- 03012 Pre-surgical retinal examination before retinal surgery
- 03013 Ocular motility assessment comprehensive examination
- 03014 Tonometry per test with maximum of 2 tests for provocative tonometry (one or both eyes)
- 03015 Charting of visual field with manual perimeter.
- 03016 Retinal threshold test without storage facilities
- 03017 Retinal threshold test inclusive of computer disc storage for Delta or Statpak programs.
- 03018 Retinal threshold trend evaluation (additional to item 3017)
- 03019 Ocular muscle function with Hess screen or perimeter

A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
A  
B  
A  
A

**Special eye investigations :**

03020	Pachymetry: Only when own instrument is used, per eye. Only in addition to corneal surgery.
03021	Retinal function assessment including refraction after ocular surgery (within four months), maximum two examinations
03022	Digital fluorescein video angiography
03023	Digital indocyanine video angiography
03025	Electronic tonography.
03027	Fundus photography.
03029	Anterior segment microphotography.

A	
A	
B	B
B	B
A	
A	
A	

**Special eye investigations :**

	<b>Proc Grp</b>	<b>Ana Grp</b>
03031 Fluorescein angiography, for one or both eyes in one sitting (excluding colour photography).	A	
03032 Eyelid and orbit photography.	A	
03033 Interpretation of items 3022, 3023 and 3031 referred by other clinician	A	
03034 Determination of lens implant power per eye.	A	
03035 Where a minor procedure usually done in the consulting rooms requires a general anaesthetic or use of an operating theatre, an additional fee may be charged	A	
03036 Corneal topography: For pathological corneas only on special motivation. For refractive surgery - may be charged once pre-operative and once post-operative per sitting (for one or both eyes)	A	

**Retina:**

03037 Surgical treatment of retinal detachment including vitreous replacement but excluding vitrectomy.	D	C
03039 Prophylaxis and treatment of retina and choroid by cryotherapy and/or diathermy and/or photocoagulation and/or laser per eye	B	B
03041 Pan retinal photocoagulation (per eye): done in one sitting.	C	B
03044 Removal of encircling band and/or buckling material	B	B

**Cataract:**

03045 Intra-capsular.	C	B
03047 Extra-capsular (including capsulotomy).	C	B
03049 Insertion of lenticulus in addition to item 3045 or item 3047 (cost of lens excluded) (modifier 0005 not applicable)	A	B
03051 Needling or capsulotomy.	B	B
03052 Laser capsulotomy.	B	A
03057 Removal of lenticulus.	C	B
03059 Insertion of lenticulus when item 3045 or item 3047 was not executed (cost of lens excluded).	C	B

**Glaucoma:**

03061 Drainage operation.	C	B
03062 Implantation of aqueous shunt device/seton in glaucoma (procedural)	B	A
03063 Cyclocryotherapy or cyclodiathermy.	B	B
03064 Laser trabeculoplasty.	B	B
03065 Removal of blood from anterior chamber.	B	B
03067 Goniotomy.	C	B

**Intra-ocular foreign body:**

03071 Anterior to Iris.	B	B
03073 Posterior to Iris (including prophylactic thermal treatment to retina)	C	B

**Strabismus:**

03074 Adjustment of sutures if not done at the time of the operation. Additional fee for sterile tray (see item 0202)	A	
03075 Operation on one or two muscles.	C	B
03076 Operation on three or four muscles.	C	B
03077 Subsequent operation one or two muscles.	B	B
03078 Subsequent operation on three or four muscles	C	B

**Globe:**

03079 Transcleral biopsy.	B	B
03080 Examination of eyes under general anaesthetic where no surgery is done	B	A
03081 Treatment of minor perforating injury	B	B
03083 Treatment of major perforating injury	C	B
03085 Enucleation or Evisceration	B	B
03087 Enucleation or Evisceration with mobile implant: Excluding cost of implant and prosthesis	C	B
03088 Hydroxyapatite insertion (additional to item 3087) :	A	A
03089 Subconjunctival injection if not done at time of operation	A	A
03091 Retrobulbar injection (if not done at time of operation)	A	A
03092 External laser treatment for superficial lesions	A	
03093 Treatment of tumors of retina or choroid by radioactive plaque and/or diathermy and/or cryotherapy and/or laser therapy and/or photocoagulation	C	B

