
GENERAL NOTICE

NOTICE 214 OF 2013

DEPARTMENT OF LABOUR

COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASES ACT, 1993 (ACT NO. 130 OF 1993), AS AMENDED

ANNUAL INCREASE IN MEDICAL TARIFFS FOR MEDICAL SERVICES PROVIDERS, PHARMACIES, AMBULANCES AND HOSPITAL GROUPS

1. I, Nelisiwe Mildred Oliphant Minister of Labour, hereby give notice that, after consultation with the Compensation Board and acting under powers vested in me by section 97 of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act No. 130 of 1993), I prescribe the scale of "Fees for Medical Aid" payable under section 76, inclusive of the General Rule applicable thereto, appearing in the Schedule to this notice, with effect from **1 April 2013**
2. The fees appearing in the Schedule are applicable in respect of services rendered on or after **1 April 2013** and **Exclude VAT**.


N M OLIPHANT

MINISTER OF LABOUR

DATE: 29/01/2013

GENERAL INFORMATION / ALGEMENE INLIGTING

THE EMPLOYEE AND THE MEDICAL SERVICE PROVIDER

The employee is permitted to freely choose his own service provider e.g. doctor, pharmacy, physiotherapist, hospital, etc. and no interference with this privilege is permitted, as long as it is exercised reasonably and without prejudice to the employee or to the Compensation Fund. The only exception to this rule is in case where an employer, with the approval of the Compensation Fund, provides comprehensive medical aid facilities to his employees, i.e. including hospital, nursing and other services — section 78 of the Compensation for Occupational Injuries and Diseases Act refers.

In terms of section 42 of the Compensation for Occupational Injuries and Diseases Act the Compensation Fund may refer an injured employee to a specialist medical practitioner of his choice for a medical examination and report. Special fees are payable when this service is requested.

In the event of a change of medical practitioner attending to a case, the first doctor in attendance will, except where the case is transferred to a specialist, be regarded as the principal. **To avoid disputes regarding the payment for services rendered, medical practitioners should refrain from treating an employee already under treatment by another doctor without consulting / informing the first doctor.** As a general rule, changes of doctor are not favoured by the Compensation Fund, unless sufficient reasons exist.

According to the National Health Act no 61 of 2003, Section 5, a health care provider may not refuse a person emergency medical treatment. Such a medical service provider should not request the Compensation Fund to authorise such treatment before the claim has been submitted to and accepted by the Compensation Fund. **Pre-authorisation of treatment is not possible and no medical expense will be approved if liability for the claim has not been accepted by the Compensation Fund.**

An employee seeks medical advice at his own risk. If an employee represented to a medical service provider that he is entitled to treatment in terms of the Compensation for Occupational Injuries and Diseases Act, and yet failed to inform the Compensation Commissioner or his employer of any possible grounds for a claim, the Compensation Fund cannot accept responsibility for medical expenses incurred. The Compensation Commissioner could also have reasons not to accept a claim lodged against the Compensation Fund. In such circumstances the employee would be in the same position as any other member of the public regarding payment of his medical expenses.

Please note that from 1 January 2004 a certified copy of an employee's identity document will be required in order for a claim to be registered with the Compensation Fund. If a copy of the identity document is not submitted the claim will not be registered but will be returned to the employer for attachment of a certified copy of the employee's identity document. Furthermore, all supporting documentation submitted to the Compensation Fund must reflect the identity number of the employee. If the identity number is not included such documents can not be processed but will be returned to the sender to add the ID number.

The tariff amounts published in the tariff guides to medical services rendered in terms of the Compensation for Occupational Injuries and Diseases Act do not include VAT. All accounts for services rendered will be assessed without VAT. Only if it is indicated that the service provider is registered as a VAT vendor and a VAT registration number is provided, will VAT be calculated and added to the payment, without being rounded off.

The only exception is the “per diem” tariffs for Private Hospitals that already include VAT.

Please note that there are VAT exempted codes in the private ambulance tariff structure.

**CLAIMS WITH THE COMPENSATION FUND ARE PROCESSED AS
FOLLOWS •**

EISE TEEN DIE VERGOEDINGSFONDS WORD AS VOLG GEHANTEER

1. New claims are registered by the Compensation Fund and the **employer is notified of the claim number** allocated to the claim. The allocation of a claim number by the Compensation Fund, does not constitute acceptance of liability for a claim, but means that the injury on duty has been reported to and registered by the Compensation Commissioner. Enquiries regarding claim numbers should be directed to the employer and not to the Compensation Fund. The employer will be in the position to provide the claim number for the employee as well as indicate whether the claim has been accepted by the Compensation Fund • *Nuwe eise word geregistreer deur die Vergoedingsfonds en die werkgewer word in kennis gestel van die eisnommer. Navrae aangaande eisnommers moet aan die werkgewer gerig word en nie aan die Vergoedingskommissaris nie. Die werkgewer kan die eisnommer verskaf en ook aandui of die Vergoedingsfonds die eis aanvaar het of nie*
2. If a claim is **accepted** as a COIDA claim, **reasonable medical expenses** will be paid by the Compensation Commissioner • *As 'n eis deur die Vergoedingsfonds aanvaar is, sal redelike mediese koste betaal word deur die Vergoedingsfonds.*
3. If a claim is **rejected (repudiated)**, accounts for services rendered will not be paid by the Compensation Commissioner. The employer and the employee will be informed of this decision and the injured employee will be liable for payment. • *As 'n eis deur die Vergoedingsfonds afgekeur (gerepudieer) word, word rekenings vir dienste gelewer nie deur die Vergoedingsfonds betaal nie. Die betrokke partye insluitend die diensverskaffers word in kennis gestel van die besluit. Die beseerde werknemer is dan aanspreeklik vir betaling van die rekenings.*
4. If **no decision** can be made regarding acceptance of a claim due to inadequate information, the outstanding information will be requested and upon receipt, the claim will again be adjudicated on. Depending on the outcome, the accounts from the service provider will be dealt with as set out in 2 and 3. Please note that there are claims on which a decision might never be taken due to lack of forthcoming information • *Indien geen besluit oor die aanvaarding van 'n eis weens 'n gebrek aan inligting geneem kan word nie, sal die uitstaande inligting aangevra word. Met ontvangs van sulke inligting sal die eis heroorweeg word. Afhangende van die uitslag, sal die rekening gehanteer word soos uiteengeset in punte 1 en 2. Ongelukkig bestaan daar eise waaroor 'n besluit nooit geneem kan word nie aangesien die uitstaande inligting nooit verskaf word nie.*

BILLING PROCEDURE • EISPROSEDURE

1. The **first account** for services rendered for an injured employee (INCLUDING the First Medical Report) must be submitted to the employer who will collate all the necessary documents and submit them to the Compensation Commissioner • *Die eerste rekening (INSLUITEND die Eerste Mediese Verslag) vir dienste gelewer aan 'n beseerde werknemer moet aan die werkgever gestuur word, wat die nodige dokumentasie sal versamel en dit aan die Vergoedingskommissaris sal voorlê*
2. Subsequent accounts must be submitted or posted to the closest Labour Centre. It is important that all requirements for the submission of accounts, including supporting information, are met • *Daaropvolgende rekeninge moet ingedien of gepos word aan die naaste Arbeidsentrum. Dit is belangrik dat al die voorskrifte vir die indien van rekeninge nagekom word, insluitend die voorsiening van stawende dokumentasie*
3. If accounts are still outstanding after 60 days following submission, the service provider should complete an enquiry form, W.Cl 20, and submit it ONCE to the Labour Centre. All relevant details regarding Labour Centres are available on the website www.labour.gov.za • *Indien rekenings nog uitstaande is na 60 dae vanaf indiening en ontvangserkenning deur die Vergoedingskommissaris, moet die diensverskaffer 'n navraag vorm, W.Cl 20 voltooi en EENMALIG indien by die Arbeidsentrum. Alle inligting oor Arbeidsentrums is beskikbaar op die webblad www.labour.gov.za*
4. If an account has been **partially paid** with no reason indicated on the remittance advice, a duplicate account with the unpaid services clearly marked can be submitted to the Labour Centre, accompanied by a WCl 20 form. (*see website for example of the form). • *Indien 'n rekening gedeeltelik betaal is met geen rede voorsien op die betaaladvies nie, kan 'n duplikaatrekening met die wanbetaling duidelik aangedui, vergesel van 'n WCl 20 vorm by die Arbeidsentrum ingedien word (*sien webblad vir 'n voorbeeld van die vorm)*
5. **Information NOT to be reflected** on the account: Details of the employee's medical aid and the practice number of the referring practitioner • *Inligting wat NIE aangedui moet word op die rekening nie: Besonderhede van die werknemer se mediese fonds en die verwysende geneesheer se praktyknommer*
6. Service providers **should not generate** • *Diensverskaffers moenie die volgende lewer nie:*
 - a. **Multiple accounts** for services rendered on the **same date** i.e. one account for medication and a second account for other services • *Meer as een rekening vir dienste gelewer op dieselfde datum, bv. medikasie op een rekening en ander dienste op 'n tweede rekening*
 - b. **Accumulative accounts** - submit a separate account for every month • *Aaneenlopende rekeninge –lewer 'n aparte rekening vir elke maand*
 - c. **Accounts on the old documents** (W.Cl 4 / W.Cl 5/ W.Cl 5F) New *First Medical Report (W.Cl 4) and Progress / Final Medical Report (W.Cl 5 / W.Cl 5F) forms

are available. The use of the old reporting forms combined with an account (W.CL11) has been discontinued. **Accounts on the old medical reports will not be processed** • *Rekeninge op die ou voorgeskrewe dokumente van die Vergoedingskommissaris. Nuwe *Eerste Mediese Verslag (W.Cl 4) en Vorderings / Finale Mediese Verslag (W.Cl 5) vorms is beskikbaar. Die vorige verslagvorms gekombineer met die rekening (W.CL11) is vervang. Rekeninge op die ou vorms word nie verwerk nie.*

- * **Examples of the new forms (W.Cl 4 / W.Cl 5 / W.Cl 5F) are available on the website www.labour.gov.za** •
- * *Voorbeelde van die nuwe vorms (W.Cl 4 / W.Cl 5 / W.Cl 5F) is beskikbaar op die webblad www.labour.gov.za*

MINIMUM REQUIREMENTS FOR ACCOUNTS RENDERED •
MINIMUM VEREISTES VIR REKENINGE GELEWER

Minimum information to be indicated on accounts submitted to the Compensation Fund • *Minimum besonderhede* wat aangedui moet word op rekeninge gelewer aan die Vergoedingsfonds

- Name of employee and ID number • *Naam van werknemer en ID nommer*
- Name of employer and registration number if available • *Naam van werkgewer en registrasienommer indien beskikbaar*
- Compensation Fund claim number • *Vergoedingsfonds eisnommer*
- DATE OF ACCIDENT (not only the service date) • *DATUM VAN BESERING (nie slegs die diensdatum nie)*
- Service provider's reference and **invoice number** • *Diensverskaffer se verwysing of **faktuur nommer***
- The practice number (changes of address should be reported to BHF) • *Die praktyknommer (adresveranderinge moet by BHF aangemeld word)*
- VAT registration number (VAT will not be paid if a VAT registration number is not supplied on the account) • *BTW registrasienommer (BTW sal nie betaal word as die BTW registrasienommer nie voorsien word nie)*
- Date of service (the actual service date must be indicated: the invoice date is not acceptable) • *Diensdatum (die werklike diensdatum moet aangedui word: die datum van lewering van die rekening is nie aanvaarbaar nie)*
- Item codes according to the officially published tariff guides • *Item kodes soos aangedui in die amptelik gepubliseerde handleidings tot tariewe*
- Amount claimed per item code and total of account • *Bedrag geëis per itemkode en totaal van rekening.*
- It is important that all requirements for the submission of accounts are met, including supporting information, e.g. • *Dit is belangrik dat alle voorskrifte vir die indien van rekeninge insluitend dokumentasie nagekom word bv.*
 - All pharmacy or medication accounts must be accompanied by the original scripts • *Alle apteekrekenings vir medikasie moet vergesel word van die oorspronklike voorskrifte*
 - The referral notes from the treating practitioner must accompany all other medical service providers' accounts. • *Die verwysingsbriewe van die behandelende geneesheer moet rekeninge van ander mediese diensverskaffers vergesel*

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| <p>RULES GOVERNING THE TARIFF ● REËLS VAN TOEPASSING OP DIE TARIEF</p> <p>PLEASE NOTE: The interpretations/comments as published in the SAMA Doctors' Billing Manual (DBM) must also be adhered to when rendering health care services under the Compensation for Occupational Injuries and Diseases Act, 1993</p> | | | | | | | |
| <p>A. Consultations: Definitions ● Konsultasies: Definisies</p> <p>(a) New and established patients: A consultation/visit refers to a clinical situation where a medical practitioner personally obtains a patient's medical history, performs an appropriate clinical examination and, if indicated, administers treatment, prescribes or assists with advice. These services must be face-to-face with the patient and excludes the time spent doing special investigations which receives additional remuneration ● Nuwe en bestaende pasiënte: 'n Konsultasie/besoek verwys na 'n kliniese situasie waar 'n mediese praktisyn persoonlik 'n pasiënt se siektegeskiedenis afneem, 'n toepaslike kliniese ondersoek uitvoer en indien aangedui behandeling toedien of voorskryf, of die pasiënt van raad bedien. Hierdie dienste moet met die pasiënt persoonlik wees en sluit die tyd gebruik om spesiale ondersoeke uit te voer, waarvoor bykomende vergoeding geëis kan word, uit</p> <p>(b) Subsequent visits: Refers to a voluntarily scheduled visit performed within four (4) months after the first visit. It may imply taking down a medical history and/or a clinical examination and/or prescribing or administering of treatment and/or counselling ● Opvolgbesoeke: Verwys na 'n willekeurig geskeduleerde besoek wat binne vier (4) maande na 'n eerste konsultasie uitgevoer word. Dit kan die afneem van 'n siektegeskiedenis en/of kliniese ondersoek en /of die voorskryf of toedien van behandeling en/of raadgewing behels</p> <p>(c) Hospital visits: Where a procedure or operation was performed, hospital visits are regarded as part of the normal after-care and no fees may be levied (unless otherwise indicated). Where no procedure or operation was carried out, fees may be charged for hospital visits according to the appropriate hospital or inpatient follow-up visit code ● Hospitaalbesoeke: In gevalle waar 'n prosedure of operasie deur 'n geneesheer uitgevoer is, word hospitaalbesoeke beskou as deel van die normale nasorg en mag geen gelde gehef word nie (behalwe waar anders aangedui). In gevalle waar daar nie 'n prosedure of operasie uitgevoer is nie, mag gelde volgens die toepaslike hospitaalopvolgbesoek item gehef word</p> | | | | | | | |
| <p>B. Normal hours and after hours: Normal working hours comprise the periods 08:00 to 17:00 on Mondays to Fridays, 08:00 to 13:00 on Saturdays, and all other periods voluntarily scheduled (even when for the convenience of the patient) by a medical practitioner for the rendering of services. All other periods are regarded as after hours. Public holidays are not regarded as normal working days and work performed on these days is regarded as after-hours work. Services are scheduled involuntarily for a specific time, if for medical reasons the doctor should not render the service at an earlier or later opportunity. Please note: Items 0146 and 0147 (emergency consultations) as well as modifier 0011 (emergency theatre procedures) are only applicable in the after hours period)</p> | | | | | | | |

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| <p>Nood en ongekeduleer konsultasie</p> <p>C. Comparable services: The fee that may be charged in respect of the rendering of a service not listed in this tariff of fees or in the SAMA guideline, shall be based on the fee in respect of a comparable service. For procedures/services not in this tariff of fees but in the SAMA guideline, item 6999 (unlisted procedure or service code), should be used with the SAMA code. Motivation for the use of a comparable item must be provided. Note: Rule C and item 6999 may not be used for comparable pathology services (sections 21, 22 and 23) ●</p> <p>Vergelykbare dienste: Die bedrag wat gehef kan word ten opsigte van die lewering van 'n diens wat nie in hierdie tariefhandleiding of in die SAMA riglyn ingesluit is nie, moet gebaseer wees op die bedrag vir 'n vergelykbare diens. Vir prosedures en dienste nie in hierdie tarief maar wel in die SAMA riglyn, moet item 6999: (ongespesifiseerde procedure/diens), gebruik word saam met die SAMA item om hierdie diens aan te dui. Motivering vir die gebruik van 'n vergelykbare item moet verskaf word. Let Wel: Reël C en item 6999 is nie van toepassing op vergelykbare patologiese dienste (afdeling 21, 22 en 23) nie</p> <p>D. Cancellation of appointments: Unless timely steps are taken to cancel an appointment for a consultation the relevant consultation fee may be charged. In the case of an injured employee, the relevant consultation fee is payable by the employee.) In the case of a general practitioner "timely" shall mean two hours and in the case of a specialist 24 hours prior to the appointment. Each case shall, however, be considered on merit and, if circumstances warrant, no fee shall be charged. If a patient has not turned up for a procedure, each member of the surgical team is entitled to charge for a visit at or away from doctor's rooms as the case may be ●</p> <p>Kansellasië van afspraak: Tensy stappe vroegetydig gedoen word om 'n afspraak vir 'n konsultasie te kanselleer, kan die betrokke konsultasiegelde gehef word. In geval van 'n beseerde werknemer, is die werknemer aanspreeklik vir die konsultasiegelde. In die geval van 'n algemene praktisyn beteken "vroegetydig" twee ure en in die geval van 'n spesialis 24 ure voor die afspraak. Elke geval word egter op meriete hanteer en, indien omstandighede dit regverdig, word geen gelde gehef nie. Indien 'n pasiënt nie opgedaag het vir 'n prosedure nie, is elke lid van die chirurgiese span geregtig om gelde te hef vir 'n besoek by of weg van die dokter se spreekkamers na gelang van die geval</p> | | | | | | | |
| <p>E. Pre-operative visits: The appropriate fee may be charged for all pre-operative visits with the exception of a routine pre-operative visit at the hospital, as that routine pre-operative visit is included in the global surgical fee for the procedure ● Pre-operatiewe besoeke: Die toepaslike gelde mag gehef word vir alle pre-operatiewe besoeke met die uitsondering van 'n roetine pre-operatiewe besoek by die hospitaal, aangesien daardie roetine pre-operatiewe besoek by die globale chirurgiesegelde vir die prosedure ingesluit is.</p> <p>F. Administering of injections and/or infusions: Where applicable, fees for administering injections and/or infusions may only be charged when done by the practitioner himself ● Toediening van inspuittings en/of infusies: Waar toepaslik, mag gelde vir die toediening van inspuittings en/of infusies alleenlik gehef word indien deur die praktisyn self toegedien</p> | | | | | | | |