		<u>Proc Grp</u>	<u>Ana Grp</u>
<b>Globe:</b>			
03095	Biopsy of vitreous body or anterior chamber contents	B	B
03096	Adding of air or gas in vitreous as a post-operative procedure or pneumoretinopexy	B	B
03097	Anterior vitrectomy	D	B
03098	Removal of silicon from globe	D	B
03099	Posterior vitrectomy including anterior vitrectomy, encircling of globe and vitreous replacement	D	C
03100	Lensectomy done at time of posterior vitrectomy	A	B
<b>Orbit:</b>			
03101	Drainage of orbital abscess	B	B
03103	Removal of tumour	C	C
03105	Exenteration	D	C
03107	Orbitotomy requiring bone flap	C	C
03108	Eye socket reconstruction	C	B
03109	Hydroxyapatite implantation in eye cavity when evisceration or enucleation was done previously	D	C
03110	Second stage hydroxyapatite implantation	B	B
<b>Cornea:</b>			
03113	Fitting of contact lenses and instructions to patient: Includes eye examination, first fitting of the contact lenses and further post-fitting visits for 1 year	C	
03115	Fitting of only one contact lens and instructions to the patient: eye examination, first fitting of the contact lens and further post-fitting visits for one year included	C	
03118	Curettage of cornea after removal of foreign body	A	
03119	Tattooing.	A	B
03121	Graft (Lamellar of fullthickness)	D	C
03122	Epikeratophakia.	D	
03123	Insertion of intra-corneal or intrascleral prosthesis for refractive surgery.	C	B
03124	Removal of corneal stitches under microscope (maximum of 2 procedures) Additional fee for sterile tray (see item 0202)	A	
03125	Keratotomy or conjunctival flap.	B	B
03127	Cauterization of cornea (by chemical, thermal or cryotherapy methods).	A	A
03128	Radial keratotomy or keratoplasty for astigmatism (cosmetic unless medical reasons can be proved).	C	B
03130	Pterygium or conjunctival cyst or conjunctival tumor	A	B
03131	Paracentesis	A	B
03132	Lamellar keratectomy (per eye) for refractive surgery (LK, ALK, MLK)	C	B
<b>Ducts:</b>			
03133	Probing and/or syringing, per duct	A	A
03135	Insertion of polythene tubes (additional): Unilateral	A	B
03137	Excision of lacrimal sac: Unilateral	B	B
03139	Dacryocystorhinostomy (Single) with or without polythene tube	C	B
03141	Sealing of punctum.	A	A
03143	Three-snip operation.	A	A
<b>Repair of canaliculus:</b>			
03145	Primary procedure.	B	B
03147	Secondary procedure.	C	B
<b>Iris:</b>			
03149	Iridectomy or iridotomy by open operation as isolated procedure.	B	B
03151	Excision of iris tumour.	C	B
03153	Iridectomy or iridotomy by laser or photo-coagulation as isolated procedure (maximum one procedure)	B	B
03155	Iridocyclectomy for tumour.	D	C
03157	Division of anterior synechiae as isolated procedure	B	B
<b>Lids:</b>			
03161	Tarsorrhaphy.	A	B

**Lids:**

	<u>Proc Grp</u>	<u>Ana Grp</u>
03163 Excision of superficial lid tumour.	A	B
03165 Repair of skin lacerations of the lid.	A	B
03167 Diathermy to wart on lid margin.	A	A
03169 Electrolysis of any number of eyelashes (per eye)	A	
03171 Excision of Meibomian cyst. Additional fee for sterile tray (see item 0202).	A	A
03173 Epicanthal folds.	B	B
03174 Botulinum toxin injection for blepharospasm (+ item 0201 + item 0202)	A	
03175 Botulinum toxin injection in extra-ocular muscles (+ item 0201 + item 0202)	A	
03176 Lid operation for facial nerve paralysis including tarsorrhaphy but excluding cost of material.	C	B

**Entropion or ectropion by:**

03177 Cautery.	A	A
03179 Suture.	A	B
03181 Open operation.	B	B
03183 Free skin, mucosal grafting or flap	C	B

**Staged procedures for partial or total loss of eyelid**

03185 First stage.	C	C
03187 Subsequent stage.	C	C
03189 Full thickness eyelid laceration for tumour or injury: Direct repair	B	B
03191 Blepharoplasty: upper lids for improvement in function	B	B

**Ptosis:**

03193 Repair by superior rectus, levator or frontalis muscle operation	C	B
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**Ptosis: by lesser procedure e.g. sling operation:**