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| <p>G. Post-operative care ● Post-operatiewe sorg:</p> <p>(a) Unless otherwise stated, the fee in respect of an operation or procedure shall include normal after-care for a period not exceeding FOUR months (after-care is excluded from pure diagnostic procedures during which no therapeutic procedures were performed) ● Tensy anders vermeld, sluit die gelde ten opsigte van 'n operasie of prosedure normale nasorg in oor 'n tydperk wat nie VIER maande oorskry nie (nasorg is uitgesluit van suiwer diagnostiese prosedures waartydens geen terapeutiese prosedures uitgevoer is nie)</p> <p>(b) If the normal after-care is delegated to any other registered health professional and not completed by the surgeon it shall be his/her own responsibility to arrange for the service to be rendered without extra charge ● Indien die normale nasorg aan 'n ander geregistreerde gesondheidswerker gedelegeer word en nie deur die chirurg voltooi word nie, sal dit sy/haar verantwoordelikheid wees om te reël dat die diens gelewer word sonder enige bykomende betaling</p> <p>(c) When the care of post-operative treatment of a prolonged or specialised nature is required, such fee as may be agreed upon between the surgeon and the Compensation Fund may be charged ● Wanneer na-operatiewe behandeling van 'n langdurige of gespesialiseerde aard benodig word, mag gelde waaroor die chirurg en die Vergoedingsfonds ooreengekom het, gehef word</p> <p>(d) Normal aftercare refers to uncomplicated post-operative period not requiring any further surgical incision</p> <p>(e) Abnormal aftercare refers to post-operative complications and treatment not requiring any further incisions and will be considered for payment.</p> | | | | | | | |
| <p>H. Removal of lesions: Items involving removal of lesions include follow-up treatment for four months ● Verwydering van letsels: Waar 'n letsel verwyder word, sluit die vergoeding ook vier maande opvolg in</p> | | | | | | | |
| <p>I. Pathological investigations performed by clinicians: Fees for all pathological investigations performed by members of other disciplines (where permissible) - refer to modifier 0097: Items that resort under Clinical and Anatomical Pathology: See section for Pathology ● Patologiese ondersoeke uitgevoer deur klinici: Gelde vir alle patologiese ondersoeke wat uitgevoer word deur lede van ander dissiplines (waar toelaatbaar) - verwys na wysiger 0097: Items wat onder Kliniese en Anatomiese Patologie ressorteer: Raadpleeg afdeling Patologie</p> | | | | | | | |
| <p>J. Disproportionately low fees: In exceptional cases where the fee is disproportionately low in relation to the actual services rendered by a medical practitioner, a higher fee may be negotiated. Conversely, if the fee is disproportionately high in relation to the actual services rendered, a lower fee than that in the tariff should be charged ● Buite verhouding lae gelde: In buitengewone gevalle waar die gelde buite verhouding laag is in vergelyking met die werklike dienste deur 'n geneesheer gelewer, is hoër gelde onderhandelbaar. Aan die anderkant, as die gelde buite verhouding hoog is met betrekking tot die werklike dienste gelewer, moet 'n laer bedrag as dié wat in die tariefkode aangegee word, gehef word</p> | | | | | | | |

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| <p>K. Services of a specialist, upon referral: Save in exceptional cases the services of a specialist shall be available only on the recommendation of the attending general practitioner. Medical practitioners referring cases to other medical practitioners shall, if known to them, indicate in the referral letter that the patient was injured in an "accident" and this shall also apply in respect of specimens sent to pathologists ● Dienste van 'n spesialis, na verwysing: Behalwe in buitengewone gevalle is die dienste van 'n spesialis beskikbaar slegs op aanbeveling van die algemene praktisyn wat die geval hanteer. Geneeshere wat pasiënte na ander geneeshere verwys, moet, indien hulle daarvan bewus is dat die pasiënt in 'n "ongeval" beseer is, dit in die verwysingsbrief meld en dieselfde geld ten opsigte van monsters wat na patoloë gestuur word</p> | | | | | | | |
| <p>L. Procedures performed at time of visits: If a procedure is performed at the time of a consultation/visit, the fee for the visit PLUS the fee for the procedure is charged ● Prosedures uitgevoer tydens besoeke: Indien 'n prosedure uitgevoer word tydens 'n konsultasie/besoek, word die bedrag vir die besoek SOWEL as die bedrag vir die prosedure gehef</p> | | | | | | | |
| <p>M. Surgical procedure planned to be performed later: In cases where, during a consultation/visit, a surgical procedure is planned to be performed at a later occasion, a visit may not be charged for again, at such a later occasion ● Chirurgiese prosedure beplan om later uit te voer: In gevalle waar 'n chirurgiese prosedure tydens 'n konsultasie/besoek beplan word om by 'n latere geleentheid uitgevoer te word, mag by sodanige latere uitvoering van die prosedure nie weer gelde gehef word vir 'n besoek nie</p> | | | | | | | |
| <p>N. Rendering of accounts for occupational injuries and diseases ● Lewering van rekeninge vir beroepsbeserings en siektes</p> <p>(a) "Per consultation": No additional fee may be charged for a service for which the fee is indicated as "per consultation". Such services are regarded as part of the consultation/visit performed at the time the condition is brought to the doctor's attention ● "Per konsultasie": Geen bykomende gelde kan vir dienste waarvoor die tarief aangedui word as "per konsultasie", gehef word nie. Sulke dienste word gereken as deel van die konsultasie/besoek waartydens die toestand onder die geneesheer se aandag gebring word</p> <p>(b) Where a fee for a service is prescribed in this guideline, the medical practitioner shall not be entitled to payment calculated on a basis of the number of visits or examinations made where such calculation would result in the prescribed fee being exceeded ● Waar gelde ten opsigte van enige diens in hierdie handleiding voorgeskryf is, is die geneesheer nie op betaling, bereken op die aantal besoeke afgelê of die aantal ondersoeke gedoen, geregtig as so 'n berekening die voorgeskrewe tarief oorskry nie</p> | | | | | | | |
| <p>(c) The number of consultations/visits must be in direct relation to the seriousness of the injury and should more than 20 visits be necessary, the Compensation Fund must be furnished with a detailed motivation ● Die aantal konsultasies/besoeke moet in direkte verhouding staan tot die erns van die besering en indien meer as 20 besoeke benodig word, moet volledige motivering aan die Vergoedingsfonds voorgelê word</p> | | | | | | | |

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| <p>(d) A single fee for a consultation/visit shall be paid to a medical practitioner for the once-off treatment of an injured employee who thereafter passes into the permanent care of another medical practitioner, not a partner or assistant of the first. The responsibility of furnishing the First Medical Report in such a case rests with the second practitioner ● Gelde ten opsigte van een konsultasie/besoek word aan 'n geneesheer betaal vir die eenmalige behandeling van 'n beseerde werknemer wat daarna na die permanente sorg van 'n ander geneesheer wat nie 'n vennoot of assistent van eersgenoemde geneesheer is nie, oorgeplaas word. In so 'n geval berus die verantwoordelikheid om die Eerste Mediese Verslag te verstrek op die tweede praktisyn</p> | | | | | | | |
| <p>O. Costly or prolonged medical services or procedures ● Duur of langdurige mediese dienste of prosedures</p> <p>(a) An employee should be hospitalised only when and for the length of period that his condition justifies full-time medical assistance ● Hospitalisasie van 'n werknemer moet slegs geskied indien en vir solank as wat sy toestand voltydse geneeskundige hulp vereis</p> <p>(b) Occupational therapy/Physiotherapy: The same principals as set out in modifier 0077: Two areas treated simultaneously for totally different conditions, will apply when an employee is referred to a therapist ● Arbeidsterapie/Fisioterapie: Indien 'n werknemer verwys word na 'n terapeut sal dieselfde beginsels geld soos in wysiger 0077: Twee afsonderlike areas wat tegelykertyd behandel word vir heeltemal verskillende toestande</p> <p>(c) In case of costly or prolonged medical services or procedures the medical practitioner shall first ascertain in writing from the Compensation Fund if liability is accepted for such treatment ● In geval van duur of langdurige mediese dienste of prosedures, moet die geneesheer skriftelik vooraf by die Vergoedingsfonds vasstel of verantwoordelikheid vir die betaling aanvaar word vir die spesifieke behandeling</p> | | | | | | | |
| <p>P. Travelling fees ● Reisgelde:</p> <p>(a) Where, in cases of emergency, a practitioner was called out from his residence or rooms to a patient's home or the hospital, travelling fees can be charged according to the section on travelling expenses (section IV) if the practitioner had to travel more than 16 kilometres in total ● Waar 'n praktisyn in noodgevallé vanaf sy huis of kamers na 'n pasiént se woning of 'n hospitaal uitgeroep word, kan reisgelde gehef word volgens die afdeling aangaande reiskoste (afdeling IV) indien die praktisyn meer as 16 kilometers in totaal moes aflê</p> <p>(b) If more than one patient is attended to during the course of a trip, the full travelling expenses must be divided between the relevant patients ● Indien meer as een pasiént tydens 'n reis aandag geniet, moet die volle reisgeld pro rata tussen die pasiënte verdeel word</p> <p>(c) A practitioner is not entitled to charge for any travelling expenses or travelling time to his rooms ● 'n Praktisyn is nie geregtig om gelde te hef vir enige reiskoste of reistyd na sy kamers nie</p> | | | | | | | |
| <p>(d) Where a practitioner's residence is more than 8 kilometres away from a hospital, no travelling fees may be charged for services rendered at such a hospital, except in cases of emergency (services not voluntarily scheduled) ● Waar 'n praktisyn se woning meer as 8 kilometer vanaf 'n hospitaal geleë is, mag geen reisgelde gehef word vir dienste gelewer in sodanige hospitaal nie, behalwe in noodgevallé (onwillekeurig geskeduleerde dienste)</p> | | | | | | | |

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| <p>(e) Where a practitioner conducts an itinerant practice, he is not entitled to charge fees for travelling expenses except in cases of emergency (services not voluntarily scheduled) ● As 'n praktisyn 'n rondreisende praktyk bedryf, is hy nie geregtig om reisgelde te hef nie, behalwe in noodgevalle (onwillekeurig geskeduleerde dienste)</p> <p>INTENSIVE CARE ● INTENSIEWE SORG RULES GOVERNING THIS SPECIFIC SECTION OF THE TARIFF CODE ● REËLS VAN TOEPASSING OP HIERDIE SPESIFIEKE AFDELING VAN DIE TARIEFKODE</p> <p>Q. Intensive care/High care: Units in respect of item codes 1204 to 1210 (Categories 1 to 3) EXCLUDE the following ● Intensiewe sorg/Hoë sorg: Eenhede vir itemkodes 1204 tot 1210 (Kategorieë 1 tot 3) SLUIT die volgende UIT:</p> <p>(a) Anaesthetic and/or surgical fees for any condition or procedure, as well as a first consultation/visit fee for the initial assessment of the patient, while the daily intensive care/high care fee covers the daily care in the intensive care/high care unit ● Narkose en/of chirurgiesegelde vir enige toestand of prosedure, sowel as 'n eerste konsultasie/besoekgelde wat die eerste evaluasie van die pasiënt dek terwyl die intensiewe sorg/hoë sorg tarief die daaglikse sorg in die intensiewe sorgseenheid insluit</p> <p>(b) Cost of any drugs and/or materials ● Koste van medisyne en /of materiaal</p> <p>(c) Any other cost that may be incurred before, during or after the consultation/visit and/or the therapy ● Enige ander koste wat ontstaan voor, tydens of na die konsultasie/besoek en/of terapie</p> <p>(d) Blood gases and chemistry tests, including arterial puncture to obtain specimens ● Bloedgasondersoeke of chemiese bloedtoetse, insluitend arteriële punksie om bloedmonsters te verkry</p> <p>(e) Procedural item codes 1202 and 1212 to 1221 ● Prosedure itemkodes 1202 en 1212 tot 1221 but INCLUDE the following ● maar SLUIT die volgende IN:</p> <p>(f) Performing and interpreting of a resting ECG ● Uitvoering en vertolking van 'n rustende EKG</p> <p>(g) Interpretation of blood gases, chemistry tests and x-rays ● Vertolking van bloedgasse, biochemiese toetse en x-strale</p> <p>(h) Intravenous treatment (item codes 0206 and 0207) ● Intraveneuse behandeling (itemkodes 0206 en 0207)</p> <p>R. Multiple organ failure: Units for item codes 1208, 1209 and 1210 (Category 3: Cases with multiple organ failure) include cardio-respiratory resuscitation (item 1211) ● Veelvuldige orgaan versaking: Eenhede vir itemkodes 1208, 1209 en 1210 (Kategorie 3: Gevalle met veelvuldige orgaan versaking) sluit kardia-respiratoriese resussitasie (item 1211) in</p> | | | | | | | |

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| <p>S. Ventilation: Units for item codes 1212, 1213 and 1214 (ventilation) include the following ● Ventilasie: Eenhede vir itemkodes 1212, 1213 en 1214 (ventilasie) sluit die volgende in:</p> <p>(a) Measurement of minute volume, vital capacity, time- and vital capacity studies ● Bepaling van minuutvolume, vitale kapasiteit, tyd- en vitale kapasiteitstudies</p> <p>(b) Testing and connecting the machine ● Toets en verbinding van masjien</p> <p>(c) Setting up and coupling patient to machine: setting machine, synchronising patient with machine ● Pasiënt aan die masjien verbind: stel van masjien en sinchronisasie van pasiënt met masjien</p> <p>(d) Instruction to nursing staff ● Opdragte aan verpleegpersoneel</p> <p>(e) All subsequent visits for the first 24 hours ● Alle daaropvolgende besoeke gedurende die eerste 24 uur</p> | | | | | | | |
| <p>T. Ventilation (item codes 1212 to 1214) does not form part of normal post-operative care, but may not be added to item code 1204: Category 1: Cases requiring intensive monitoring ● Ventilasie (itemkodes 1212 tot 1214) maak nie deel uit van normale na-operatiewe sorg nie, maar mag nie by itemkode 1204: Kategorie 1: Gevalle wat intensiewe monitering vereis gevoeg word nie</p> <p>RULES GOVERNING THE SECTION RADIOLOGY: MAGNETIC RESONANCE IMAGING ● REËLS VAN TOEPASSING OP DIE AFDELING RADIOLOGIE: MAGNETIESE RESONANSIE BEELDING</p> | | | | | | | |
| <p>W. Magnetic Resonance Imaging ● Magnetiese Resonansie Beelding</p> <p>(a) Complete Annexure A and Annexure B, submit report of the investigation and an invoice. ● Voltooi Bylaag A en Bylaag B voorsien verslag van die ondersoek en 'n rekening</p> <p>(b) Item code 6270 - Proper motivation must be submitted upon which the Compensation Fund will consider approval for payment ● Itemkode 6270 - Mediese motivering moet voorgelê word waarna goedkeuring vir betaling deur die Vergoedingsfonds oorweeg sal word</p> <p>RULES GOVERNING THE SECTION MEDICAL PSYCHOTHERAPY ● REËLS VAN TOEPASSING OP DIE AFDELING MEDISE PSIGOTERAPIE</p> <p>Note ● Opmerking:</p> <p>(a) Prior approval must be obtained from the Compensation Fund before any treatment resorting under this section is carried out ● Enige behandeling ingevolge hierdie afdeling moet vooraf deur die Vergoedingsfonds goedgekeur word</p> <p>(b) Where approval has been obtained, treatment must be limited to 12 sessions only, after which the patient must be referred back to the referring doctor for an evaluation and report to the Compensation Fund ● Waar goedkeuring verleen is moet die behandeling beperk word tot 12 sessies waarna die pasient na die verwysende geneesheer terugverwys moet word vir evaluasie en verslag aan die Vergoedingsfonds</p> | | | | | | | |
| <p>Va. Electro-convulsive treatment: Visits at hospital or nursing home during a course of electro-convulsive treatment are justified and may be charged for in addition to the fees for the procedure ● Elektro-konvulsiewe behandeling: Besoeke by 'n hospitaal of verpleeginrigting tydens 'n kursus elektro-konvulsiewe behandeling is geregtig en gelde kan daarvoor gehef word, bo en behalwe die gelde vir die prosedure</p> | | | | | | | |

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| <p>Vb. When adding psychotherapy items to a first or follow-up consultation item, the clinician must ensure that the time stipulated in the psychotherapy items are adhered to (i.e. item 2957 - minimum 10 minutes, item 2974 - minimum 30 minutes, and item 2975 - minimum 50 minutes) ● Indien psigoterapie items by 'n eerste of opvolgkonsultasie gevoeg word, moet die klinikus verseker dat die tyd soos gestipuleer in die psigoterapie items toegepas word (i.e item 2957 - minimum 10 minute, item 2974 - minimum 30 minute en item 2975 - minimum 50 minute)</p> <p>RULES GOVERNING THE SECTION RADIOLOGY ● REËLS VAN TOEPASSING OP DIE AFDELING RADIOLOGIE</p> <p>Y. Except where otherwise indicated, radiologists are entitled to charge for contrast material used ● Behalwe waar anders aangedui, mag radioloë eis vir die koste van kontras materiaal wat gebruik is</p> <p>Z. No fee to is subject to more than one reduction ● Geen gelde is onderworpe aan meer as een vermindering nie</p> <p>RULE GOVERNING THE SUBSECTION ON DIAGNOSTIC PROCEDURES REQUIRING THE USE OF RADIO-ISOTOPES ● REËL VAN TOEPASSING OP DIAGNOSTIESE PROSEDURES WAT DIE GEBRUIK VAN RADIO-ISOTOPE VEREIS</p> <p>AA. Procedures exclude the cost of isotope used ● Prosedures sluit die koste van die isotoop gebruik uit</p> <p>RULE GOVERNING THE SECTION RADIATION ONCOLOGY ● REËL VAN TOEPASSING OP DIE AFDELING STRALINGSONKOLOGIE</p> <p>BB. The fees in this section (radiation oncology) do NOT include the cost of radium or isotopes ● Die tariewe in hierdie afdeling (stralingsonkologie) sluit NIE die koste van radium of isotope in NIE</p> <p>RULE GOVERNING ULTRASOUND EXAMINATIONS ● REËL VAN TOEPASSING OP ULTRASONIESE ONDERSOEKE</p> <p>EE. (a) In case of a referral, the referring doctor must submit a letter of motivation to the radiologist or other practitioner performing the scan. A copy of the letter of motivation must be attached to the first account rendered to the Compensation Fund by the radiologist ● In geval van 'n verwysing, moet die verwysende geneesheer 'n skriftelike motivering verskaf aan die radioloog of ander geneesheer wat die ondersoek doen. 'n Afskrif van die motivering moet aangeheg word aan die eerste rekening wat aan die Vergoedingsfonds voorgelê word deur die radioloog</p> <p>(b) In case of a referral to a radiologist, no motivation is required from the radiologist himself ● In geval van 'n verwysing na 'n radioloog, word geen motivering van die radioloog self vereis nie</p> | | | | | | | |

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| | <p>RULES GOVERNING THE SECTION URINARY SYSTEM ● REËLS VAN TOEPASSING OP DIE AFDELING URIENSTELSEL</p> <p>FF. (a) When a cystoscopy precedes a related operation, modifier 0013: Endoscopic examination done at an operation, applies, e.g. cystoscopy followed by transurethral (T U R) prostatectomy ● Wanneer 'n sistoskopie 'n verwante operasie voorafgaan, geld wysiger 0013: Endoskopiese ondersoek uitgevoer tydens 'n operasie, byvoorbeeld sistoskopie gevolg deur transuretrale prostatektomie</p> <p>(b) When a cystoscopy precedes an unrelated operation, modifier 0005: Multiple procedures/operations under the same anaesthetic, applies, e.g. cystoscopy for urinary tract infection followed by inguinal hernia repair ● Wanneer 'n sistoskopie 'n onverwante operasie voorafgaan, geld wysiger 0005: Meer as een procedure/operasie onder dieselfde narkose, byvoorbeeld sistoskopie vir urinêre infeksie gevolg deur liesbreukherstel</p> <p>(c) No modifier applies to item code 1949: Cystoscopy, when performed together with any of item codes 1951 to 1973 ● Geen wysiger is van toepassing op itemkode 1949: Sistoskopie, wanneer dit saam met enige van itemkodes 1951 tot 1973 uitgevoer word nie</p> | | | | | | | |
| | <p>RULE GOVERNING THE SECTION RADIOLOGY ● REËL VAN TOEPASSING OP DIE AFDELING RADIOLOGIE</p> <p>GG. Capturing and recording of examinations: Images from all radiological, ultrasound and magnetic resonance imaging procedures must be captured during every examination and a permanent record generated by means of film, paper, or magnetic media. A report of the examination, including the findings and diagnostic comment, must be written and stored for five years ● Vaslegging en rekordhouding van ondersoeke: Beelde van alle radiologiese, ultraklank-, en magnetiese resonansiebeeldingprosedures moet tydens elke ondersoek vasgelê word en 'n permanente rekord moet deur middel van film, papier, of magnetiese media gegenereer word. 'n Skriftelike verslag van die ondersoek, insluitende die bevindings en diagnostiese kommentaar, moet opgestel en vir vyf jaar geberg word</p> | | | | | | | |

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| MODIFIERS GOVERNING THE TARIFF CODES • WYSIGERS VAN TOEPASSING OP DIE TARIEFKODES | | | | | | | |
| MODIFIER GOVERNING THE RADIOLOGY AND RADIATION ONCOLOGY SECTIONS OF THE TARIFF CODES • WYSIGER VAN TOEPASSING OP DIE RADIOLOGIE- EN STRALINGSONKOLOGIE-AFDELINGS VAN DIE TARIEFKODES | | | | | | | |
| 0001 | 100 | 1 822.00 | | | | | |
| Emergency or unscheduled radiological services: For emergency or unscheduled radiological services (Refer to rule B) the additional fee shall be 50% of the fee for the particular service (section 19.12: Portable unit examinations excluded). Emergency and unscheduled MR scans, a maximum levy of 100.00 Radiological units is applicable | | | | | | | |
| MODIFIER GOVERNING A RADIOLOGIST REQUESTED TO PROVIDE A REPORT ON X-RAYS • WYSIGER VAN TOEPASSING OP 'N RADIOLOOG WAT VERSOEK IS OM 'N VERSLAG OOR X-STRALE TE VOORSIEN | | | | | | | |
| 0002 | | | | | | | |
| Written report on X-rays: The lowest level item code for a new patient (consulting rooms) consultation is applicable only when a radiologist is requested to provide a written report on X-rays taken elsewhere and submitted to him. The above mentioned item code and the lowest level item code for an initial hospital consultation are not to be utilised for the routine reporting on X-rays taken elsewhere • Geskrewe verslag oor X-strale: Die laagste vlak itemkode vir 'n nuwe pasiënt (spreekkamer) besoek, is van toepassing slegs wanneer 'n radioloog gevra word om 'n skriftelike verslag te voorsien aangaande X-strale wat elders geneem is en aan hom voorgelê word. Die bogemelde item en die laagste vlak itemkode vir 'n aanvanklike hospitaal besoek, moet nie gebruik word vir die roetine verslaggewing aangaande X-strale wat elders geneem is nie | | | | | | | |
| 0005 | | | | | | | |
| Multiple therapeutic procedures/operations under the same anaesthetic • Meer as een terapeutiese procedure/operasie onder dieselfde narkose: (a) Unless otherwise identified in the tariff , when multiple procedures/operations add significant time and/or complexity, and when each procedure/operation is clearly identifiable and defined, the following values shall prevail: 100% (full value) for the first or major procedure/operation, 75% for the second procedure/operation , 50% for the third procedure/operation , 25% for the fourth and subsequent procedures/operations. This modifier does not apply to purely diagnostic procedures. (b) In case of multiple fractures and/or dislocations the above values also prevail. | | | | | | | |
| (c) When purely diagnostic endoscopic procedures or diagnostic endoscopic procedures unrelated to any therapeutic procedure are performed under the same general anaesthetic, modifier 0005 is not applicable to the fees for such diagnostic endoscopic procedures as the fees for endoscopic procedures do not provide for after-care. Specify unrelated endoscopic procedures and provide a diagnosis to indicate diagnostic endoscopic procedure(s) unrelated to other therapeutic procedures performed under the same anaesthetic. | | | | | | | |
| (d) Please note: When more than one small procedure is performed and the tariff makes provision for item codes for "subsequent" or "maximum for multiple additional procedures" (see Section 2. Integumentary System) modifier 0005 is not applicable as the fee is already a reduced fee | | | | | | | |
| (e) Plus ("+") means that this item is used in addition to another definitive procedure and is therefore not subject to reduction according to modifier 0005 (see also modifier 0082) | | | | | | | |

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| <p>APPLICATION OF MODIFIER 0005 IN CASES WHERE BONE GRAFT PROCEDURES AND INSTRUMENTATION ARE PERFORMED IN COMBINATION WITH ARTHRODESIS (FUSION) ● TOEPASSING VAN WYSIGER 0005 IN GEVALLE WAAR BEENOORPLANTINGS-PROSEDURES EN INSTRUMENTASIE IN KOMBINASIE MET ARTRODESE (FUSIE) UITGEVOER WORD</p> <p>(f) Modifier 0005 (multiple procedures/operations under the same anaesthetic) is not applicable if the following procedures are performed together ● Wysiger 0005 (veelvuldige prosedures/operasies onder dieselfde narkose), is nie van toepassing wanneer die volgende prosedures saam uitgevoer word nie:</p> <p>1. Bone graft procedures and instrumentation are to be charged in addition to arthrodesis ● Beenoorplantings-prosedures en instrumentasie word bykomend tot artrodese gehef</p> <p>2. When vertebral procedures are performed by arthrodesis, bone grafts and instrumentation may be charged for additionally ● Indien vertebrale prosedures uitgevoer word deur artrodese, mag beenoorplantings en instrumentasie addisioneel voor gehef word</p> <p>(g) Modifier 0005 (Multiple procedures/operations under the same anaesthetic) would be applicable when an arthrodesis is performed in addition to another procedure, e.g. osteotomy or laminectomy ● Wysiger 0005 (veelvuldige prosedures onder dieselfde narkose), sal van toepassing wees waar 'n artrodese saam met 'n ander prosedure bv. osteotomie of laminektomie uitgevoer word</p> | | | | | | | |
| <p>0006 A 25% reduction in the fee for a subsequent operation for the same condition within one month shall be applicable if the operations are performed by the same surgeon (an operation subsequent to a diagnostic procedure is excluded). After a period of one month the full fee is applicable ● 'n 25% vermindering in die gelde van 'n daaropvolgende operasie, binne een maand, vir dieselfde siektetoestand, is van toepassing indien die operasies deur dieselfde chirurg uitgevoer word ('n operasie wat volg op 'n diagnostiese prosedure is uitgesluit). Indien 'n daaropvolgende operasie na meer as een maand uitgevoer word, is die volle gelde betaalbaar</p> | | | | | | | |
| <p>0007 (a) Use of own monitoring equipment in the rooms: Remuneration for the use of any type of own monitoring equipment in the rooms for procedures performed under intravenous sedation – 15.00 clinical procedure units irrespective of the number of items of equipment provided ● Gebruik van eie monitering toerusting in die kamers: Vergoeding vir die gebruik van enige tipe eie monitering toerusting in kamers vir prosedures wat onder intraveneuse sedasie uitgevoer word – 15.00 kliniese prosedure eenhede, ongeag die aantal items van toerusting wat voorsien word</p> <p>(b) Use of own equipment in hospital or unattached theatre unit: Remuneration for the use of any type of own equipment for procedures performed in a hospital theatre or unattached theatre unit when appropriate equipment is not provided by the hospital - 15.00 clinical procedure units irrespective of the number of items of equipment provided ● Gebruik van eie toerusting in hospitaalteater of losstaande teater eenheid: Vergoeding vir die gebruik van enige tipe eie toerusting vir prosedures wat in 'n hospitaalteater of losstaande teater eenheid uitgevoer word, indien sodanige toerusting nie deur die hospitaal verskaf word nie – 15.00 kliniese prosedure eenhede, ongeag die aantal items van toerusting wat voorsien word</p> <p>(c) Use of own equipment by <u>Audiologists</u> in the rooms: Basic sound booth. - Used once per claim for compensation purposes. - To be added to the consultation fee , with a descriptor.</p> | 15 | 261.30 | 15 | 261.30 | | | |
| <p>0008 Specialist surgeon assistant: Where a procedure REQUIRES a registered specialist surgeon assistant, the tariff is 33,33% (1/3) of the fee for the specialist surgeon ● Spesialis chirurgiese assistent : Waar 'n prosedure 'n geregistreerde spesialis chirurgiese assistent VEREIS, is die tarief 33,33% (1/3) van die spesialis chirurg se gelde</p> | 4.76 | 82.92 | 4.76 | 82.92 | | | |

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| 0009 | <p>Assistant: The fee for an assistant is 20% of the fee for a specialist surgeon, with a minimum of 36.00 clinical procedure units - the minimum fee payable may not be less than 36,00 clinical procedures units ● Assistent: Die gelde vir 'n assistent is 20% van 'n spesialis chirurg se gelde met 'n minimum van 36.00 kliniese prosedure eenhede - die minimum gelde betaalbaar mag nie minder as 36,00 kliniese prosedure eenhede beloop nie.</p> | | | | | | |
| 0010 | <p>Local anaesthetic ● Lokale verdowing: (a) A fee for a local anaesthetic administered by the practitioner may only be charged for (1) an operation or a procedure with a value of greater than 30.00 clinical procedure units (i.e. 31.00 or more clinical procedure units allocated to a single item) or (2) where more than one operation or procedure is done at the same time with a combined value of greater than 50.00 clinical procedure units ● Gelde mag gehief word vir plaaslike verdowing toegedien deur die praktisyn wat die operasie uitvoer, slegs vir 'n operasie of prosedure met 'n waarde van meer as 30.00 kliniese prosedure eenhede (d.i. 31.00 of meer kliniese prosedure eenhede) toegeken aan 'n enkele item) of (2) waar meer as een operasie of prosedure wat terselfder tyd uitgevoer word, 'n gekombineerde waarde van meer as 50.00 kliniese prosedure eenhede dra</p> | | | | | | |
| | 50 | 871.00 | 50 | 871.00 | | | |
| | <p>(b) The fee for a local anaesthetic administered shall be calculated according to the basic anaesthetic units for the specific operation. Anaesthetic time may not be charged for, but the minimum fee as per modifier 0035: Anaesthetic administered by an anaesthesiologist/anaesthetist, shall be applicable in such a case ● Die gelde vir plaaslike verdowing toegedien word bereken volgens die basiese narkose-eenhede van die spesifieke operasie, met weglating van die narkose tydsfaktor, maar die minimum tarief soos per wysiger 0035: Narkose toegedien deur 'n anesthesioloog/narkotiseur, sal van toepassing wees in sodanige geval</p> <p>(c) The fee for a local anaesthetic administered is not applicable to radiological procedures such as angiography and myelography ● Die gelde vir plaaslike verdowing toegedien is nie van toepassing op radiologiese prosedures soos angiografie en mielografie nie</p> <p>(d) No fee may be levied for the topical application of local anaesthetic ● Geen gelde mag gehief word vir die topikale aanwending van lokale verdowing nie</p> <p>(e) Please note: Modifier 0010: Local anaesthetic administered by the operator may not be added onto the surgeon's account for procedures that were performed under general anaesthetic ● Let wel: Wysiger 0010: Plaaslike verdowing toegedien deur die praktisyn wat die operasie uitvoer, mag nie saam met prosedures wat onder algemene narkose uitgevoer is op die chirurg se rekening gehief word nie</p> | | | | | | |
| 0011 | 12 | 209.04 | 12 | 209.04 | | | |
| | <p>Theatre procedures for emergency surgery: Any bona fide, justifiable emergency procedure, only applicable during after-hour periods – see general rule B, undertaken in an operating theatre, will justify the charging of an additional 12.00 clinical procedure units per half-hour or part thereof, of the operating time for all members of the surgical team. Modifier 0011 does not apply to patients on scheduled lists (PLEASE INDICATE TIME IN MINUTES) ● Teaterprosedures vir noodchirurgie: Vir enige bona fide, regverdigbare noodprosedure - slegs van toepassing gedurende na-ure periodes (vergelyk algemene reël B) - wat in 'n operasietheater uitgevoer word, kan 'n bykomende 12.00 kliniese prosedure eenhede gehief word per halfuur of deel daarvan wat die operasie duur, deur alle lede van die chirurgiese span. Wysiger 0011 is nie van toepassing op pasiënte op geskeduleerde lyste nie. (DUI ASSEBLIEF DIE TYDSDUUR IN MINUTE AAN)</p> | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| <p>0013 Endoscopic examinations done at operations : Where a <u>related</u> endoscopic examination is performed at an operation by the surgeon or the attending anaesthesiologist, only 50% of the fee for the endoscopic examination may be charged ● Endoskopiese ondersoeke tydens prosedures : Waar 'n <u>verwante</u> endoskopiese ondersoek uitgevoer word by 'n operasie deur die chirurg of die anesthesioloog, mag slegs 50% van die gelde vir die endoskopiese ondersoek gehef word</p> | | | | | | | |
| <p>0014 Operations previously performed by other surgeons ● Operasies voorheen uitgevoer deur ander chirurge :</p> <p>(a) Use modifier 0014(a) for information only as an indicator that the operation was previously performed by another surgeon ● Wysiger 0014(a) is slegs vir inligtingsdoeleindes en dui aan dat die prosedure voorheen deur 'n ander chirurg uitgevoer is.</p> | | | | | | | |
| <p>(b) Where an operation is performed which has previously been performed by another surgeon, e.g. a revision or repeat operation, the fee may be calculated according to the tariff for the full operation plus an additional fee to be negotiated under general rule J: In exceptional cases where the fee is disproportionately low in relation to actual service rendered, except where already specified in the tariff ● Wanneer 'n operasie uitgevoer word wat vantevore deur 'n ander chirurg uitgevoer is, byvoorbeeld 'n hersteloperasie of herhaling van 'n operasie, kan die gelde bereken word volgens die volle operasietarief plus addisionele gelde onderhandelbaar ingevolge algemene reël J: In buitengewone gevalle waar die gelde buite verhouding laag is in vergelyking met die werklike dienste gelewer, behalwe in gevalle waar dit alreeds gespesifiseer is in die tarief</p> | | | | | | | |
| <p>INJECTIONS, INFUSIONS AND INHALATION SEDATION ● INSPUITINGS, INFUSIES EN INHALASIE SEDASIE MODIFIERS GOVERNING THIS SPECIFIC SECTION OF THE TARIFF CODE ● WYSIGERS VAN TOEPASSING OP HIERDIE SPESIFIEKE AFDELING VAN DIE TARIEFKODE</p> | | | | | | | |
| <p>0015 Intravenous infusions : Where intravenous infusions (including blood and blood cellular products) are administered as part of the after-treatment after an operation, no extra fees shall be charged as the after-treatment is included in the global fee for the procedure. Should the practitioner performing the operation prefer to request another practitioner to perform post-operative intravenous infusions, the practitioner himself (and not the Compensation Fund) shall be responsible for remunerating such practitioner for the infusions ● Binne-aarse infusies : Waar binne-aarse infusie (bloed en bloedselprodukte ingesluit) as deel van die nabehandeling van 'n operasie toegedien word, word geen ekstra gelde daarvoor gehef nie, omdat die nabehandeling by die globale operasiegelde ingesluit is. Indien die geneesheer wat die operasie hanteer, verkies om 'n ander geneesheer te vra om binne-aarse infusie na die operasie toe te dien, is hyself (en nie die Vergoedingsfonds nie) teenoor sodanige geneesheer vir die vergoeding vir die infusies verantwoordelik.</p> | | | | | | | |
| <p>0017 Injections administered by practitioners: When desensitisation, intravenous, intramuscular or subcutaneous injections are administered by the practitioner him-/herself to patients who attend the consulting rooms, a first injection forms part of the consultation/visit and only all subsequent injections for the same condition should be charged according to item 0131 (not chargeable together with a consultation item) ● Inspuitings deur praktisyns toegedien: Wanneer desensitiserings-, binne-aarse, binnespiers- of onderhuidse inspuitings deur die praktisyn self aan pasiënte toegedien word wat die spreekkamers besoek, vorm toediening van 'n eerste inspuiting deel van die konsultasie/besoek en slegs vir alle daaropvolgende inspuitings vir dieselfde toestand word gelde volgens item 0131 gehef (nie hefbaar saam met 'n konsultasie kode nie)</p> | | | | | | | |