03195 Unilateral.	B	B
03197 Bilateral.	C	B

**Conjunctiva:**

03199 Repair of conjunctiva by grafting.	B	B
03200 Repair of lacerated conjunctiva.	A	B

**Major congenital deformity reconstruction of external ear:**

03267 Unilateral	B	C
03269 Bilateral	C	C
03270 Excision of superficial pre-auricular fistula	A	B
03272 Excision of complicated pre-auricular fistula.	B	B

**External ear canal:**

03205 Removal of foreign body under general anaesthetic	A	A
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**Meatus atresia:**

03215 Repair of stenosis of cartilaginous portion	C	B
03217 Congenital	D	C
03219 Removal of osteoma from meatus: Solitary.	B	B
03221 Removal of osteoma from meatus: Multiple.	C	B

**Middle ear:**

03207 Unilateral myringotomy.	A	B
03209 Bilateral myringotomy.	A	B
03211 Unilateral myringotomy with insertion of ventilation tube	A	B
03212 Bilateral myringotomy with insertion of unilateral ventilation tube.	A	B
03213 Bilateral myringotomy with insertion of bilateral ventilation tubes.	B	B
03237 Exploratory tympanotomy	A	B
03243 Myringoplasty	B	B
03245 Functional reconstruction of tympanic membrane	D	C

**Middle ear:**

- 03249 Stapedotomy and stapedectomy.
- 03257 Cortical mastoidectomy.
- 03259 Radical mastoidectomy (excluding minor procedures)
- 03261 Muscle grafting to mastoid cavity without tympanoplasty
- 03263 Autogenous bone graft to mastoid cavity
- 03264 Tympanomastoidectomy.
- 03265 Reconstruction of posterior canal wall, following radical mastoid
- 03266 Gentamycin instillation into the middle ear for Ménière's disease (myringotomy and cost of material excluded)

Proc Grp Ana Grp

D B  
B C  
C C  
C C  
C C  
D C  
D C  
A B

**Facial nerve tests:**

- 03223 Percutaneous stimulation of the facial nerve.
- 03224 Electroneurography (ENOG).

A B  
B B

**Exploration of facial nerve:**

- 03227 Exploration of tympanomastoid segment.
- 03228 Grafting of the tympanomastoid segment (including item 3227)
- 03230 Extratemporal grafting of the facial nerve.
- 03232 Facio-accessory or facio-hypoglossal anastomosis

D C  
D C  
D C  
B C

**Audiometry:**

- 02691 Short latency brainstem evoked potentials (A.E.P.) neurological examination, single decibel unilateral
- 02692 Bilateral.
- 02693 A.E.P. Audiological examination: unilateral at a minimum of 4 decibels
- 02694 Bilateral
- 02695 Audiology 40Hz response: unilateral.
- 02696 Bilateral.
- 02697 Mid- and long latency auditory evoked potentials: unilateral.
- 02698 Bilateral.
- 02699 Electro-cochleography: unilateral
- 02700 Bilateral
- 02702 Total fee for audiological evaluation including bilateral A.E.P. and bilateral electro-cochleography
- 03250 Otoacoustic emission (high risk patients only)
- 03273 Pure tone audiometry (air conduction)
- 03274 Pure tone audiometry (bone conduction with masking).
- 03275 Impedance audiometry (tympanometry).
- 03276 Impedance audiometry (stapedial reflex) - no charge for volume, compliance etc.
- 03277 Speech audiometry: Inclusive fee (speech audiogram, speech reception threshold, discrimination score).
- 03278 Recruitment tests: Inclusive fee (Bekesy, Fowler, etc.)

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**Balance tests:**

- 03251 Minimal caloric test (excluding consultation fee).
- 03252 Bithermal Halpike caloric test (excluding consultation fee)
- 03253 Electro-nystagmography for spontaneous and positional nystagmus.
- 03254 Video nystagmoscopy (monocular).
- 03255 Caloric test done with electronystagmography
- 03256 Video nystagmoscopy (binocular)
- 03258 Otolith repositioning manoeuvre

A  
A  
A  
A  
B  
A  
A  
A

**Inner ear surgery:**

- 03233 Labyrinthectomy via the middle ear or mastoid.
- 03240 Endolymphatic sac surgery
- 03244 Fenestration and occlusion of the posterior semicircular canal (F.O.S.) for benign paroxysmal positioning vertigo (BPPV)
- 03246 Cochlear implant surgery