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| <p>MODIFIER GOVERNING SURGERY ON PERSONS WITH A BODY MASS INDEX (BMI) OF MORE THAN 35 WYSIGER VAN TOEPASSING OP CHIRURGIE OP PERSONE MET 'N LIGGAAMSMASSAINDEKS (LMI) VAN MEER AS 35</p> <p>0018 Surgical modifier for persons with a BMI of higher than 35 (calculated according to $\text{kg/m}^2 = \text{weight in kilograms divided by height in metres squared}$): Fee for the procedure +50% of the fee for surgeons; 50% increase in anaesthetic time units for anaesthesiologists Chirurgiese wysiger vir persone met 'n LMI van meer as 35 (bereken volgens kg/m^2): Gelde vir die prosedure +50% van die gelde vir chirurgie; verhoging van 50% in narkose tydseenhede vir anesthesioloë.</p> | | | | | | | |
| <p>MODIFIERS GOVERNING THE ADMINISTRATION OF ANAESTHESIA FOR ALL THE PROCEDURES AND OPERATIONS INCLUDED IN THIS GUIDE TO TARIFFS • WYSIGERS VAN TOEPASSING OP DIE TOEDIENING VAN NARKOSE VIR ALLE PROSEDURES EN OPERASIES WAT IN HIERDIE TARIEF HANDLEIDING OPGENEEM IS</p> <p>0021 Determination of anaesthetic fees: Anaesthetic fees are determined by adding the basic anaesthetic units (allocated to each procedure that can be performed under anaesthesia indicated in the anaesthetic column) and the time units (calculated according to the formula in modifier 0023) and the appropriate modifiers (see modifiers 0037-0044). In case of operative procedures on the musculo-skeletal system, open fractures and open reduction of fractures or dislocations, add units as laid down by modifiers 5441 to 5448 • Bepaling van narkosegelde: Narkosegelde word bereken deur die som te verkry van die basiese narkose-eenhede (toegeken aan elke prosedure wat onder narkose uitgevoer kan word en aangedui in die narkose kolom) en die tydeenhede (bereken volgens die formule in wysiger 0023) en die toepaslike wysigers (verwys na wysigers 0037-0044). In geval van operatiewe prosedures aan die spier-skeletstelsel, oop frakture en oop reduksie van frakture en ontwortings, tel eenhede by soos uitgelê in wysigers 5441 tot 5448</p> | | | | | | | |
| <p>0023 The basic anaesthetic units are laid down in the guide to tariffs and are reflected in the anaesthetic column. These basic anaesthetic units reflect the anaesthetic risk, the technical skill required of the anaesthesiologist/anaesthetist and the scope of the surgical procedure, but exclude the value of the actual time spent administering the anaesthetic. The time units (indicated by "T") will be added to the listed basic anaesthetic units in all cases on the following basis • Die basiese narkose-eenhede word in die riglyn tot tariewe voorgeskryf en word in die narkose kolom aangedui. Hierdie basiese narkose-eenhede is 'n weergawe van die narkoserisiko, die tegniese vaardigheid benodig deur die anesthesioloog/narkotiseur en die omvang van die chirurgiese prosedure, maar sluit nie die waarde van die tyd in wat deur die toediening van narkose in beslag geneem word nie. Tydeenhede (aangedui deur "T") sal in alle gevalle by die voorgeskrewe basiese narkose-eenhede gevoeg word, en wel op die volgende wyse:</p> | | | | | | | |
| <p>Anaesthetic time: The remuneration for anaesthetic time shall be per 15 minute period or part thereof, calculated from the commencement of the anaesthesia, at 2.00 anaesthetic units is (R162.84) per 15 minute period or part thereof for the first hour. Should the duration of the anaesthesia be longer than one (1) hour the number of units shall be increased to 3.00 anaesthetic units (R244.26) per 15 minute period or part thereof after the first hour • Narkosetyd: Vergoeding vir narkosetyd word bepaal per 15-minuutperiode of deel daarvan, bereken vanaf die aanvang van die narkose teen 2.00 narkose-eenhede is (R162.84) per 15-minuutperiode of deel daarvan vir die eerste uur. Indien die narkose langer as een (1) uur duur word die aantal eenhede verhoog na 3.00 narkose-eenhede (R244.26) per 15 minute of deel daarvan na die eerste uur</p> | 2 | 162.84 | 2 | 162.84 | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| 0024 | 3 | 244.26 | 3 | 244.26 | | | |
| <p>Pre-operative assessment not followed by a procedure: If a pre-operative assessment of a patient by the anaesthesiologist/anaesthetist is not followed by an operation, the assessment will be regarded as a consultation at a hospital or nursing home and the appropriate hospital consultation fee should be charged ● Voor-narkose evaluasie wat nie deur 'n operasie gevolg word nie: Indien 'n voor-narkose evaluasie van 'n pasiënt deur die anesthesioloog/narkotiseur nie gevolg word deur 'n operasie nie, word die evaluasie as 'n besoek by die hospitaal of verpleeginrigting beskou en die toepaslike hospitaalbesoek gelde behoort gehê te word</p> | | | | | | | |
| 0025 | | | | | | | |
| <p>Calculation of anaesthesia time: Anaesthesia time is calculated from the time that the anaesthesiologist/ anaesthetist begins to prepare the patient for the induction of anaesthesia in the operating theatre or in a similar equivalent area and ends when the anaesthesiologist/anaesthetist is no longer required to give his/her personal professional attention to the patient, i.e. when the patient may, with reasonable safety, be placed under the customary post-operative nursing supervision. Where prolonged personal professional attention is necessary for the well-being and safety of a patient, the additional time spent can be charged for at the same rate as indicated above for anaesthesia time. The anaesthesiologist/anaesthetist must record the exact anaesthesia time and the additional time spent supervising the patient on the account submitted ●</p> <p>Berekening van narkosetyd: Narkosetyd word bereken vanaf die tydstip waarop die anesthesioloog/narkotiseur die pasiënt begin voorberei vir die induksie van narkose in die operasietheater of in 'n soortgelyke area en eindig wanneer die persoonlike professionele aandag van die anesthesioloog/narkotiseur nie meer deur die pasiënt benodig word nie; wanneer die pasiënt binne redelike perke van veiligheid aan die gewone na-operatiewe verpleegsorg toevertrou kan word. Waar persoonlike, professionele aandag vir die beswil en veiligheid van die pasiënt vir 'n langer tydperk benodig word, word die gelde daarvoor bereken op dieselfde wyse soos hierbo uiteengesit ten opsigte van narkosetyd. Die anesthesioloog/narkotiseur moet op die rekening die presiese narkosetyd asook die bykomende versorgingstyd wat die pasiënt benodig het aandui</p> | | | | | | | |
| 0027 | | | | | | | |
| <p>More than one procedure under the same anaesthesia: Where more than one operation is performed under the same anaesthesia, the basic anaesthetic units will be that of the operation with the highest number of units ● Meer as een operasie onder dieselfde narkose: Wanneer meer as een operasie onder dieselfde narkose uitgevoer word, sal die basiese narkose-eenhede gelykstaan aan dié van die operasie wat die hoogste aantal eenhede dra</p> | | | | | | | |
| 0029 | | | | | | | |
| <p>Assistant anaesthesiologists: When rendered necessary by the scope of the anaesthesia, an assistant anaesthesiologist may be employed. The remuneration of the assistant anaesthesiologist shall be calculated on the same basis as in the case of a general practitioner administering the anaesthesia ● Assistant anesthesioloog: Wanneer die omvang van 'n narkose dit vereis, kan gebruik gemaak word van die dienste van 'n assistant anesthesioloog. Die assistant anesthesioloog se vergoeding sal op dieselfde basis bereken word as in die geval van 'n algemene praktisyn wat narkose toedien</p> | | | | | | | |
| 0031 | | | | | | | |
| <p>Intravenous infusion and transfusions: Administering intravenous infusions and transfusions are considered to be a normal part of administering anaesthesia. No additional fees may be charged for such services when rendered either prior to, or during actual theatre or operating time ● Intraveneuse infusies en transfusies: Intraveneuse infusies en transfusies word beskou as deel van die normale toediening van 'n narkose. Geen bykomende gelde mag vir sodanige dienste gehê word wanneer dit voor, of gedurende werklike teater- of operasietyd gelewer word nie</p> | | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| 0032 Patients in the prone position: Anaesthesia administered to patients in the prone position shall carry a minimum of 4.00 basic anaesthetic units. When the basic anaesthetic units for the procedure are 3.00, one additional anaesthetic unit (R81.42) should be added. If the basic anaesthetic units for the procedure are 4.00 or more (R325.68), no additional units should be added ● Pasiënte in buikliggende posisie: Narkose toegedien aan pasiënte in die buikliggende posisie sal 'n minimum van 4.00 basiese narkose-eenhede dra. Wanneer die basiese narkose-eenhede vir 'n prosedure 3.00 is, word een addisionele narkose-eenheid (R81.42) bygevoeg. Indien die basiese narkose-eenhede wat toegeken is aan die prosedure 4.00 of meer beloop (R325.68), word geen bykomende eenhede bygevoeg nie | 1 | 81.42 | 1 | 81.42 | | | |
| | 4 | 325.68 | 4 | 325.68 | | | |
| 0033 Participating in the general care of patients : When an anaesthesiologist/anaesthetist is required to participate in the general care of a patient during a surgical procedure, but does not administer the anaesthesia, such services may be remunerated at full anaesthetic rate, subject to the provisions of modifier 0035: Anaesthetic administered by a specialist anaesthesiologist/ anaesthetist and modifier 0036: Anaesthetic administered by a general practitioner ● Deelname aan die algemene sorg van pasiënte : Wanneer dit van 'n anesthesioloog/narkotiseur verlang word om deel te hê aan die algemene sorg van 'n pasiënt gedurende 'n chirurgiese prosedure, maar hy dien nie die narkose toe nie, mag sodanige dienste vergoed word teen die volle narkose tarief, onderworpe aan die bepalings van wysiger 0035: Narkose toegedien deur 'n spesialis-anesthesioloog/narkotiseur en wysiger 0036: Narkose toegedien deur 'n algemene praktisyn | | | | | | | |
| | | | | | | | |
| 0034 Head and neck procedures: All anaesthesia administered for diagnostic, surgical or X-ray procedures on the head and neck shall carry a minimum of 4.00 basic anaesthetic units. When the basic anaesthetic units for the procedure are 3.00, one extra anaesthetic unit (R81.42) should be added. If the basic anaesthetic units for the procedure are 4.00 or more (R325.68), no extra units should be added ● Kop- en nekprosedures: Alle narkose wat toegedien word vir diagnostiese, chirurgiese of X-straal prosedures aan die kop en nek, sal 'n minimum van 4.00 basiese narkose eenhede dra. Wanneer die basiese narkose eenhede vir die prosedure 3.00 is, word een addisionele narkose eenheid (R81.42) bygevoeg. Indien die basiese narkose eenhede wat toegeken is aan die prosedure 4.00 of meer beloop (R325.68), word geen bykomende eenhede bygevoeg nie | 1 | 81.42 | 1 | 81.42 | | | |
| | 4 | 325.68 | 4 | 325.68 | | | |
| 0035 Anaesthesia administered by an anaesthesiologist/ anaesthetist: No anaesthesia administered by an anaesthesiologist/anaesthetist shall carry a total value of less than 7.00 anaesthetic units (R569.94) comprising basic units, time units and the appropriate modifiers ● Narkose toegedien deur 'n anesthesioloog/narkotiseur: Geen narkose toegedien deur 'n anesthesioloog/narkotiseur sal 'n totale waarde van minder as 7.00 narkose eenhede (R569.94) beloop nie insluitend basiese eenhede, tydseenhede en toepaslike wysigers | 7 | 569.94 | 7 | 569.94 | | | |
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| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| <p>0036 Anaesthesia administered by general practitioners: The anaesthetic units (basic units plus time units plus the appropriate modifiers) used to calculate the fee for anaesthesia administered by a general practitioner lasting one hour or less shall be the same as that for an anaesthesiologist. For anaesthesia lasting more than one hour, the units used to calculate the fee for anaesthesia administered by a general practitioner will be 4/5 (80%) of that applicable to a specialist anaesthesiologist, provided that no anaesthesia lasting longer than one hour shall carry a total value of less than 7.00 anaesthetic units (R569.94). Please note that the 4/5 (80%) principle will be applied to all anaesthesia administered by general practitioners with the provision that no anaesthesia totalling more than 11.00 units would be reduced to less than 11.00 units in total. The monetary value of the unit is the same for both anaesthesiologists/anaesthetists ●</p> <p>Narkose toegedien deur algemene praktisyns: Gelde vir narkose deur 'n algemene praktisyn toegedien wat een uur of korter duur sal bereken word op dieselfde wyse (basiese eenhede plus tyd eenhede plus die toepaslike wysigers) as van toepassing op die anesthesioloog. Vir narkose wat langer as een uur duur sal die gelde van die algemene praktisyn bereken word teen 4/5 (80%) van die totale tarief van toepassing op die anesthesioloog met die voorbehoud dat geen narkose wat langer as een uur duur 'n totale waarde van minder as 7.00 narkose-eenhede (R569.94) sal beloop nie. Let asseblief op dat die 4/5 (80%) beginsel toegepas sal word op alle narkose toegedien deur algemene praktisyns met die voorwaarde dat geen narkose met 'n totale waarde van meer as 11.00 eenhede verlaag sal word na minder as 11.00 eenhede in totaal nie. Die geldwaarde van 'n eenheid bly dieselfde vir beide anesthesioloë/narkotiseurs</p> | 7 | 569.94 | 7 | 569.94 | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| <p>Note: Modifying units may be added to the basic anaesthetic unit value according to the following modifiers (0037-0044, 5441-5448) Opmerking: Wysigerseenhede mag tot die basiese narkose-eenhede bygevoeg word volgens die volgende wysigers (0037-0044, 5441-5448)</p> | | | | | | | |
| 0037 | | | | | 3 | 244.26 | |
| 0038 | | | | | 4 | 325.68 | |
| 0039 | | | | | 3 | 244.26 | |
| 0041 | | | | | 3 | 244.26 | |
| 0042 | | | | | 3 | 244.26 | |
| <p>MUSCULO-SKELETAL SYSTEM ● SPIER-SKELET STELSEL MODIFIERS GOVERNING ANAESTHETIC FEES FOR ORTHOPAEDIC OPERATIONS ● WYSIGERS VAN TOEPASSING OP NARKOSEGELDE VIR ORTOPEDIËSE OPERASIES Modifiers 5441 to 5448 ● Wysigers 5441 tot 5448 Modification of the anaesthetic fee in cases of operative procedures on the musculo-skeletal system, open fractures and open reduction of fractures and dislocations is governed by adding units indicated by modifiers 5441 to 5448. (The letter "M" is annotated next to the number of units of the appropriate items, for facilitating identification of the relevant items) ● Wysiging van die narkosetarief in gevalle van operatiewe prosedures op die spier-skeletstelsel, oop frakture en oop reduksie van frakture en ontwrigtings word gereël deur die byvoeging van eenhede soos deur wysigers 5441 tot 5448 aangedui. (Die letter "M" is aangeteken by die eenhede van die toepaslike items, ten einde identifikasie van die betrokke items te vergemaklik)</p> | | | | | | | |
| 5441 | | | | | 1 | 81.42 | |
| 5442 | | | | | 2 | 162.84 | |
| 5443 | | | | | 3 | 244.26 | |
| 5444 | | | | | 4 | 325.68 | |
| 5445 | | | | | 5 | 407.10 | |
| 5448 | | | | | 8 | 651.36 | |

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| | U/E | R | U/E | R | U/E | R | T/M |
| <p>0045 Post-operative alleviation of pain • Na-operatiewe pynverligting</p> <p>(a) When a regional or nerve block is performed in theatre for post-operative pain relief, the appropriate procedure item (items 2799-2804) will be charged, provided that it was not the primary anaesthetic technique • Wanneer 'n streeksblok of senuweeblok in die teater uitgevoer word vir post-operatiewe pynverligting, kan die toepaslike itemkode (items 2799-2804) gehef word, solank genoemde blok nie die primêre narkosetegniek is nie</p> <p>(b) When a regional or nerve block procedure is performed in the ward or nursing facility, the appropriate procedure item (items 2799-2804) will be charged, provided that it was not the primary anaesthetic technique • Wanneer 'n streeksblok of senuweeblok in die saal of verpleeginrigting uitgevoer word vir post-operatiewe pynverligting, kan die toepaslike itemkode (items 2799-2804) gehef word, solank genoemde blok nie die primêre narkosetegniek is nie</p> <p>(c) When a second medical practitioner has administered the regional or nerve block for post-operative alleviation of pain in the ward or nursing facility, it will be charged according to the particular procedure for instituting therapy. Revisits shall be charged according to the appropriate hospital follow-up visit to patient in ward or nursing facility • Wanneer 'n tweede mediese praktisyn die streeksblok of senuweeblok vir na-operatiewe pynverligting in die saal of verpleeginrigting toedien, sal gelde gehef word volgens die betrokke prosedure vir die toedien van die terapie. Herbesoeke word volgens die toepaslike opvolgbesoek vir 'n pasiënt by 'n saal of verpleeginrigting gehef</p> <p>(d) None of the above is applicable for routine post-operative pain management i.e. intramuscular, intravenous or subcutaneous administration of opiates or NSAID's (non-steroidal anti-inflammatory drugs) • Geeneen van die bogemelde is van toepassing op roetine na-operatiewe behandeling vir pyn, bv. binnespiers, binnearse of subkutane toediening van opiate, of NSAIDS (non-steroid anti-inflammatoriese middels) nie</p> | | | | | | | |

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| MODIFIER GOVERNING FEES FOR AN ANAESTHESIOLOGIST UTILISING AN INTRA-AORTIC BALLOON PUMP (CARDIOVASCULAR SYSTEM) ● WYSIGER VAN TOEPASSING OP GELDE VIR 'N ANESTESIOLOOG WAT GEBRUIK MAAK VAN 'N INTRA-AORTIESE BALLONPOMP (KARDIO-VASKUL&RESTELSEL) | | | | | | | |
| 0100 | | | | | 75 | 1 306.50 | |
| MUSCULO-SKELETAL SYSTEM ● SPIER-SKELETSTELSEL MODIFIERS GOVERNING THIS SPECIFIC SECTION OF THE TARIFF ● WYSIGERS VAN TOEPASSING OP HIERDIE SPESIFIEKE AFDELING VAN DIE TARIFF | | | | | | | |
| 0046 | | | | | | | |
| 0047 | | | | | | | |
| 0048 | 27 | 470.34 | 27 | 470.34 | | | |
| 0049 | 77 | 1 341.34 | 77 | 1 341.34 | | | |
| 0050 | | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| In geval van 'n oop fraktuur waar 'n debridement gevolg word deur interne fiksasie (uitgesluit fiksasie met Kirschner drade, sowel as frakture van hande en voete), mag die volle bedrag volgens wysiger 0049: Gevalle van oop frakture, of wysiger 0051: Frakture wat oop reduksie, interne fiksasie, buite-skeletfiksasie en/of beenoorplanting vereis, by die gelde vir die betrokke prosedure gevoeg word, plus die helfte van die bedrag volgens die tweede wysiger (of wysiger 0049: Gevalle van oop frakture, of wysiger 0051: Frakture wat oop reduksie, interne fiksasie, buite-skeletfiksasie en/of beenoorplanting vereis, soos toepaslik) | 115.5 | 2 012.01 | 115.5 | 2 012.01 | | | |
| 0051 Fractures requiring open reduction, internal fixation, external skeletal fixation and/or bone grafting: Specialists and general practitioners add 77.00 clinical procedure units ● Frakture wat oop reduksie, interne fiksasie, buite-skeletfiksasie en/of beenoorplanting vereis: Spesialiste en algemene praktisyns voeg 77.00 kliniese prosedure eenhede by | 77 | 1 341.34 | 77 | 1 341.34 | | | |
| 0053 Fractures requiring percutaneous internal fixation [insertion and removal of fixatives (wires) into of fingers and toes]: Specialists and general practitioners add 32.00 clinical procedure units ● Frakture wat perkutane interne fiksasie vereis [inplasing en verwydering van fikseermiddels (drade) ten opsigte van vingers en tone]: Spesialiste en algemene praktisyns voeg by 32.00 kliniese prosedure eenhede | 32 | 557.44 | 32 | 557.44 | | | |
| 0055 Dislocation requiring open reduction: Units for the specific joint plus 77.00 clinical procedure units for specialists and general practitioners ● Ontwrigting wat oop reduksie vereis: Eenhede vir die spesifieke gewrig plus 77.00 kliniese prosedure eenhede vir spesialiste en algemene praktisyns | 77 | 1 341.34 | 77 | 1 341.34 | | | |
| 0057 Multiple procedures on feet: In multiple procedures on feet, fees for the first foot are calculated according to modifier 0005: Multiple procedures/operations under the same anaesthetic. Calculate fees for the second foot in the same way, reduce the total by 50% and add to the total for the first foot ● Veelvuldige prosedures op voete: Met veelvuldige prosedures op voete word die gelde vir die eerste voet volgens wysiger 0005: Meer as een prosedure/operasie onder dieselfde narkose uitgewerk. Gelde vir die tweede voet word op dieselfde manier uitgewerk, die tweede totaal word na 50% verminder en by die totaal vir die eerste voet getel | | | | | | | |
| 0058 Revision operation for total joint replacement and immediate re-substitution (infected or non-infected): per fee for total joint replacement + 100% of the fee ● Hersieningsoperasie vir totale gewrigsvervangings en onmiddellike herinplasing (met of sonder infeksie): gelde soos vir totale gewrigsvervangings + 100% van die gelde | | | | | | | |

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| <p>MODIFIER GOVERNING COMBINED PROCEDURES ON THE SPINE ● WYSIGER VAN TOEPASSING OP GEKOMBINEERDE PROSEDURES OP DIE WERWELKOLOM</p> <p>0061 Combined procedures on the spine: In cases of combined procedures on the spine, both the orthopaedic surgeon and the neurosurgeon are entitled to the full fee for the relevant part of the operation performed ● Gekombineerde prosedures op die werwelkolom: In gevalle van gekombineerde prosedures op die werwelkolom, is beide die ortopediese chirurg en die neurochirurg geregtig op die volle gelde vir die deel van die operasie deur elkeen verrig</p> | | | | | | | |
| <p>MODIFIERS GOVERNING THE SUBSECTION REPLANTATION SURGEY ● WYSIGERS VAN TOEPASSING OP DIE ONDERAFDELING REPLANTASIE CHIRURGIE</p> <p>0063 Where two specialists work together on a replantation procedure, each shall be entitled to two-thirds of the fee for the procedure ● Indien twee spesialiste saam aan 'n replantasie prosedure werk, is elkeen geregtig op twee derdes van die gelde vir die prosedure</p> <p>0064 Where a replantation procedure (or toe to thumb transfer) is unsuccessful no further surgical fee is payable for amputation of the non-viable parts ● Indien 'n replantasie prosedure (of toon na duim verplanting) onsuksesvol is, is geen verdere gelde betaabaar vir amputasie van die nie-lewensvatbare dele nie</p> | | | | | | | |
| <p>MODIFIER GOVERNING THE SECTION LARYNX ● WYSIGER VAN TOEPASSING OP DIE AFDELING LARINKS</p> <p>0067 Microsurgery of the larynx: Add 25% to the fee for the procedure performed. (For other operations requiring the use of an operation microscope, the fee shall include the use of the microscope, except where otherwise specified in the Tariff Guide) ● Mikrochirurgie aan die larinks: Die bedrag soos vir die prosedure uitgevoer plus 25 % van die gelde (Die gelde vir ander operasies waar 'n operasie-mikroskoop gebruik moet word, sluit die gebruik van 'n operasie-mikroskoop in behalwe waar anders in die Tariefriglyn gespesifiseer)</p> | | | | | | | |
| <p>MODIFIERS GOVERNING NASAL SURGERY ● WYSIGERS VAN TOEPASSING OP CHIRURGIE VAN DIE NEUS</p> <p>0069 When endoscopic instruments are used during intranasal surgery: Add 10% of the fee for the procedure performed. Only applicable to items 1025, 1027, 1030, 1033, 1035, 1036, 1039, 1047, 1054 and 1083 ● Wanneer endoskopiese instrumente tydens intranasale chirurgie gebruik word: Voeg 10% van die gelde vir die prosedure wat uitgevoer is by. Slegs van toepassing op items 1025, 1027, 1030, 1033, 1035, 1036, 1039, 1047, 1054 en 1083</p> | | | | | | | |
| <p>MODIFIER GOVERNING OPEN PROCEDURE(S) WHEN PERFORMED THROUGH THORACOSCOPE ● WYSIGER VAN TOEPASSING OP OOP PROCEDURE(S) WANNEER TORAKOSKOPIES UITGEVOER WORD</p> <p>0070 Add 45.00 clinical procedure units to procedure(s) performed through a thoracoscope ● Voeg 45.00 kliniese prosedure-eenhede by oop prosedure(s) wat torakoskopies uitgevoer word</p> | 45 | 783.90 | 45 | 783.90 | | | |

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| <p>MODIFIER GOVERNING GASTROENTEROLOGY PROCEDURES ● WYSIGER VAN TOEPASSING OP GASTROENTEROLOGIESE PROSEDURES</p> <p>0074 Endoscopic procedures performed with own equipment: The basic procedure fee plus 33,33% (1/3) of that fee (plus ("+" codes excluded) will apply where endoscopic procedures are performed with own equipment ● Die basiese gelde vir die prosedure plus 33,33% (1/3) van die gelde (plus ("+" kodes uitgesluit) sal van toepassing wees op alle endoskopiese prosedures wat met eie toerusting uitgevoer word</p> | | | | | | | |
| <p>MODIFIER GOVERNING FEES FOR ENDOSCOPIC PROCEDURES ● WYSIGER VAN TOEPASSING OP GELDE VIR ENDOSKOPIESE PROSEDURES</p> <p>0075 Endoscopic procedures performed in own procedure room: The fee plus 21,00 clinical procedure units will apply where endoscopic procedures are performed in own procedure rooms. This fee is chargeable by medical practitioners who own or rent the facility. Please note: Modifier 0075 is not applicable to any of the items for diagnostic procedures in the otorhinolaryngology sections of the tariff guide ● Die gelde, plus 21,00 kliniese prosedure eenhede, sal van toepassing wees waar endoskopiese prosedures in eie prosedure kamers uitgevoer word. Let wel: Wysiger 0075 is nie van toepassing op enige items vir diagnostiese prosedures in die otorinolaringologie-afdelings van die tariefreglyn nie</p> | 21 | 365.82 | 21 | 365.82 | | | |
| <p>MODIFIER GOVERNING THE SECTION ON PHYSICAL TREATMENT ● WYSIGER VAN TOEPASSING OP DIE AFDELING FISIESE BEHANDELING</p> <p>0077 (a) When two separate areas are treated simultaneously for totally different conditions, such treatment shall be regarded as two treatment modalities for which separate fees may be charged (Only applicable if services are provided by a specialist in physical medicine) ● Wanneer twee afsonderlike areas tegelykertyd vir heeltemal verskillende toestande behandel word, word sodanige behandeling beskou as twee behandelingmodaliteite waarvoor afsonderlike gelde gehef kan word (Slegs van toepassing indien dienste deur 'n spesialis in fisiese geneeskunde gelewer word)</p> <p>(b) The number of treatment sessions for a patient for which the Commissioner shall accept responsibility is limited to 20. If further treatment sessions are necessary liability for payment must be arranged in advance with the Compensation Fund ● Die aantal behandelingssessies vir 'n pasient waarvoor die Vergoedingsfonds aanspreeklikheid aanvaar word tot 20 beperk. Indien verdere behandelingssessies benodig is, moet aanspreeklikheid vir betaling daarvoor vooraf met die Vergoedingsfonds onderhandel word</p> <p>Note: Physiotherapy administered by a non-specialist medical practitioner who is already in charge of the general treatment of the employee concerned, or by any partner, assistant or employee of such practitioner, or any other practitioner or radiologist should be embarked upon only with the express approval of the Commissioner. Such approval should be requested in advance</p> | | | | | | | |
| <p>Opmerking: Fisioterapie wat toegedien word deur 'n geneesheer wat nie 'n spesialis is nie en wat reeds vir die algemene behandeling van die betrokke werknemer verantwoordelik is, of wat toegedien word deur 'n vennoot, assistent of werknemer van so 'n geneesheer of enige ander algemene praktisyn of radioloog behoort slegs te geskied met die uitdruklike goedkeuring van die Vergoedingsfonds. Daar behoort vooraf goedkeuring gedoen te word</p> | | | | | | | |
| <p>MODIFIER GOVERNING THE SECTION MEDICAL PSYCHOTHERAPY ● WYSIGER VAN TOEPASSING OP DIE AFDELING MEDIIESE PSIGOTERAPIE</p> | | | | | | | |

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| 0079 | | | | | | | |
| When a first consultation/visit proceeds into, or is immediately followed by a medical psychotherapeutic procedure, fees for the procedure are calculated according to the appropriate individual psychotherapy code (Items 2957, 2974 or 2975): Individual psychotherapy (specify type) • Indien 'n eerste konsultasie/besoek onmiddellik gevolg word deur, of oorgaan in 'n mediese psigoterapeutiese prosedure, sal die gelde vir die prosedure bereken word volgens die toepaslike individuele psigoterapie kode (Items 2957, 2974 of 2975) | | | | | | | |
| MODIFIERS GOVERNING THE SECTION DIAGNOSTIC RADIOLOGY • WYSIGERS VAN TOEPASSING OP DIE AFDELING DIAGNOSTIESE RADIOLOGIE | | | | | | | |
| 0001 | 100 | 1 822.00 | | | | | |
| Emergency or unscheduled radiological services: For emergency or unscheduled radiological services (Refer to rule B) the additional fee shall be 50% of the fee for the particular service (section 19.12: Portable unit examinations excluded). Emergency and unscheduled MR scans, a maximum levy of 100.00 Radiological units is applicable | | | | | | | |
| 0002 | | | | | | | |
| Written report on X-rays: The lowest level item code for a new patient (consulting rooms) consultation is applicable only when a radiologist is requested to provide a written report on X-rays taken elsewhere and submitted to him. The above mentioned item code and the lowest level item code for an initial hospital consultation are not to be utilised for the routine reporting on X-rays taken elsewhere • Geskrewe verslag oor X-strale: Die laagste vlak itemkode vir 'n nuwe pasiënt (spreekkamer) besoek, is van toepassing slegs wanneer 'n radioloog gevra word om 'n skriftelike verslag te voorsien aangaande X-strale wat elders geneem is en aan hom voorgelê word. Die bogemelde item en die laagste vlak itemkode vir 'n aanvanklike hospitaal besoek, moet nie gebruik word vir die roetine verslaggewing aangaande X-strale wat elders geneem is nie | | | | | | | |
| 0080 | | | | | | | |
| Multiple examinations: Full Fee • Veelvuldige ondersoek: Volle tarief | | | | | | | |
| 0081 | | | | | | | |
| Repeat examinations: No reduction • Her-ondersoek: Geen vermindering | | | | | | | |
| 0082 | | | | | | | |
| Plus ("+") means that this item code is complementary to a preceding item code and is therefore not subject to reduction. The amount for plus ("+") procedures must not be added to the amount for the definitive item and must appear on a separate line on the account • Plus ("+") beteken dat hierdie itemkode saam met 'n vorige itemkode gebruik word en daarom nie aan vermindering onderworpe is nie. Hierdie plus ("+") item word nie ingereken in die gelde vir die prosedure nie en moet op 'n aparte reël op die rekening aangedui word. | | | | | | | |
| 0083 | | | | | | | |
| A reduction of 33,33% (1/3) in the fee will apply to radiological examinations as indicated in section 19: Radiology where hospital equipment is used • 'n Vermindering van 33,33% (1/3) van die gelde sal van toepassing wees op radiologiese ondersoek, soos aangedui in afdeling 19: Radiologie wat met hospitaaltoerusting uitgevoer word | | | | | | | |
| Note in respect of fees payable when X-rays are taken by general practitioners • Opmerking met betrekking tot betaling van gelde waar X-stale deur algemene praktisyns geneem word: | | | | | | | |

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| <p>If the services of a radiologist were normally available, it is expected that these should be utilised. Should circumstances be unfavourable for obtaining such services at the time of the first consultation, the general practitioner may take the initial X-ray photograph himself provided he submitted a report to the effect that it was in the best interest of the employee for him to have done so. Subsequent X-ray photographs of the same injury, however, must be taken by a radiologist who has to submit the relevant reports in the normal manner ● As die dienste van 'n radioloog normaalweg beskikbaar is word ver wag dat daarvan gebruik gemaak sal word. As omstandighede ten tyde van die eerste konsultasie ongunstig is om sodanige dienste te bekom, kan die algemene praktisyn self die eerste X-straalfoto's neem mits hy 'n verslag indien te dien effekte dat dit in die beste belang van die werknemer was dat die foto's deur hom geneem is. Daaropvolgende X-straalfoto's van dieselfde besering moet egter deur 'n radioloog geneem word wat die toepaslike verslae op die gebruikelike wyse moet indien</p> <p>1. When a general practitioner takes X-ray photographs with his own equipment, if the services of a specialist radiologist were not available, he may claim at the prescribed fee ● Indien 'n algemene praktisyn X-straalfoto's met sy eie apparaat neem waar die dienste van 'n spesialis radioloog onverkrygbaar is, mag hy die voorgeskrewe gelde vir die neem van die foto's eis</p> <p>2. (i) If a general practitioner ordered an X-ray examination at a provincial hospital where the services of a specialist radiologist are available, it is expected that the radiologist shall read the photographs for which he is entitled to one third of the prescribed fee ● Indien 'n algemene praktisyn 'n X-straalonderscek by 'n provinsiale hospitaal aanvra waar die dienste van 'n spesialis radioloog beskikbaar is word ver wag dat die radioloog die X-straalfoto's sal lees waarvoor hy een derde van die voorgeskrewe gelde mag eis</p> | | | | | | | |
| <p>(ii) If the radiographer of the hospital was not available and the general practitioner had to take the X-ray photographs himself, he may claim 50% of the prescribed fee for the service. In that case, however, he should get written confirmation of his X-ray findings from the radiologist as soon as possible. The radiologist may then claim one third of the prescribed fee for such service ● Indien die hospitaal se radiografis nie beskikbaar is nie en die algemene praktisyn moet self die X-straalfoto's neem, kan hy 50% van die voorgeskrewe tarief vir daardie diens eis. In so 'n geval egter moet die radioloog so gou doenlik die algemene praktisyn se X-straalbevindings in 'n geskrewe verslag bevestig waarvoor die radioloog dan een derde van die voorgeskrewe tarief mag eis</p> <p>3. If a general practitioner ordered an X-ray examination at a provincial hospital where no specialist radiological services are available, the general practitioner will not be paid for reading the X-ray photographs as such a service is considered to be an integral part of routine diagnosis, but if he was requested by the Compensation Fund to submit a written report on the X-ray findings, he may claim two thirds of the prescribed fee in respect thereof ● Indien die algemene praktisyn 'n X-straalondersoek by 'n provinsiale hospitaal aanvra waar daar geen dienste deur 'n spesialis radioloog gelewer word nie sal hy nie vir die lees van die foto's vergoed word nie aangesien dit as 'n integrale deel van die diagnose beskou word, maar indien hy deur die Vergoedingsfonds versoek word om 'n skriftelike verslag oor die X-straal bevindinge in te dien, kan hy twee derdes van die voorgeskrewe tarief daarvoor eis</p> <p>4. If a general practitioner had to take and read X-ray photographs at a provincial hospital where the services of a radiographer and a specialist radiologist are not available he/she may claim 50% of the prescribed fee for such service ● Indien 'n algemene praktisyn self X-straalfoto's moet neem en lees by 'n provinsiale hospitaal waar die dienste van 'n radiografis en 'n spesialis radioloog nie beskikbaar is nie kan hy/sy 50% van die voorgeskrewe tarief vir daardie diens eis</p> | | | | | | | |

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| <p>0084 Charging for films and thermal paper by non-radiologists: In the case of radiological services rendered by non-radiologists where film, thermal paper or magnetic media are used, these media is charged for according to the film price of 2002, as compiled by the Radiological Society of South Africa (This list is available on request at coding@samedical.org) ● Verhaling van films en ultraklankpapier koste deur nie-radioloë: In geval van radiologiese dienste wat deur nie-radioloë gelewer word en waar van film, ultraklankpapier of magnetiese band gebruik gemaak word, word die filmkoste verhaal volgens die 2002 filmpryslys. soos saamgestel deur die Radiologiese Vereniging van SA. (Hierdie inligting is verkrygbaar op versoek van coding@samedical.org)</p> | | | | | | | |
| <p>0085 Left side: Add to items 6500-6519 as appropriate when the left side is examined. The absence of the modifier indicates that the right side is examined ● Linkerkant: Voeg by items 6500-6519 soos toepaslik wanneer die linkerkant ondersoek is. Afwesigheid van die wysiger dui aan dat die regterkant ondersoek is</p> | | | | | | | |

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| <p>0086 MODIFIER GOVERNING VASCULAR STUDIES • WYSIGER VAN TOEPASSING OP VASKULÊRE STUDIES</p> <p>Vascular groups: "Film series" and "Introduction of Contrast Media" are complementary and together constitute a single examination: neither fee is therefore subject to an increase in terms of modifier 0080: Multiple examinations • Vaskulêre groepe: "Filmreeks" en "Inplaas van Kontrasmedia" vul mekaar aan en vorm saam 'n enkele ondersoek: die gelde betaalbaar vir hierdie items is gevolglik nie onderworpe aan verhoging ooreenkomstig die bepalings van wysiger 0080: Veelvuldige ondersoeke, nie</p> <p>PLEASE NOTE: Modifier 0083 is not applicable to Section 19.8 of the tariff LET WEL: Wysiger 0083 is nie van toepassing op Afdeling 19.8 van die tarief nie</p> <p>Rules applicable to vascular studies • Reëls van toepassing op vaskulêre studies</p> <p>(a) The machine fee (items 3536 to 3550) includes the cost of the following • Die gelde vir toerusting gebruik (items 3536 tot 3550) sluit die koste van die volgende in: All runs (runs may not be billed for separately) • Alle lopies (daar mag nie afsonderlik vir lopies gelde gehef word nie) All film costs (modifier 0084 is not applicable) • Alle filmkoste (wysiger 0084 is nie van toepassing nie) All fluoroscopies (item 3601 does not apply) • Alle fluoroskopieë (item 3601 is nie van toepassing nie) All minor consumables (defined as any item other than catheters, guidewires, introducer sets, specialised catheters, balloon catheters, stents, anti-embolic agents, drugs and contrast media) • Alle minor wegdoenbare materiaal (gedefinieer as enige item anders as kateters, gidstrade, inplasingstoestelle, gespesialiseerde kateters, ballonkateters, stente, anti-emboliese middels, verdowingsmiddels en kontrasmedia)</p> <p>(b) The machine fee (item codes 3536 to 3550) may only be charged for once per case per day by the owner of the equipment and is only applicable to radiology practices • Die toerustingstarief (itemkodes 3536 tot 3550) mag slegs een keer per geval per dag deur die eienaar van die apparaat gehef word en is slegs van toepassing vir radiologiese praktyke</p> <p>(c) If a procedure is performed by a non-radiologist together with a radiologist as a team, in a facility owned by the radiologist, each member of the team should charge at their respective full rates as per modifiers and the applicable codes • Indien 'n prosedure deur 'n nie-radioloog en 'n radioloog as 'n span uitgevoer is in 'n fasiliteit wat deur die radioloog besit word, kan elke spanlid die respektiewe volle gelde hef volgens wysigers en die toepaslike kodes</p> <p>(d) If a procedure is performed by a non-radiologist and a radiologist as a team, in a facility not owned by the radiologist, modifier 6301 and modifier 6302 applies • Indien 'n prosedure uitgevoer word deur 'n nie-radioloog en 'n radioloog as 'n span in 'n fasiliteit wat nie deur die radioloog besit word nie, is wysiger 6301 en wysiger 6302 van toepassing</p> | | | | | | | |