D C  
D C  
D C  
D C

**Middle fossa approach (i.e transtemporal or supralabyrinthine):****Proc Grp Ana Grp****Middle fossa approach (i.e transtemporal or supralabyrinthine):**

03229	Facial nerve: Exploration of the labyrinthine segment	D	C
05221	Facial nerve: Grafting of labyrinthine segment (graft removal and exploration of labyrinthine segment included)	D	C
05222	Facial nerve surgery inside the internal auditory canal (if grafting required and harvesting of graft included)	D	C
05223	Vestibular neurectomy, removal of supralabyrinthine tumours, or similar procedures	D	C
05224	Removal of acoustic neuroma via the middle fossa approach	D	C

**Translabyrinthine approach:**

03239	Acoustic neuroma removal translabyrinthine	D	C
05227	Cochleo-vestibular neurectomy	D	C
05229	Facial nerve surgery in the internal auditory canal, translabyrinthine (if grafting and graft removal included)	D	C

**Transotic approach to the cerebellopontine angle:**

05232	Removal of acoustic neuroma or cyst of the internal auditory canal	D	C
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**Infratemporal fossa approach type a:**

05235	Removal of tumour for the jugular foramen, internal carotid artery, petrous apex and large infratemporal tumours	D	C
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**Infratemporal fossa approach type b:**

05238	Removal of tumour of the petrous apex	D	C
05239	Removal of tumour of the clivus	D	C

**Infratemporal approach type c:**

05242	Removal of nasopharyngeal angiofibroma or carcinoma	D	C
05243	Removal of tumour from the infratemporal fossa, pterygopalatine fossa, parasellar region or nasopharynx	D	C

**Subtotal petrosectomy:**

05246	Subtotal petrosectomy for removal of temporal bone tumour	D	C
05247	Subtotal petrosectomy for CSF leak and/or for total obliteration of the mastoid cavity	D	C

**Petrosectomy and radical dissection of petromandibular fossa:**

05250	Partial mastoido-tympanectomy for malignancy of the deep lobe of the parotid gland.	D	C
05251	Total mastoido-tympanectomy for more extensive malignancy of the deep lobe of the parotid gland	D	C
05252	Extended petrosectomy for extensive malignancy of the deep lobe of the parotid gland	D	C

**Physical treatment:**

03279	Domiciliary or nursing home treatment (only applicable where a patient is physically incapable of attending the rooms, and the equipment has to be transported to the patient)	A	
03280	Consultation units for specialists in physical medicine when treatment is given (per treatment)	A	
03281	Ultrasonic therapy.	A	
03282	Shortwave diathermy.	A	
03284	Sensory nerve conduction studies	A	
03285	Motor nerve conduction studies	A	
03287	Spinal joint and ligament injection.	A	
03288	Epidural injection.	A	
03289	Multiple injections - First joint.	A	
03290	Each additional joint.	A	
03291	Tendon or ligament injection.	A	
03292	Aspiration of joint or intra-articular injection.	A	
03293	Aspiration or injection of bursa or ganglion	A	
03294	Paracervical nerve block.	A	
03295	Paravertebral root block - unilateral.	A	
03296	Paravertebral root block - bilateral.	A	
03297	Manipulation of spine performed by a specialist in Physical Medicine.	A	
03298	Spinal traction.	A	
03299	Manipulation of large joints under general anaesthesia: Hip	A	A
03301	Muscle fatigue studies	A	



**Physical treatment:**

03302	Strength duration curve per session	A	
03303	Electromyography	B	
03304	All other physical treatments carried out: Complete physical treatment: Specify treatment (For subsequent treatments by a general practitioner, for the same condition within 4 months after initial treatment: A fee for the treatment only, is applicable: See general rules L and M)	A	