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| MODIFIERS GOVERNING VASCULAR STUDIES AND INTERVENTIONAL RADIOLOGY PROCEDURES • WYSIGERS VAN TOEPASSING OP VASKULÊRE STUDIES EN INTERVENSIENELE RADIOLOGIE PROSEDURES | | | | | | | |
| 6300 | | | | | | | |
| <p>If a procedure lasts less than 30 minutes only 50% of the machine fees for items 3536-3550 will be allowed (specify time of procedure on account) • Indien 'n prosedure minder as 30 minute duur word slegs 50% van die toerusting gelde vir items 3536-3550 toegelaat (spesifiseer duur van prosedure op rekening)</p> | | | | | | | |
| 6301 | | | | | | | |
| <p>If a procedure is performed by a radiologist in a facility not owned by himself, the fee will be reduced by 40% (i.e. 60% of the fee will be charged) • Indien 'n prosedure uitgevoer word deur 'n radioloog in 'n fasiliteit wat nie deur hom/haar besit word nie, word gelde met 40% verminder (d.w.s. 60% van die tarief word gehef)</p> | | | | | | | |
| 6302 | | | | | | | |
| <p>When the procedure is performed by a non-radiologist, the fee will be reduced by 40% (i.e. 60% of the fee will be charged) • Wanneer 'n prosedure deur 'n nie-radioloog uitgevoer word, word die gelde met 40% verminder (d.w.s. 60% van die tarief word gehef)</p> | | | | | | | |
| 6303 | | | | | | | |
| <p>When a procedure is performed entirely by a non-radiologist in a facility owned by a radiologist, the radiologist owning the facility may charge 55% of the procedure units used. Modifier 6302 applies to the non radiologist performing the procedure • Wanneer 'n prosedure in sy geheel deur 'n nie-radioloog uitgevoer word in 'n fasiliteit wat deur 'n radioloog besit word, hef die radioloog wat die fasiliteit besit 55% van die prosedure eenhede wat gebruik word. Wysiger 6302 is van toepassing op die nie-radioloog wat die prosedure uitvoer</p> | | | | | | | |
| 6305 | | | | | | | |
| <p>When multiple catheterisation procedures are performed (item codes 3557, 3559, 3560, 3562) and an angiogram investigation is performed at each level, the unit value of each such multiple procedure will be reduced by 20.00 radiological units for each procedure after the initial catheterisation. The first catheterisation is charged at 100% of the unit value • Wanneer veelvuldige kateterisasie prosedures uitgevoer word (itemkodes 3557, 3559, 3560, 3562) en 'n angiogramondersoek op elke vlak gedoen word, word die aantal eenhede van elke sodanige prosedure met 20.00 radiologiese eenhede verminder na die aanvanklike kateterisasie. Die volle gelde (100%) word vir die eerste kateterisasie gehef</p> | | | | | | | |
| MODIFIERS GOVERNING ULTRASONIC INVESTIGATIONS • WYSIGERS VAN TOEPASSING OP DIE AFDELING ULTRAKLANK ONDERSOEKE | | | | | | | |
| 0160 | | | | | | | |
| <p>Aspiration of biopsy procedure performed under direct ultrasonic control by an ultrasonic aspiration biopsy transducer (Static Real time): Fee for body part examined plus 30% of the units • Aspirasie van biopsie prosedure uitgevoer onder direkte ultrasoniese kontrole d.m.v. 'n ultrasoniese aspirasie biopsie klankkop (Statiese Reële tyd): Gelde vir die liggaamsdeel wat ondersoek word plus 30% van die eenhede</p> | | | | | | | |
| 0165 | 6 | 103.32 | | | | | |
| <p>Use of contrast during ultrasound study: add 6.00 ultrasound units • Gebruik van kontras gedurende ultraklank studie: voeg 6.00 ultraklankeenhede by</p> | | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---|-------------------------|-----------|---|--------|------------------------|---|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| <p>MODIFIER GOVERNING INTERVENTIONAL RADIOLOGICAL PROCEDURES ● WYSIGER VAN TOEPASSING OP INTERVENSIENELE RADIOLOGIESE PROSEDURES</p> <p>0090 Radiologist's fee for participation in a team: 30.00 radiology units per ½ hour or part thereof for all interventional radiological procedures, excluding any pre- or post-operative angiography, catheterisation, CT-scanning, ultrasound-scanning or x-ray procedures. (Only to be charged if radiologist is personally involved, and not for interpretation of images only)</p> <p>● Radioloog se gelde vir deelname in 'n span: 30.00 radiologiese eenhede per ½ uur of gedeelte daarvan vir alle intervensionele radiologiese prosedures. Voor- of na-operatiewe angiografie, kateterisasie, rekenaartomografie, ultraklank- of x-straalondersoeke is uitgesluit. (Mag slegs gehef word indien die radioloog persoonlik deelneem, en kan nie gehef word slegs vir die vertolking van beelde alleen nie)</p> | 30 | 546.60 | 30 | 546.60 | | | |
| <p>MODIFIERS GOVERNING MAGNETIC RESONANCE IMAGING ● WYSIGERS VAN TOEPASSING OP MAGNETIESE RESONANSIE BEELDING</p> <p>6100 In order to charge the full fee (600.00 magnetic resonance units for an examination of a specific single anatomical region, the investigation should be performed with the applicable radio frequency coil including T1 and T2 weighted images on at least two planes ● Om die volle gelde (600.00 magnetiese resonansie-eenhede vir 'n ondersoek van 'n bepaalde enkele anatomiese liggaamsdeel te hef, moet die ondersoek uitgevoer word met die toepaslike radiofrekwensielus wat T1 en T2 opnames insluit op ten minste twee vlakke</p> | 600 | 10 932.00 | | | | | |
| <p>6101 Where a limited series of a specific anatomical region is performed (except bone tumour), e.g a T2 weighted image of a bone for an occult stress fracture, not more than two-thirds (2/3) of the fee may be charged - also applicable to all radiotherapy planning studies, per region ● Waar 'n beperkte reeks van 'n spesifieke anatomiese liggaamsdeel uitgevoer word (been tumor uitgesluit) bv. vir 'n okkulte stres fraktuur, mag nie meer as twee-derdes (2/3) van die gelde gehef word nie - ook van toepassing op alle radioterapie beplanningstudies, per streek</p> | | | | | | | |
| <p>6102 All post-contrast studies (except bone tumour) including perfusion studies should be charged at 50% of the fee ● Alle na-kontras studies (behalwe been tumor) perfusiestudies ingesluit moet teen 50% van die tarief gehef word</p> <p>Note: In cases where a Magnetic Resonance Imaging of any anatomical region is deemed necessary, written motivation must be submitted by the practitioner who requested the examination and attached to the account upon which the Compensation Fund will consider approval of payment</p> <p>Opmerking: Indien 'n Magnetiese Resonansie Beelding van enige liggaamsdeel aangevra word, moet skriftelike motivering deur die praktisyn wat die ondersoek aangevra het saam met die rekening voorgelê word waarna goedkeuring vir betaling deur die Vergoedingsfonds oorweeg sal word</p> | | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---|-------------------------|---|---|---|------------------------|---|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| <p>MODIFIERS GOVERNING THE SECTION RADIATION ONCOLOGY ● WYSIGERS VAN TOEPASSING OP DIE AFDELING BESTRALINGSONKOLOGIE</p> <p>0093 The fees for radiation oncology shall apply only where a specialist in radiation oncology uses his own apparatus I Die gelde vir bestralingsonkologie geld net waar die spesialis in bestralingsonkologie sy eie apparaat gebruik</p> | | | | | | | |
| <p>MODIFIERS GOVERNING THE SECTION PATHOLOGY ● WYSIGERS VAN TOEPASSING OP DIE AFDELING PATOLOGIE</p> <p>0097 Pathology tests performed by non-pathologists: Where item codes resorting under Clinical Pathology (section 21) and Anatomical Pathology (section 22) fall within the province of other specialists or general practitioners, the fee should be charged at two-thirds of the pathologists tariff ● Patologiese toetse uitgevoer deur nie-patoloë: Wanneer itemkodes wat onder Kliniese Patologie (afdeling 21) en Anatomiese Patologie (afdeling 22) resorteer, ook deur ander spesialiste of algemene praktisyns uitgevoer word, moet die gelde teen twee derdes van die patoloog se tarief gehief word</p> | | | | | | | |
| <p>0099 Stat basis tests: For tests performed on a stat basis, an additional fee of 50% of the fee for the particular pathology service shall apply, with the following provisos ● Statbasistoetse: Vir toetse uitgevoer op 'n stat basis, sal 'n bykomende gelde van 50% van die tarief vir die betrokke patologiese diens van toepassing wees, met die volgende voorwaardes:</p> <p>Stat tests may only be requested by the referring practitioner and not by the pathologist ● Versoeke vir toetse op 'n stat basis mag slegs deur die verwysende praktisyn gerig word en nie deur die patoloog nie</p> <p>Specimens must be collected on a stat basis where applicable ● Monsters moet, waar van toepassing, op 'n stat basis bekom word</p> <p>Test must be performed on a stat basis ● Toetse moet op 'n stat basis uitgevoer word</p> <p>Documentation (or a copy thereof) relating to the request of the referring practitioner must be retained ● Dokumentasie (of 'n kopie daarvan) met betrekking tot die versoek van die verwysende praktisyn, moet bewaar word</p> <p>This modifier will only apply during normal working hours and will never be used in combination with item code 4547: After-hours service ● Hierdie wysiger sal slegs van toepassing wees gedurende normale werkure en sal nooit saam met itemkode 4547: Diens buite normale werkure, gebruik word nie.</p> | | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | U/E | R | U/E | R | U/E | R | T/M |
| I. CONSULTATIONS ● KONSULTASIES | | | | | | | |
| The amounts in this section are calculated according to the Consultation Services unit values, except for items 0181, 0182, 0183, 0184, 0186 and 0151 | | | | | | | |
| GENERAL PRACTITIONERS AND ALL SPECIALISTS ● ALGEMENE PRAKTISYNS EN ALLE SPESIALISTE | | | | | | | |
| a. Only one of items 0181-0186 as appropriate may be charged for a single service and not combinations thereof ● Slegs een van items 0181-0186 wat toepaslik is mag gehef word vir 'n diens en nie kombinasies daarvan nie | | | | | | | |
| b. These services must be face-to-face with the patient and excludes the time spent doing special investigations which receive additional remuneration ● Hierdie dienste moet met die pasiënt persoonlik wees en sluit die tyd gebruik om spesiale ondersoek uit te voer, waarvoor bykomende vergoeding geëis kan word, uit. | | | | | | | |
| c. Only item 0146 may be charged as appropriate thereof ● Slegs items 0146 soos toepaslik mag gehef word. | | | | | | | |
| d. A subsequent visit refers to a voluntarily scheduled visit performed for the same condition within four (4) months after the first visit (although the symptoms or complains may differ from those presented during the first visit ● 'n Opvolgbesoek verwys na 'n willekeurig geskeduleerde besoek wat binne vier (4) maande na 'n eerste besoek in verband met dieselfde siektoestand uitgevoer word | | | | | | | |
| e. Items 0181, 0182, 0183, 0184 and 0186 include remuneration for the completion of the first, progress and final medical reports. Item 0186 may be charged for a visit to complete a final medical report ● Items 0181, 0182, 0183, 0184 en 0186 sluit vergoeding in vir die voltooiing van die eerste, vorderings en finale mediese verslae. Item 0186 mag geëis word vir 'n besoek om 'n finale mediese verslag te voltooi. | | | | | | | |
| NEW PATIENT ● NUWE PASIËNT (NB: Indicate time in minutes) | | | | | | | |
| 0181 | Visit for a new problem / new patient with problem focused history, examination and management up 20 minutes ● Besoek vir 'n nuwe probleem / nuwe pasiënt met probleem-gefokusde geskiedenis, ondersoek en hantering. | 16.5 | 292.88 | 15 | 266.25 | | |
| 0182 | Visit for a new problem / new patient with problem focused history, examination and management up 30 minutes ● Besoek vir 'n nuwe probleem / nuwe pasiënt met probleem-gefokusde geskiedenis, ondersoek en hantering. | 31.5 | 559.13 | 30 | 532.50 | | |
| 0183 | Visit for a new problem / new patient with problem focused history, examination and management up 45 minutes . Besoek vir 'n nuwe probleem / nuwe pasiënt met probleem-gefokusde geskiedenis, ondersoek en hantering. | 36 | 639.00 | 33 | 585.75 | | |
| FOLLOW-UP VISIT ● OPVOLGBESOEK | | | | | | | |
| 0184 | Follow-up visit for the evaluation and management of a patient ● Opvolgbesoek vir die evaluering en hantering van 'n pasiënt. | 16.5 | 292.88 | 15 | 266.25 | | |
| FINAL VISIT ● FINAALBESOEK | | | | | | | |
| 0186 | Follow-up visit for the evaluation and management of a patient with a Final Medical Report (Rule G not applicable). I Opvolgbesoek vir die evaluering en hantering van 'n pasiënt met 'n Finaal mediese verslag | 31.5 | 559.13 | 30 | 532.50 | | |
| CONSULTATIONS: SPECIALISTS AND GENERAL PRACTITIONERS ● KONSULTASIES: SPESIALISTE EN ALGEMENE PRAKTISYNS | | | | | | | |
| 0145 | For consultation / visit away from the doctor's home or rooms: ADD to items 0181 or 0186 as appropriate. Confirm where visit took place. Please note that item 0145 is not applicable for pre-anaesthetic assessments and may not be added to items 0151 | + | 6 | 104.52 | 6 | 104.52 | |
| 0146 | Emergency or unscheduled consultation/visit at the doctors home or rooms: ADD to items 0181, 0182 and 0183 as appropriate. (General Rule B refers) ● Vir 'n na-ure noodgeval of ongeskeduleerde konsultasie/besoek by die dokter se huis of kamers: VOEG BY items 0181 of 0182 en 0183 soos toepaslik (Algemene Reël B verwys) | + | 8 | 139.36 | 8 | 139.36 | |
| 0147 | For after hours emergency or unscheduled consultation/ visit away from the doctor's home or rooms: ADD to items 0181, 0182 and 0183 as appropriate (General Rule B refers) | + | 14 | 243.88 | 14 | 243.88 | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | U/E | R | U/E | R | U/E | R | T/M |
| 0109 | Hospital follow-up visit to patient in ward or nursing facility - Refer to general rule G(a) for post-operative care) (may only be charged once per day) (not to be used with items 0111, 0146 or ICU items 1204-1214) ● Opvolgbesoek aan pasiënt by hospitaal of verpleeginrigting - Verwys na Algemene reël G(a) vir na-operatiewe sorg) (mag slegs eenmaal per dag gehê word (nie vir gebruik saam met items 0111, 0146 of intensiewe sorg items 1204-1214) | | | | | | |
| | 15 | 261.30 | 15 | 261.30 | | | |
| | PRE-ANAESTHETIC ASSESSMENT ● VOORNARKOSE EVALUERING | | | | | | |
| | a. Pre-anaesthetic consultations for all major vascular, cardio-thoracic and orthopaedic cases will attract a unit value of at least 32.00 units ● Vir voornarkose konsultasies van alle groot vasculêre, kardiotorokale en ortopediese gevalle sal ten minste 'n eenheidswaarde van 15,00 eenhede gehê word | | | | | | |
| | b. Only item 0146 may be charged ● Slegs items 0146 mag gehê word. | | | | | | |
| 0151 | Pre-anaesthetic assessment of patient(all hours). Problem focused history, clinical examination and decision making ● Voor-narkose evaluering van pasiënt (alle ure). Probleemtoegespitste pasiëntgeskiedenis, kliniese ondersoek en besluitneming | | | | | | |
| | 32 | 568.00 | 32 | 568.00 | | | |
| | AUDIOLOGY & SPEECH THERAPY CONSULTATIONS. | | | | | | |
| 1011 | Consultation 5 - 30 min | | | | | | |
| | 22.5 | 170.55 | | | | | |
| 1012 | Consultation 31 - 45 min | | | | | | |
| | 37.5 | 284.25 | | | | | |
| 1013 | Consultation 46 - 60 min | | | | | | |
| | 52.5 | 397.95 | | | | | |
| | GENERAL ● ALGEMEEN | | | | | | |
| 0136 | Special medical examination requested by the Compensation Commissioner ● Spesiale mediese ondersoek versoek deur die Vergoedingskommissaris: | | | | | | |
| | - Amount applicable from 2003/03/03 until 2005/01/27 (VAT inclusive) ● Bedrag van toepassing vir ondersoeke vanaf 2003/3/3 tot 2005/01/27 (BTW Ingesluit) | | | | | | |
| | | 1 100.00 | | | | | |
| | - Amount applicable from 2005/01/28 until further notice (VAT inclusive) ● Bedrag van toepassing vir ondersoeke vanaf 2005/01/28 tot verdere kennisgewing (BTW Ingesluit) | | | | | | |
| | | 1 860.00 | | | | | |
| 2918 | Non-operative supervision of head/brain injuries, spinal injuries (including paraplegics) or burns for all disciplines, except urologists ● Nie-operatiewe toesig van kop/brein beserings, spinale beserings (paraplieë ingesluit) of brandwonde vir alle dissiplines, behalwe uroloë. | | | | | | |
| | 244 | 4 250.48 | 195.2 | 3 400.38 | | | |
| 2058 | Urologist: Non-surgical supervision of head/brain injuries, spinal injuries (including paraplegics) or burns. All urodynamic studies excluded and charged for separately under items 1979, 1981, 1991 and 1992 of the Tariff ● Uroloë: Nie-operatiewe toesig van kop/brein beserings, spinale beserings (insluitend peraplieë) of brandwonde. Alle urodinamiese ondersoeke uitgesluit en kan afsonderlik voor gevra word onder items 1979, 1981, 1991 en 1992 in Tarief | | | | | | |
| | 117 | 2 038.14 | 93.6 | 1 630.51 | | | |
| | Note: these codes are applicable to non-operational supervision of head/brain injuries, spinal injuries or burns for all disciplines if patient is in a hospital or step-down facility. This code must be claimed where the occurrence of code 0109 exceeds 20 within a period of 4 calendar months. (General Rule G and N(c) refers) ● Neem Kennis: hierdie kodes is van toepassing by nie operatiewe toesig van kop/brein beserings, spinale beserings of brandwonde as die patient in 'n hospitaal "step-down" fasiliteit is. Die kode word ge-eis waar die gebruik van kode 0109 meer as 20 is binne 'n periode van 4 kalender maande. (Algemene Reël G en N(c) verwys) | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | U/E | R | U/E | R | U/E | R | T/M |
| II. MEDICINE, MATERIAL, AND SUPPLIES I MEDIKASIE, MATERIAAL EN VOORRAAD | | | | | | | |
| 0196 | Chronic medicine and/or material indicator: Use this item to indicate medicine and/or material that are dispensed for chronic conditions ● Kroniese medikasie en/of materiaal indikator: Gebruik hierdie item om kroniese medikasie en/of materiaal verskaf vir kroniese toestande aan te dui | | | | | | |
| 0200 | Cost of prostheses and/or internal fixation cost price + 20% with a maximum markup of R6685.13 ● Koste van prosteses en/of interne fikasie apparaat. Kosprys + 20% met 'n maksimum winsgrens van R6685.13 | | | | | | |
| 0201 | <p>(a) Cost of material: This item provides for a charge for material and special medicine used in treatment. Material to be charged for at cost price plus 35%. Charges for medicine used in treatment not to exceed the retail Ethical Price List ● Koste van materiaal: Hierdie item maak voorsiening vir die hef van gelde vir materiaal en spesiale medisyne wat gedurende behandeling gebruik word. Kosprys plus 35% kan gehef word vir materiaal. Heffings vir medisyne gebruik by behandeling mag nie die Etiese Pryslys se kleinhandelsprys oorskry nie.</p> <p>(b) External fixation apparatus (disposable): An amount equivalent to 25% of the purchase price of the apparatus may be charged where such apparatus is used ● Eksterne fiksasie-apparaat (wegdoenbaar): 'n Bedrag gelyk aan 25% van die aankoopprys van die apparaat kan gehef word waar sulke apparaat gebruik word.</p> <p>(c) External fixation apparatus (non-disposable): An amount equivalent to 20% of the purchase price of the apparatus may be charged where such apparatus is used ● Eksterne fiksasie apparaat (nie-wegdoenbaar): 'n Bedrag gelyk aan 20% van die aankoopprys van die apparaat kan gehef word waar sulke apparaat gebruik word.</p> <p>(d) In case of minor injuries requiring additional material (e.g. suturing material) payment shall be considered provided the claim is motivated ● In gevalle van geringe beserings wat bykomstige materiaal (bv. heftingsmateriaal) benodig sal betaling oorweeg word mits die eis van 'n motivering vergesel word.</p> <p>(e) Medicine, bandages and other essential material for home-use by the patient must be obtained from a chemist on prescription or, if a chemist is not readily available, the practitioner may supply it from his own stock provided a relevant prescription is attached to his account. Charges for medicine used in treatment not to exceed the retail Ethical Price List ● Medisyne, verbande en noodsaaklike materiaal vir tuisgebruik deur die pasiënt, word op voorskrif van 'n apteek bekom en as 'n apteek nie gereedlik beskikbaar is nie, kan die geneesheer dit uit sy eie voorraad voorsien, mits hy 'n toepaslike voorskrif vir die medisyne aan sy rekening heg. Heffings vir medisyne gebruik by behandeling mag nie die Etiese Pryslys se kleinhandelsprys oorskry nie.</p> <p>(f) Unless otherwise stated(Attach invoice), for hospitalised patients, medication is included in per diem hospital tariff. Medical practitioners cannot claim for medication for such patients.</p> | | | | | | |
| 0202 | 10 | 174.20 | 10 | 174.20 | | | |
| 0194 | Procurement cost for human donor material. No mark up is allowed. Only applicable to Ophthalmologist, invoice to be attached. | | | | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|--|-------------------------|--------|--|--------|------------------------|---|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| III. PROCEDURES ● PROSEDURES The amounts in this section are calculated according to the Clinical Procedure unit values ● Die bedrae in hierdie afdeling word volgens die Kliniese Prosedure eenheidswaardes bereken | | | | | | | |
| UNLISTED PROCEDURE/SERVICE ● ONGESPESIFISEERDE PROSEDURE/DIENS | | | | | | | |
| 6999 Unlisted procedure/service code: A procedure/service may be provided that is not listed in the Compensation Fund tariffs. Please quote the correct SAMA code with item 6999 ● Ongespesifiseerde prosedure/diens item: 'n Prosedure/diens mag gelewer word wat nie in die Vergoedingsfonds tarief gelys word nie. Dui asseblief die korrekte SAMA kode aan saam met item 6999 | | | | | | | |
| 1. INTRAVENOUS TREATMENT ● BINNEARSE- BEHANDELING | | | | | | | |
| 0206 Intravenous infusions (push-in) Insertion of cannula - chargeable once per 24 hour ● Intraveneuse infuus (instoot) Inplaas van kannule - fooie hefbaar vir een uitvoering per 24 uur | 6 | 104.52 | 6 | 104.52 | | | |
| 0207 Intravenous infusions (cut-down): Cut-down and insertion of cannula - chargeable once per 24 hours ● Intraveneuse infuus (Insnyding): Insny en inplaas van kannule - fooie hefbaar vir een uitvoering per 24 uur | 8 | 139.36 | 8 | 139.36 | | | |
| 0208 Therapeutic venesection (Not to be used when blood is drawn for the purpose of laboratory investigations) ● Terapeutiese veneseksie (Kan nie gebruik word wanneer bloed getrek word met die oog op laboratorium ondersoek nie) | 6 | 104.52 | 6 | 104.52 | | | |
| Note: How to charge for intravenous infusions Practitioners are entitled to charge according to the appropriate item whenever they personally insert the cannula (but may only charge for this service once every 24 hours) For managing the infusion as such e.g. checking it when visiting the patient or prescribing the substance, no fee may be charged since this service is regarded as part of the services the doctor renders during consultation Opmerking: Hoe om gelde te hef vir intraveneuse infusies Praktisyns is geregtig om gelde volgens die toepaslike item te hef elke keer wanneer hulle persoonlik die kannule inplaas (maar mag nie meer dikwels as een maal per 24 uur vir hierdie diens hef nie. Geen gelde mag gehef word vir slegs die instandhouding van die infuus nie, byvoorbeeld kontrolering van die vloei of voorskryf van die inhoud, aangesien dit gereken word as deel van die dienste wat tydens konsultasies gelewer word | | | | | | | |
| 0210 Collection of blood specimen(s) by medical practitioner for pathology examination, per venesection (not to be used by pathologists) ● Verkryging van bloed monster(s) deur mediese praktisyn vir patologie-onderzoek, per veniseksie (uitgesluit patoloë) | 3.25 | 56.62 | 3.25 | 56.62 | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | U/E | R | U/E | R | U/E | R | T/M |
| 2. INTEGUMENTARY SYSTEM ● HUIDSTELSEL | | | | | | | |
| 2.1 Allergy ● Allergie | | | | | | | |
| 0217 Allergy: Patch tests: First patch ● Allergie: Plaktoetse: Eerste plaktoets | 4 | 69.68 | 4 | 69.68 | | | |
| 0219 Allergy: Patch tests: Each additional patch ● Allergie: Plaktoetse: Elke bykomende toets | 2 | 34.84 | 2 | 34.84 | | | |
| 0218 Allergy: Skin-prick tests: Skin-prick testing: Insect venom, latex and drugs ● Allergie: Velpriktoetse: Velpriktoetsing: Insekgif, latex en geneesmiddels | 2.8 | 48.78 | 2.8 | 48.78 | | | |
| 0220 Allergy: Skin-prick tests: Immediate hypersensitivity testing (Type I reaction): per antigen ● Allergie: Inhalant and food allergens ● Allergie: Velpriktoetse: Velpriktoetsing: Onmiddellike hipersensiwiteitstoetsing (Tipe 1 reaksie): per antigeen, inaseming en voedsel allergeene | 1.9 | 33.10 | 1.9 | 33.10 | | | |
| 0221 Allergy: Skin-prick tests: Delayed hypersensitivity testing (Type IV reaction): per antigen ● Allergie: Velpriktoetse: Velpriktoetsing: Vertraagde hipersensiwiteitstoetsing (Tipe IV reaksie): per antigeen | 2.8 | 48.78 | 2.8 | 48.78 | | | |
| 2.2 Skin (general) ● Vel (algemeen) | | | | | | | |
| 0255 Drainage of subcutaneous abscess, onychia, paronychia, pulp space or avulsion of nail ● Dreinerings van onderhuidse abses, onikie, paronikie of avulsie van nael | 20 | 348.40 | 20 | 348.40 | 3 | | 244.26 +T |
| 0257 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 ● Dreinerings van groot hand- of voetinfeksies; dreinerings van groot abses met nekrose van weefsel, wat diep fascia betrek of wat debridement benodig, algehele uitsnyding van pilonidale sist of sinus | 87 | 1 515.54 | 87 | 1 515.54 | 3 | | 244.26 +T |
| 0259 Removal of foreign body superficial to deep fascia (except hands) ● Verwydering van vreemde voorwerp oppervlakkig tot diep-fascia (buiten hande) | 20 | 348.40 | 20 | 348.40 | 3 | | 244.26 +T |
| 0261 Removal of foreign body deep to deep fascia (except hands). ● Verwydering van vreemde voorwerp diep-tot-diep-fascia (buiten hande) Note: See item 0922 and 0923 for removal of foreign bodies in hands ● Let wel: Sien item 0922 en 0923 vir verwydering van vreemde voorwerpe uit hand | 31 | 540.02 | 31 | 540.02 | 3 | | 244.26 +T |
| 2.3 Major plastic repair ● Groot plastiese herstel | | | | | | | |
| Note: The tariff does not cover elective or cosmetic operations, since these procedures may not have the effect of reducing the percentage of permanent disablement as laid down in the Second Schedule to the Act. It is incumbent upon the treating doctor to obtain the prior consent of the Commissioner before embarking upon such treatment | | | | | | | |
| Opmerking: Hierdie tarieflys voorsien nie vir elektiewe of kosmetiese operasies nie aangesien sodanige prosedures nie altyd 'n vermindering in die graad van blywende arbeidsongeskiktheid, soos in die Tweede Bylae tot die Wet beoog, tot gevolg mag hê nie. Die geneesheer is verplig om vooraf die Kommissaris se goedkeuring te verkry, alvorens met sulke behandeling begin word | | | | | | | |
| 0289 Large skin graft, composite skin graft, large full thickness free skin graft ● Groot veltransplantaat, saamgestelde vel- transplantaat, groot volle dikte vry veltransplantaat | 234 | 4 076.28 | 187.2 | 3 261.02 | 4 | | 325.68 +T |
| 0290 Reconstructive procedures (including all stages) and skin graft by myo-cutaneous or fascio-cutaneous flap ● Rekonstruktiewe prosedures (alle stadiums ingesluit) en veloorplanting met behulp van miokutane- of fassiokutane flap | 410 | 7 142.20 | 328 | 5 713.76 | 4 | | 325.68 +T |
| 0291 Reconstructive procedures (including all stages) grafting by micro-vascular re-anastomosis ● Rekonstruktiewe prosedures (insluitende alle stadiums) weefseloordraging met behulp van mikrovaskulêre heraanstomose | 800 | 13 936.00 | 640 | 11 148.80 | 4 | | 325.68 +T |
| 0292 Distant flaps: First stage ● Velflappe uit afgeleë posisie: Eerste stadium | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | | 325.68 +T |