**Interventional radiological procedures:**

		<u>Proc Grp</u>	<u>Ana Grp</u>
05002	Percutaneous transluminal angioplasty: Aortic/IVC	B	B
05004	Percutaneous transluminal angioplasty, arterial or venous, Iliac vessel/subclavian vessel/AV Fistula	B	B
05006	Percutaneous transluminal angioplasty: Femoral to popliteal bifurcation, axillary and brachial	B	B
05008	Percutaneous transluminal angioplasty: sub-popliteal sub brachial	C	B
05010	Percutaneous transluminal angioplasty: Renal/Visceral/Brachiocephalic	C	B
05014	Atherectomy (per vessel)	D	
05016	Aspiration thrombectomy (per vessel)	C	
05018	On-table thrombolysis/Transcatheter infusion performed in angiography suite	C	A
05022	Embolisation non-intercranial, per vessel.	C	B
05030	Percutaneous nephrostomy for further procedure or drainage.	C	B
05031	Antegrade ureteric stent insertion	B	A
05033	Percutaneous cystostomy in radiology suite	A	
05035	Urethral balloon dilatation in radiology suite	A	
05036	Percutaneous abdominal/pelvis/other drain insertion, any modality.	B	B
05037	Urethral stenting in radiology suite	B	
05038	Intracranial/Spinal AVM embolisation (per session).	D	C
05039	Intracranial thrombolysis (on-table) per session	C	B
05040	Intracranial aneurysm occlusion.	D	C
05041	Balloon occlusion/Wada test	C	B
05042	Carotico/Cavernous fistula/Head and neck AV fistula embolisation.	D	C
05043	Intracranial angioplasty	D	B
05044	Transhepatic portogram.	C	B
05045	Hepatic arterial infusion catheter insertion	C	A
05046	Percutaneous biliary drainage (external).	C	B
05047	Combined internal/external biliary drainage	B	B
05048	Biliary stent insertion.	D	B
05049	Percutaneous gall bladder drainage	C	B
05050	Percutaneous or renal gall bladder stone removal.	D	B
05058	Stent insertion: Aortic/IVC - including percutaneous transluminal angioplasty (PTA)	C	B
05060	Stent insertion: Iliac/subclavian/AV fistula - including percutaneous transluminal angioplasty (PTA)	C	B
05062	Stent insertion: Femoral popliteal bifurcation, axillary and brachial - including percutaneous transluminal angioplasty (PTA)	C	B
05064	Stent insertion: Sub-popliteal - including percutaneous transluminal angioplasty (PTA)	C	B
05066	Stent insertion: Renal/Visceral/Brachiocephalic - including percutaneous transluminal angioplasty (PTA)	D	B
05070	Stent insertion: Aorto-iliac stent graft - including percutaneous transluminal angioplasty (PTA)	D	B
05072	Tunnelled/Subcutaneous arterial/venous line performed in radiology suite	B	A
05074	IVC filter insertion jugular or femoral route	C	B
05076	Intravascular foreign body removal, arterial or venous, any route	D	B
05078	Percutaneous sclerotherapy of an arteriovenous malformation (AVM) per session	B	A
05080	Transjugular intrahepatic portosystemic shunt	D	B
05082	Transjugular liver biopsy	B	B
05084	Endoluminal fallopian tube recanalisation	C	A
05086	Renal cyst aspiration/ablation	A	
05088	Oesophageal stent insertion in radiology suite	B	A
05090	Tracheal stent insertion	B	A

**Interventional radiological procedures:**

05091	GIT Balloon dilatation under fluoroscopy
05092	Other GIT stent insertion
05093	Percutaneous gastrostomy in radiology suite
05094	Cutting needle biopsy with image guidance
05095	Chest drain insertion in radiology suite
05096	Percutaneous cyst or tumour ablation (non aspiration)