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|--|-------------------------|-----------|--|-----------|------------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 0293 Contour grafts (excluding cost of material) ● Kontoertransplantasie (uitgesonderd koste van materiaal) | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T |
| 0294 Vascularised bone graft with or without soft tissue with one or more sets micro-vascular anastomoses ● Gevaskulariseerde beenoortrag met of sonder sagteweefsel met een of meer stelle mikro-vaskulêre anastomoses | 1200 | 20 904.00 | 960 | 16 723.20 | 6 | 488.52 | +T |
| 0295 Local skin flaps (large, complicated) ● Plaaslike velflappe (groot, gekompliseerd) | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T |
| 0296 Other procedures of major technical nature ● Ander groot tegniese prosedures | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T |
| 0297 Subsequent major procedures for repair of same lesion (Modifier 0006 not applicable) ● Daaropvolgende groot prosedures vir herstel van dieselfde letsel (Wysiger 0006 nie van toepassing nie) | 104 | 1 811.68 | 104 | 1 811.68 | 4 | 325.68 | +T |
| 4862 Full thickness graft of the trunk, free grafting including direct closure of donor site <=20cm ² | 136.50 | 2 377.83 | 120.00 | 2 090.40 | 5 | 407.10 | +T |
| 4863 Full thickness graft of the trunk, free grafting including closure of donor site, each additional 20cm ² (modifier 0005 not applicable) | 25.60 | 445.95 | 25.60 | 445.95 | 5 | 407.10 | +T |
| 4864 Full thickness graft of the scalp, arms and /legs free grafting including direct closure of donor site <=20cm ² | 140.30 | 2 444.03 | 120.00 | 2 090.40 | 5 | 407.10 | +T |
| 4865 Full thickness graft of the scalp, arms and /legs free grafting including direct closure of donor site, each additional 20cm ² (modifier 0005 not applicable) | 23.00 | 400.66 | 23.00 | 400.66 | 5 | 407.10 | +T |
| 4866 Full thickness graft of the face, neck, axilla, genitalia, hands and /or feet, free grafting including donor site: <=20cm ² | 163.40 | 2 846.43 | 130.00 | 2 264.60 | 5 | 407.10 | +T |
| 4867 Full thickness graft of the face, neck, axilla, genitalia, hands and /or feet, free grafting including direct closure of donor site, each additional 20cm ² (modifier 0005 not applicable) | 36.20 | 630.60 | 36.20 | 630.60 | 5 | 407.10 | +T |
| 4868 Full thickness graft of the nose, ears, eyelids, and /or lips free grafting including direct closure of donor site: <=20cm ² | 183.50 | 3 196.57 | 146.80 | 2 557.26 | 5 | 407.10 | +T |
| 4869 Full thickness graft of the nose, ears, eyelids, and /or lips free grafting including direct closure of donor site; each additional 20cm ² (modifier 0005 not applicable) | 43.10 | 750.80 | 43.10 | 750.80 | 5 | 407.10 | +T |
| 2.4 Lacerations, scars, cysts and other skin lesions ● Laserasies, littekens, siste en ander velletsels | | | | | | | |
| 0300 Stitching of soft-tissue injuries: Stitching of wound (with or without local anaesthesia): Including normal after-care ● Hegting van sagteweefselbeserings: Hegting van wond (met of sonder lokale verdoving): Normale nasorg ingesluit. | 14 | 243.88 | 14 | 243.88 | 3 | 244.26 | +T |
| 0301 Stitching of soft-tissue injuries: Additional wounds stitched at same session (each) ● Hegting van sagteweefselbeserings: Bykomende wonde geheg tydens dieselfde geleentheid (elk). | 7 | 121.94 | 7 | 121.94 | 3 | 244.26 | +T |
| 0302 Stitching of soft-tissue injuries: Deep laceration involving limited muscle damage ● Hegting van sagteweefsel-beserings: Diep laserasie met beperkte spierskade. | 64 | 1 114.88 | 64 | 1 114.88 | 4 | 325.68 | +T |
| 0303 Stitching of soft-tissue injuries: Deep laceration involving extensive muscle damage ● Hegting van sagteweefsel-beserings: Diep laserasie met uitgebreide spierskade. | 128 | 2 229.76 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 0304 Major debridement of wound, sloughectomy or secondary suture ● Uitgebreide debridement van wond, nekroektomie of sekondêre hegting | 50 | 871.00 | 50 | 871.00 | 3 | 244.26 | +T |
| 0305 Needle biopsy - soft tissue Naaldbiopsie - sagte weefsel | 25 | 435.50 | 25 | 435.50 | 3 | 244.26 | +T |
| 0307 Excision and repair by direct suture; excision nail fold or other minor procedures of similar magnitude ● Uitsnyding en herstel deur middel van direkte hegting; eksisie naelvou of ander kleiner prosedures van dieselfde omvang | 27 | 470.34 | 27 | 470.34 | 3 | 244.26 | +T |
| 0308 Each additional small procedure done at the same time ● Elke bykomende klein prosedure wat gelyktydig gedoen word | 14 | 243.88 | 14 | 243.88 | 3 | 244.26 | +T |
| 0310 Radical excision of nailbed ● Radikale verwydering van naelbed | 38 | 661.96 | 38 | 661.96 | 3 | 244.26 | +T |
| 0314 Requiring repair by large skin graft or large local flap or other procedures of similar magnitude ● Waar herstel deur middel van groot veltransplantaat of groot plaaslike vel flap benodig word, of ander prosedures van soortgelyke omvang | 104 | 1 811.68 | 104 | 1 811.68 | 4 | 325.68 | +T |
| 0315 Requiring repair by small skin graft or small local flap or other procedures of similar magnitude ● Waar herstel deur middel van klein veltransplantaat of klein plaaslike vel flap benodig word, of ander prosedures van soortgelyke omvang | 55 | 958.10 | 55 | 958.10 | 3 | 244.26 | +T |

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|---|-------------------------|----------|--|----------|------------------------|--------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 2.6 Burns ● Brandwonde | | | | | | | |
| 0345 Minor burns ● Klein brandwonde | | | | | | | |
| 0347 Moderate burns ● Matige brandwonde | | | | | | | |
| 0351 Major burns: Resuscitation (including supervision and intravenous therapy - first 48 hours) ● Ernstige brandwonde: Resusitasie (met inbegrip van toesig en binne-aarse terapie - eerste 48 uur) | 276 | 4 807.92 | 220.8 | 3 846.34 | 5 | 407.10 | +T |
| 0353 Tangential excision and grafting: Small ● Tangensiale eksisie en oorplanting: Klein | 100 | 1 742.00 | 100 | 1 742.00 | 5 | 407.10 | +T |
| 0354 Tangential excision and grafting: Large ● Tangensiale eksisie en oorplanting: Groot | 200 | 3 484.00 | 160 | 2 787.20 | 5 | 407.10 | +T |
| 2.7 Hands (skin) ● Hande (vel) | | | | | | | |
| 0355 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 ● Velflap in akute handbeserings waar die flap geneem word van 'n liggaamsdeel verwyderd van die beseerde vinger of in gevalle van verplasingvelflap bv. Cutler | 147.40 | 2 567.71 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 0357 Small skin graft in acute hand injury ● Klein veloorplanting by akute handbesering | 45 | 783.90 | 45 | 783.90 | 3 | 244.26 | +T |
| 0359 Release of extensive skin contracture and/or excision of scar tissue with major skin graft resurfacing ● Losmaak van groot velkontraktuur en/of uitsnyding van littekenweefsel met bedekking deur veloorplanting | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T |
| 0361 Z-plasty ● Z-plastie | 220.1 | 3 834.14 | 176.08 | 3 067.31 | 3 | 244.26 | +T |
| 0363 Local flap and skin graft ● Lokale flap en veloorplanting | 150 | 2 613.00 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0365 Cross finger flap (all stages) ● Kruisvingerflap (alle stadia) | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T |
| 0367 Palmarflap (all stages) ● Palmareflap (alle stadia) | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T |
| 0369 Distant flap: First stage ● Afgeleë flap: Eerste stadium | 158 | 2 752.36 | 126.4 | 2 201.89 | 3 | 244.26 | +T |
| 0371 Distant flap: Subsequent stage (not subject to General Modifier 0006) ● Afgeleë flap: Opvolgende stadia (nie onderhewig aan Algemene Wysiger 0006 nie) | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T |
| 0373 Transfer neurovascular island flap ● Verplasing van neurovaskulêre eilandflap | 230.5 | 4 015.31 | 184.4 | 3 212.25 | 3 | 244.26 | +T |
| 0374 Syndactyly: Separation of, including skin graft for one web (with skin flap and graft) ● Sindaktilie: Losmaak van, insluitende veltransplantasie vir een web (met velflap en verplanting) | 242.4 | 4 222.61 | 193.92 | 3 378.09 | 3 | 244.26 | +T |
| 0375 Dupuytren's contracture: Fasciotomy ● Dupuytren se kontraktuur: Fassiëktomie | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T |
| 0376 Dupuytren's contracture: Fasciectomy ● Dupuytren se kontraktuur: Fassiëktomie | 218 | 3 797.56 | 174.4 | 3 038.05 | 3 | 244.26 | +T |
| 3. MUSCULO-SKELETAL SYSTEM ● SPIER-SKELETSTELSEL | | | | | | | |
| 3.1 Bones ● Bene | | | | | | | |
| 3.1.1 Fractures ● Frakture | | | | | | | |
| 0383 Fracture (reduction under general anaesthetic): Scapula ● Fraktuur (reduksie onder algemene narkose): Skapula | | | | | 3 | 244.26 | +T+M |
| 0387 Fracture (reduction under general anaesthetic): Clavicle ● Fraktuur (reduksie onder algemene narkose): Klavikel | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T+M |
| 0388 Percutaneous pinning supracondylar fracture elbow - stand alone procedure ● Perkutane fiksering van suprakondulêre fraktuur - elmboog - alleenstaande prosedure | 175.70 | 3 060.69 | 140.56 | 2 448.56 | 3 | 244.26 | +T+M |
| 0389 Fracture (reduction under general anaesthetic): Humerus ● Fraktuur (reduksie onder algemene narkose): Humerus | 111.60 | 1 944.07 | 111.60 | 1 944.07 | 3 | 244.26 | +T+M |
| 0391 Fracture (reduction under general anaesthetic): Radius and/or Ulna ● Fraktuur (reduksie onder algemene narkose): Radius en/of Ulna | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T+M |
| 0392 Open reduction of both radius and ulna (Modifier 0051 not applicable) ● Oop reduksie beide radius en ulna (Wysiger 0051 nie van toepassing nie) | 210 | 3 658.20 | 168 | 2 926.56 | 3 | 244.26 | +T+M |
| 0402 Fracture (reduction under general anaesthetic): Carpal bone ● Fraktuur (reduksie onder algemene narkose): Karpale been | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T+M |
| 0403 Bennett's fracture-dislocation ● Bennett se fraktuur-ontwrigting | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T+M |

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|------|---|-------------------------|----------|--|----------|------------------------|--------|------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 0405 | Fracture reduction under general anaesthetic: Open treatment of Metacarpal: Simple ● Fraktuur reduksie onder algemene narkose: Oop behandeling van Metakarpaal: Eenvoudig | 118.3 | 2 060.79 | 118.3 | 2 060.79 | 3 | 244.26 | +T+M |
| 0409 | Fracture (reduction under general anaesthetic): Finger phalanx: Distal: Simple ● Fraktuur (reduksie onder algemene narkose): Vingerfalanks: Distaal: Eenvoudig | | | | | 3 | 244.26 | +T+M |
| 0411 | Fracture (reduction under general anaesthetic): Finger phalanx: Distal: Compound (open) ● Fraktuur (reduksie onder algemene narkose): Vingerfalanks: Distaal: Oop | 52 | 905.84 | 52 | 905.84 | 3 | 244.26 | +T+M |
| 0413 | Fracture (reduction under general anaesthetic): Finger phalanx: Proximal or middle: Simple ● Fraktuur (reduksie onder algemene narkose): Vingerfalanks: Proksimaal of middel: Eenvoudig | 48 | 836.16 | 48 | 836.16 | 3 | 244.26 | +T |
| 0415 | Fracture (reduction under general anaesthetic): Finger phalanx: Proximal or middle: Compound (open) ● Fraktuur (reduksie onder algemene narkose): Vingerfalanks: Proksimaal of middel: Oop | 102 | 1 776.84 | 102 | 1 776.84 | 3 | 244.26 | +T+M |
| 0417 | Fracture (reduction under general anaesthetic): Pelvis fracture: Closed (modifier 0051 is applicable) ● Fraktuur (reduksie onder algemene narkose): Pelvis fraktuur: Geslote (wysiger 0051 is van toepassing) | | | | | 3 | 244.26 | +T |
| 0419 | Fracture (reduction under general anaesthetic): Pelvis: Operative reduction and fixation ● Fraktuur (reduksie onder algemene narkose): Pelvis: Operatiewe reduksie en fiksasie | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 0421 | Fracture (reduction under general anaesthetic): Femur: Neck or Shaft ● Fraktuur (reduksie onder algemene narkose): Femur: Nek of Skag | 237 | 4 128.54 | 189.6 | 3 302.83 | 3 | 244.26 | +T+M |
| 0425 | Fracture (reduction under general anaesthetic) Patella ● Fraktuur (reduksie onder algemene narkose): Patella | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T+M |
| 0429 | Fracture (reduction under general anaesthetic) Tibia with or without Fibula ● Fraktuur (reduksie onder algemene narkose): Tibia met of sonder Fibula | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0433 | Fracture (reduction under general anaesthetic) Fibula shaft ● Fibulaskag | | | | | 3 | 244.26 | +T+M |
| 0435 | Fracture (reduction under general anaesthetic) Malleolus of ankle ● Fraktuur (reduksie onder algemene narkose): Malleolus van enkelgewrig | 58 | 1 010.36 | 58 | 1 010.36 | 3 | 244.26 | +T+M |
| 0437 | Fracture-dislocation of ankle ● Fraktuurontwrigting van enkelgewrig | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0438 | Open reduction Talus fracture (Modifier 0051 not applicable) ● Oop reduksie Talus fraktuur (Wysiger 0051 nie van toepassing nie) | 198.7 | 3 461.35 | 158.96 | 2 769.08 | 3 | 244.26 | +T+M |
| 0439 | Fracture (reduction under general anaesthetic): Tarsal bones (excluding talus and calcaneus) ● Fraktuur (reduksie onder algemene narkose): Tarsale bene (uitgesluit talus en kalkaneum) | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T+M |
| 0440 | Open reduction Calcaneus fracture (Modifier 0051 not applicable) ● Oop reduksie Kalkanius fraktuur (Wysiger 0051 nie van toepassing nie) | 403.50 | 7 028.97 | 322.5 | 5 617.95 | 3 | 244.26 | +T+M |
| 0441 | Fracture (reduction under general anaesthetic) Metatarsal ● Fraktuur (reduksie onder algemene narkose): Metatarsaal | 41.8 | 728.16 | 41.8 | 728.16 | 3 | 244.26 | +T+M |
| 0443 | Fracture (reduction under general anaesthetic): Toe phalanx: Distal: Simple ● Fraktuur (reduksie onder algemene narkose): Toonfalanks: Distaal: Eenvoudig | | | | | 3 | 244.26 | +T |
| 0445 | Fracture (reduction under general anaesthetic): Toe phalanx: Compound ● Fraktuur (reduksie onder algemene narkose): Toonfalanks: Oop | 32 | 557.44 | 32 | 557.44 | 3 | 244.26 | +T+M |
| 0447 | Fracture (reduction under general anaesthetic): Other: Simple ● Fraktuur (reduksie onder algemene narkose): Ander: Eenvoudig | 26 | 452.92 | 26 | 452.92 | 3 | 244.26 | +T |
| 0449 | Fracture (reduction under general anaesthetic): Other: Compound ● Fraktuur (reduksie onder algemene narkose): Ander: Oop | 52 | 905.84 | 52 | 905.84 | 3 | 244.26 | +T+M |
| 0451 | Fracture (reduction under general anaesthetic): Sternum and/or ribs: Closed ● Fraktuur (reduksie onder algemene narkose): Sternum en/of ribbes: Geslote | | | | | 3 | 244.26 | +T |