<u>Proc Grp</u>	<u>Ana Grp</u>
B	A
B	A
B	
A	
A	
B	

**Draft Amendment  
Working Document - Not to be quoted  
10-Nov-00**

**Items of Schedule B**

- Item 1. Theatre Fees:
- According to Uniform Patient Fee Schedule as published by the National Department of Health and amended by them, from time to time
- Item 2. Radiography Services:
- According to Uniform Patient Fee Schedule as published by the National Department of Health and amended by them, from time to time
- Item 3. The after hour fee is incorporated into the rates prescribed by the Uniform Patient Fee Schedule. This fee is now obsolete.
- Item 4. Intensive Care Units:
- According to Uniform Patient Fee Schedule as published by the National Department of Health and amended by them, from time to time
- Item 5. High Care:
- According to Uniform Patient Fee Schedule as published by the National Department of Health and amended by them, from time to time
- Item 6. The provision to a private patient and a private hospital patient, including a patient admitted to a closed hospital contemplated in section 58 (2) of the Ordinance, of orthopaedic and surgical appliances and sundry non-pharmaceutical items which have not been made available by the Superintendent General for provision to such a patient: Cost + 30%.
- Item 7. The provision to-
- (a) A private and private hospital patient, including a patient admitted to a closed hospital contemplated in section 58 (2) of the Ordinance, of medicine which has not been made available by the Superintendent General for provision to such a patient: Cost Price + Distribution Cost + Facility Fee. (The majority of cases will be the national tender price, but there are also provincial tenders and the occasional buy-outs of drugs).
  - (b) A private and private hospital patient, including a patient admitted in a closed hospital contemplated in section 58 (2) of the Ordinance, of implanted prostheses which have not been made available by the Superintendent-General for provision to such patient: Cost + 15%;
  - (c) A private and a private hospital patient of Occupational, Speech, and Physiotherapy Services: According to the Uniform Patient Fee Schedule as published by the National Department of Health and amended from time to time.
  - (d) A hospital patient, a private and a private hospital patient of orthotic prosthetic aids: Tariffs according to the Uniform Patient Fee Schedule as published by the National Department of Health and amended from time to time.

**Draft Amendment**  
**Working Document - Not to be quoted**  
**10-Nov-00**

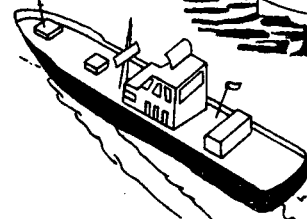
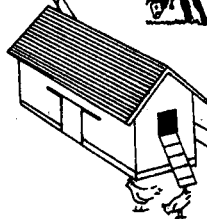
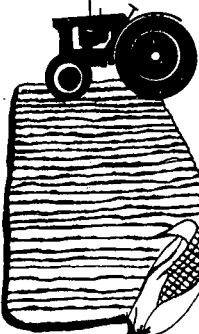
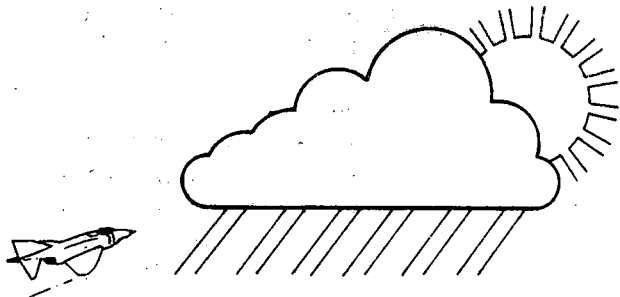
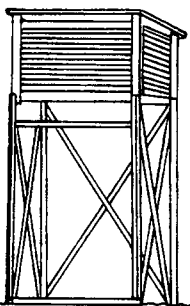
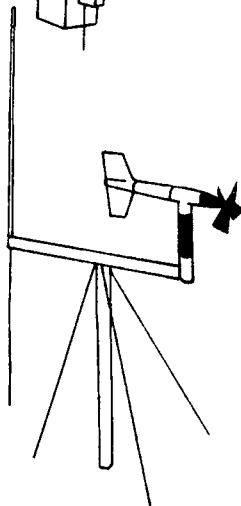
- (e) A resident baby, resident child or lodger in respect of private and a private hospital patient: Tariffs according to the Uniform Patient Fee Schedule as published by the National Department of Health and amended from time to time.
  - (f) A private and private hospital patient of the taking of a electrocardiogram: Tariffs according to the Uniform Patient Fee Schedule as published by the National Department of Health and amended from time to time.
  - (g) A private and private hospital patient of the taking of a electroencephalography: Tariffs according to the Uniform Patient Fee Schedule as published by the National Department of Health and amended from time to time.
  - (h) A private and private hospital patient of ultrasonic investigations: Tariffs according to the Uniform Patient Fee Schedule as published by the National Department of Health and amended from time to time.
  - (i) A patient companion of accommodation: A tariff equal to the tariff applicable to the patient being accompanied.
  - (j) A foreign patient who visits the Republic of South Africa exclusively for medical treatment or the performance of elective procedures, of hospitalisation: Double the tariff applicable to a private patient in terms of Schedule B of the Regulations.
- Item 8. The use of hospital apparatus by private and private hospital patients are included in the daily accommodation rate as determined by the Uniform Patient Fee Schedule, published by the National Department of Health and amended by them from time to time.
- Item 9. Radiotherapy to private and private hospital patients: According to BHF Scale of Benefits less VAT.
6. The provisions of these regulations shall not apply to any person-
- (a) Who is an in-patient immediately preceding 1 November 2000; or
  - (b) Whose admission and classification as an in-patient had been approved before 1 November 2000 and for the period ending on the date upon which he/she is discharged from the hospital concerned.

*Short title and commencement*

7. These regulations shall be called the Amendment Regulations relating to the Classification of and Fees payable by patients at Gauteng Provincial Hospitals, and shall be deemed to have come into operation on 1 November 2000.

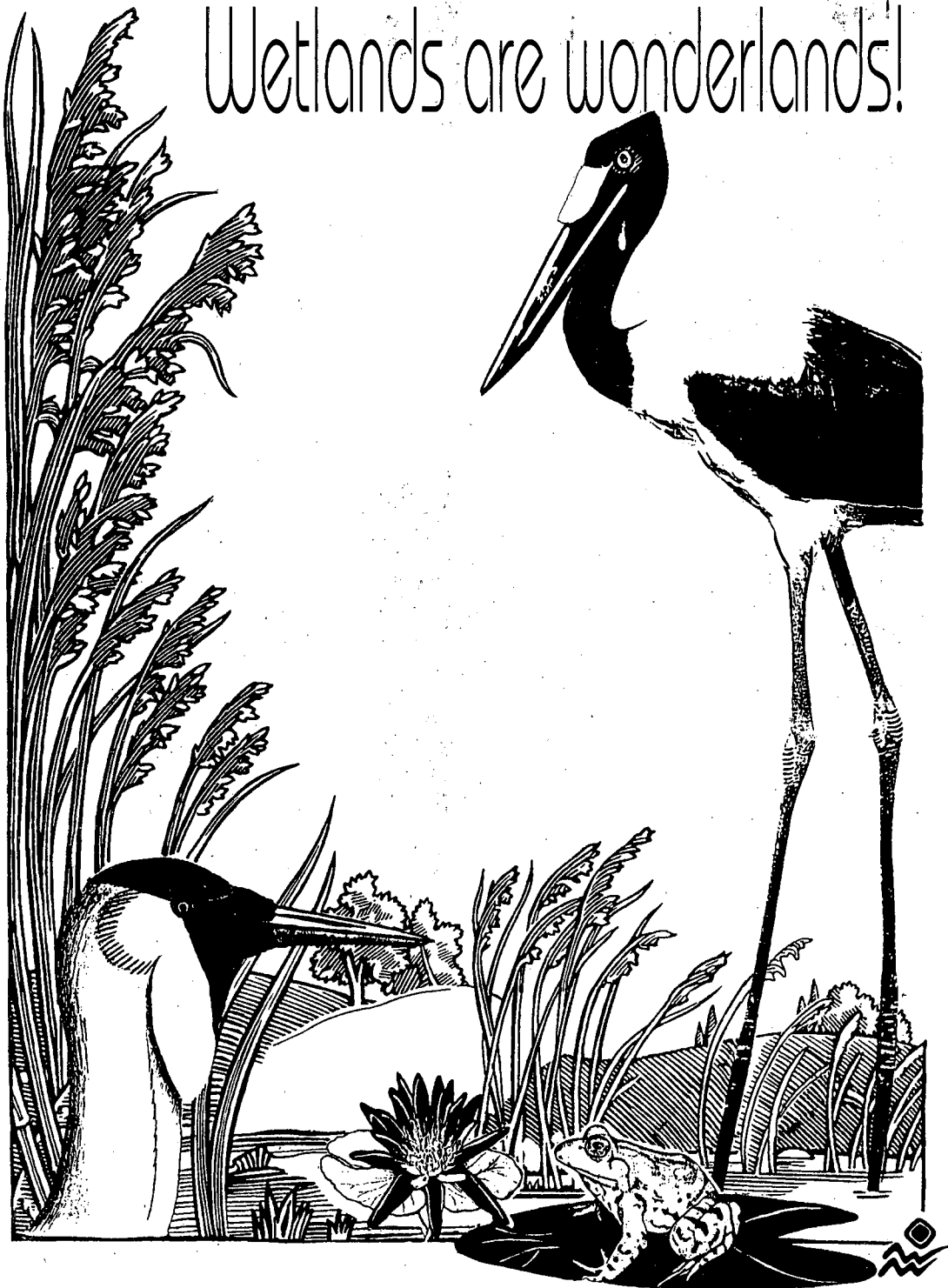
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