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|---------|---|-------------------------|----------|--|----------|------------------------|---|-------------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 0452 | Fracture (reduction under general anaesthetic): Sternum and/or ribs: Open reduction and fixation of multiple fractured ribs for flail chest ● Fraktuur (reduksie onder algemene narkose): Sternum en/of ribbes: Oop reduksie en fiksasie van veelvuldige ribfrakture vir vleël borskas | 230 | 4 006.60 | 184 | 3 205.28 | 3 | | 244.26 +T+M |
| 0455 | Fracture (reduction under general anaesthetic): Spine: With or without paralysis: Cervical ● Fraktuur (reduksie onder algemene narkose): Werwelkolom: Met of sonder verlamming: Nek | | | | | 3 | | 244.26 +T+M |
| 0456 | Fracture (reduction under general anaesthetic): Spine: With or without paralysis: Rest ● Fraktuur (reduksie onder algemene narkose): Werwelkolom: Met of sonder verlamming: Res | | | | | 3 | | 244.26 +T+M |
| 0459 | DELETED 2009: Open reduction and internal fixation for fracture and/or dislocation of spine ● GESKRAP 2009: Oop reduksie en interne fiksasie vir fraktuur en/of dislokasie van werwelkom | | | | | | | |
| 0461 | Fracture (reduction under general anaesthetic): Compression fracture: Cervical ● Fraktuur (reduksie onder algemene narkose): Kompressiefraktuur: Nek | | | | | 3 | | 244.26 +T+M |
| 0462 | Fracture (reduction under general anaesthetic): Compression fracture: Rest ● Fraktuur (reduksie onder algemene narkose): Kompressiefraktuur: Res | | | | | 3 | | 244.26 +T+M |
| 0463 | Fracture (reduction under general anaesthetic): Spinous or transverse processes: Cervical ● Fraktuur (reduksie onder algemene narkose): Spineuse of transverse prosesse: Nek | | | | | 3 | | 244.26 +T+M |
| 0464 | Fracture (reduction under general anaesthetic): Spinous or transverse processes: Rest ● Fraktuur (reduksie onder algemene narkose): Spineuse of transverse prosesse: Res | | | | | 3 | | 244.26 +T+M |
| 3.1.1.1 | Operations for fractures ● Operasies vir frakture | | | | | | | |
| 0465 | Fractures involving large joints (includes the item for the relative bone). This item may not be used as a modifier) ● Frakture wat groot gewigte aantast (sluit die item vir die betrokke been in). Hierdie item mag nie as 'n wysiger gebruik word nie | 288 | 5 016.96 | 230.4 | 4 013.57 | 3 | | 244.26 +T+M |
| 0473 | Percutaneous insertion plus subsequent removal of Kirschner wires or Steinmann pin (Not subject to rule G) (Modifier 0005 not applicable) ● Perkutane implasing en daaropvolgende verwydering van Kirschner drade of Steinmann penne(Nie onderhewig aan reël G nie) (Wysiger 0005 nie van toepassing) | 43 | 749.06 | 43 | 749.06 | 3 | | 244.26 +T |
| 0475 | Bonegrafting or internal fixation for malunion or non-union: Femur, Tibia, Humerus, Radius and Ulna ● Beenoorplanting of interne fiksasie vir wanhegting of nie-hegting: Femur, Tibia, Humerus, Radius en Ulna | 282 | 4 912.44 | 225.6 | 3 929.95 | 3 | | 244.26 +T+M |
| 0479 | Bonegrafting or internal fixation for malunion or non-union: Other bones (not applicable to fingers and toes) ● Beenoorplanting of interne fiksasie vir wanhegting of nie-hegting: Ander bene (nie van toepassing op vingers en tone nie) | 154 | 2 682.68 | 123.2 | 2 146.14 | 3 | | 244.26 +T+M |

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|--|-------------------------|----------|--|----------|------------------------|--------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.1.2 Bony operations ● Benige operasies | | | | | | | |
| 3.1.2.1 Bone grafting ● Beenoorplanting | | | | | | | |
| 0497 Resection of bone with or without grafting (benign) ● Reseksie van been met of sonder oorplanting (benigne) | 282 | 4 912.44 | 225.6 | 3 929.95 | 3 | 244.26 | +T+M |
| 0498 Resection of bone or tumour (malignant) with or without grafting (does not include digits) □ ● Reseksie van been of tumor met of sonder beenoorplanting (maligne) - fingers uitgesluit | 340 | 5 922.80 | 272 | 4 738.24 | 3 | 244.26 | +T+M |
| 0499 Grafts to cysts: Large bones □ ● Oorplanting by siste: Groot bene | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T+M |
| 0501 Grafts to cysts: Small bones ● Oorplanting by siste: Klein beentjies | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0503 Grafts to cysts: Cartilage graft ● Oorplanting by siste: Kraakbeenoorplanting | 206 | 3 588.52 | 164.8 | 2 870.82 | 3 | 244.26 | +T+M |
| 0505 Grafts to cysts: Inter-metacarpal bone graft ● Oorplanting by siste: Inter-metakarpace beenoorplanting | 147 | 2 560.74 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0507 Removal of autogenous bone for grafting (not subject to modifier 0005) ● Verwydering van outogene been vir oorplanting (nie-onderhewig aan wysiger 0005) | 50 | 871.00 | 50 | 871.00 | 3 | 244.26 | +T+M |
| 3.1.2.2 Acute/chronic osteomyelitis ● Akute/kroniese osteomiëlitis | | | | | | | |
| 0509 Conservative treatment ● Konserwatiewe behandeling | | | | | | | |
| 0511 Operation: Tariff which would be applicable for compound (open) fracture of the bone involved, including six weeks post-operative care ● Operasie: Gelde van toepassing op 'n saamgestelde (oop) fraktuur van die betrokke been, insluitend ses weke na-operatiewe behandeling | | | | | | | |
| 0512 Sternum sequestrectomy and drainage: Including six weeks after-care ● Sternum sekwestrektomie en dreinerings: Ses weke nasorg ingesluit | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 3.1.2.3 Osteotomy ● Osteotomie | | | | | | | |
| 0514 Osteotomy: Sternum: Repair of pectus-excavatum ● Osteotomie: Sternum: Herstel van pectus excavatum | 330 | 5 748.60 | 264 | 4 598.88 | 3 | 244.26 | +T+M |
| 0515 Osteotomy: Sternum: Repair of pectus carinatum ● Osteotomie: Sternum: Herstel van pectus carinatum | 330 | 5 748.60 | 264 | 4 598.88 | 3 | 244.26 | +T+M |
| 0516 Osteotomy: Pelvic ● Osteotomie van die Pelvis | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 0521 Osteotomy: Femoral: Proximal (Modifier 0051 is applicable) ● Osteotomie: Femoraal: Proksimaal (Wysiger 0051 is van toepassing) | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 0527 Osteotomy: Knee region (Modifier 0051 is applicable) ● Osteotomie: Kniestreek (Wysiger 0051 is van toepassing) | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 0528 Osteotomy: Os Calcis (Dwyer operation) (Modifier 0051 is applicable) ● Osteotomie: Kalkaneum (Dwyer operasie) (Wysiger 0051 is van toepassing) | 115 | 2 003.30 | 115 | 2 003.30 | 3 | 244.26 | +T+M |
| 0530 Osteotomy: Metacarpal and phalanx: Corrective for mal-union or rotation (Modifier 0051 is applicable) ● Osteotomie: Metakarpaal en falanks: Korrektief vir wanhegting of rotasie (Wysiger 0051 is van toepassing) | 120 | 2 090.40 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0531 Rotational osteotomy tibia and fibula - stand alone procedure □ ● □ Rotasie osteotomie - tibia een fibula - alleenstaande prosedure | 278.90 | 4 858.44 | 223.12 | 3 886.75 | 3 | 244.26 | +T+M |
| 0532 Rotation osteotomy of the Radius, Ulna or Humerus(modifier 0051 is applicable) ● Rotasie osteotomie van Radius, Ulna of Humerus Wysiger 0051 is van toepassing) | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0533 Osteotomy single metatarsal (modifier 0051 is applicable) ● Osteotomie, enkele metatarsaal (wysiger 0051 is van toepassing) | 60 | 1 045.20 | 60 | 1 045.20 | 3 | 244.26 | +T+M |
| 0534 Multiple metatarsal osteotomies (modifier 0051 is applicable) ● Veelvuldige metatarsale osteotomieë (wysiger 0051 is van toepassing) | 150 | 2 613.00 | 120 | 2 090.40 | 3 | 244.26 | +T+M |

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|--|-------------------------|----------|--|----------|------------------------|----------------------------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.1.2.4 Exostosis ● Eksostose | | | | | | | |
| 0535 Exostosis: Excision: Readily accessible sites ● Eksostose: Eksisie: Toeganklike areas | 60 | 1 045.20 | 60 | 1 045.20 | 3 | 244.26 | +T+M |
| 0537 Exostosis: Excision: Less accessible sites ● Eksostose: Eksisie: Minder toeganklike areas | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 3.1.2.5 Biopsy ● Biopsie | | | | | | | |
| 0539 Needle Biopsy: Spine (no after-care), Modifier 0005 not applicable ● Naaldbiopsie: Werwelkolom (geen nasorg), Wysiger 0005 nie van toepassing nie | 50 | 871.00 | 50 | 871.00 | 4 | 325.68 | +T |
| 0541 Needle Biopsy: Other sites (no after-care), Modifier 0005 not applicable ● Naaldbiopsie: Ander areas (geen na-sorg), Wysiger 0005 nie van toepassing nie | 32 | 557.44 | 32 | 557.44 | 4 | 325.68 | +T |
| 0543 Biopsy: Open (modifier 0005 is not applicable): Readily accessible site ● Biopsie: Oop (wysiger 0005 is nie van toepassing nie): Maklik bereikbaar | 64 | 1 114.88 | 64 | 1 114.88 | | As per bone/ Soos per been | |
| 0545 Biopsy: Open (modifier 0005 is not applicable): Less accessible site ● Biopsie: Oop (wysiger 0005 is nie van toepassing nie): Moeilik bereikbaar | 96 | 1 672.32 | 96 | 1 672.32 | | As per bone/ Soos per been | |
| 3.2 Joints ● Gewrigte | | | | | | | |
| 3.2.1 Dislocations ● Ontwrigtings | | | | | | | |
| 0547 Joint: Dislocation: Clavicle: either end ● Gewrig: Ontwrigting: Klavikel: enige punt | 38 | 661.96 | 38 | 661.96 | 3 | 244.26 | +T+M |
| 0549 Joint: Dislocation: Shoulder ● Gewrig: Ontwrigting: Skouer | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T+M |
| 0551 Joint: Dislocation: Elbow ● Gewrig: Ontwrigting: Elmboog | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T+M |
| 0552 Joint: Dislocation: Wrist ● Gewrig: Ontwrigting: Polsgewrig | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T+M |
| 0553 Joint: Dislocation: Perilunar transscaphoid fracture dislocation ● Gewrig: Ontwrigting: Perilunêre transkafoïdefraktuurontwrigting | 130 | 2 264.60 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0555 Joint: Dislocation: Lunate ● Lunatum | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T+M |
| 0556 Joint: Dislocation: Carpo-metacarpal dislocation ● Gewrig: | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T+M |
| 0557 Joint: Dislocation: Metacarpal-phalangeal or interphalangeal joints (hand) ● Gewrig: Ontwrigting: Metakarpofalangeaal of interfalangeale gewrigte (hand) | 26 | 452.92 | 26 | 452.92 | 3 | 244.26 | +T+M |
| 0559 Joint: Dislocation: Hip ● Gewrig: Ontwrigting: Heup | 109 | 1 898.78 | 109 | 1 898.78 | 3 | 244.26 | +T+M |
| 0561 Joint: Dislocation: Knee ● Gewrig: Ontwrigting: Knie | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 0563 Joint: Dislocation: Patella ● Gewrig: Ontwrigting: Patella | 32 | 557.44 | 32 | 557.44 | 3 | 244.26 | +T+M |
| 0565 Joint: Dislocation: Ankle ● Gewrig: Ontwrigting: Enkel | 90 | 1 567.80 | 90 | 1 567.80 | 3 | 244.26 | +T+M |
| 0567 Joint: Dislocation: Sub-Talar dislocation ● Gewrig: Ontwrigting: Sub-Talare ontwrigting | 90 | 1 567.80 | 90 | 1 567.80 | 3 | 244.26 | +T+M |
| 0569 Joint: Dislocation: Intertarsal or Tarsometatarsal or Mid-tarsal ● Gewrig: Ontwrigting: Intertarsaal of Tarsometatarsaal of Midtarsaal | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T+M |
| 0571 Joint: Dislocation: Meta-tarsophalangeal or interphalangeal joints (foot) ● Metatarsofalangeaal of interfalangeale gewrigte (voet) | 14 | 243.88 | 14 | 243.88 | 3 | 244.26 | +T+M |
| 0573 Joint: Dislocation: Spine with or without paralysis ● Gewrig: Ontwrigting: Werwelkolom met of sonder verlamming | | * | | * | | --- | |
| 3.2.2 Operations for dislocations ● Operasies vir ontwrigtings | | | | | | | |
| 0578 Recurrent dislocation of shoulder ● Herhaalde skouer-ontwrigting | 200 | 3 484.00 | 160 | 2 787.20 | 3 | 244.26 | +T+M |
| 0579 Recurrent dislocation of large joints ● Herhalende ontwrigting van groot gewrigte | 161 | 2 804.62 | 128.8 | 2 243.70 | 3 | 244.26 | +T+M |

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|---|-------------------------|----------|--|----------|------------------------|--------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.2.3 Capsular operations ● Kapsulêre operasies | | | | | | | |
| 0582 Capsulotomy or arthrotomy or biopsy or drainage of joint: Small joint (including three weeks after-care) ● Kapsulotomie of artrotomie of biopsie of dreinasie van gewrig: Klein gewrig (drie weke nasorg ingesluit) | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T+M |
| 0583 Capsulotomy or arthrotomy or biopsy or drainage of joint: Large joint (including three weeks after-care) ● Kapsulotomie of artrotomie of biopsie of dreinasie van gewrig: Groot gewrig (drie weke nasorg ingesluit) | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 0585 Capsulotomy or arthrotomy or biopsy or drainage of joint: Capsulectomy digital joint ● Kapsulotomie of artrotomie of biopsie of dreinasie van gewrig: Kapsulektomie digitale gewrig | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T+M |
| 0586 Multiple percutaneous capsulotomies of metacarpo-phalangeal joints ● Veelvuldige perkutane kapsulotomieë van metakarpofalangeale gewrigte | 90 | 1 567.80 | 90 | 1 567.80 | 3 | 244.26 | +T+M |
| 0587 Release of digital joint contracture ● Losmaak van falan-gealegewrigskontraaktuur | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 3.2.4 Synovectomy ● Sinovektomie | | | | | | | |
| 0589 Synovectomy: Digital joint ● Sinovektomie: Digitale gewrig | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T+M |
| 0592 Synovectomy: Large joint ● Sinovektomie: Grootgewrig | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0593 Tendon synovectomy ● Tendon sinovektomie | 203.7 | 3 548.45 | 162.96 | 2 838.76 | 3 | 244.26 | +T+M |
| 3.2.5 Arthrodesis ● Artrodese | | | | | | | |
| 0597 Arthrodesis: Shoulder ● Artrodese: Skouer | 224 | 3 902.08 | 179.2 | 3 121.66 | 3 | 244.26 | +T+M |
| 0598 Arthrodesis: Elbow ● Artrodese: Elmboog | 180 | 3 135.60 | 144 | 2 508.48 | 3 | 244.26 | +T+M |
| 0599 Arthrodesis: Wrist ● Artrodese: Polsgewrig | 180 | 3 135.60 | 144 | 2 508.48 | 3 | 244.26 | +T+M |
| 0600 Arthrodesis: Digital joint ● Artrodese: Digitale gewrig | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0601 Arthrodesis: Hip ● Artrodese: Heup | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 0602 Arthrodesis: Knee ● Artrodese: Knie | 180 | 3 135.60 | 144 | 2 508.48 | 3 | 244.26 | +T+M |
| 0603 Arthrodesis: Ankle ● Artrodese: Enkel | 180 | 3 135.60 | 144 | 2 508.48 | 3 | 244.26 | +T+M |
| 0604 Arthrodesis: Sub-talar ● Artrodese: Sub-talaar | 130 | 2 264.60 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0605 Arthrodesis: Stabilization of foot (triple-arthrodeses) ● Artrodese: Stabilisering van voet (drievoudige artrodese) | 180 | 3 135.60 | 144 | 2 508.48 | 3 | 244.26 | +T+M |
| 0607 Arthrodesis: Mid-tarsal wedge resection ● Artrodese: Midtarsale wigreseksie | 180 | 3 135.60 | 144 | 2 508.48 | 3 | 244.26 | +T+M |
| 3.2.6 Arthroplasty ● Artroplastie | | | | | | | |
| 0614 Arthroplasty: Debridement large joints ● Artroplastie: Debridement groot gewrigte | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0615 Arthroplasty: Excision medial or lateral end of clavicle ● Artroplastie: Eksisie mediale of laterale punt van klavikel | 116 | 2 020.72 | 116 | 2 020.72 | 3 | 244.26 | +T+M |
| 0617 Shoulder: Acromioplasty ● Skouer: Akromioplastie | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T+M |
| 0619 Shoulder: Partial replacement ● Skouer: Gedeeltelike vervanging | 277 | 4 825.34 | 221.6 | 3 860.27 | 5 | 407.10 | +T+M |
| 0620 Shoulder: Total replacement ● Skouer: Totale vervanging | 416 | 7 246.72 | 332.8 | 5 797.38 | 5 | 407.10 | +T+M |
| 0621 Elbow: Excision head of radius ● Elmboog: Eksisie kop van radius | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 0622 Elbow: Excision ● Elmboog: Eksisie | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T+M |
| 0623 Elbow: Partial replacement ● Elmboog: Gedeeltelike vervanging | 188 | 3 274.96 | 150.4 | 2 619.97 | 3 | 244.26 | +T+M |
| 0624 Elbow: Total replacement ● Elmboog: Totale vervanging | 282 | 4 912.44 | 225.6 | 3 929.95 | 3 | 244.26 | +T+M |
| 0625 Wrist: Excision distal end of ulna ● Polsgewrig: Eksisie distale end van ulna | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 0626 Wrist: Excision single bone ● Polsgewrig: Eksisie een beentjie | 110 | 1 916.20 | 110 | 1 916.20 | 3 | 244.26 | +T+M |
| 0627 Wrist: Excision proximal row ● Polsgewrig: Eksisie proksimale ry | 166 | 2 891.72 | 132.8 | 2 313.38 | 3 | 244.26 | +T+M |
| 0631 Wrist: Total replacement ● Polsgewrig: Totale vervanging | 249 | 4 337.58 | 199.2 | 3 470.06 | 3 | 244.26 | +T+M |
| 0635 Digital joint: Total replacement ● Digitale gewrig: Totale vervanging | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T+M |
| 0637 Hip: Total replacement ● Heup: Totale vervanging | 416 | 7 246.72 | 332.8 | 5 797.38 | 3 | 244.26 | +T+M |
| 0641 Hip: Prosthetic replacement of femoral head ● Heup: Vervanging van kop van femur met protese | 288 | 5 016.96 | 230.4 | 4 013.57 | 3 | 244.26 | +T+M |
| 0643 Hip: Girdlestone ● Heup: Girdlestone | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 0645 Knee: Partial replacement ● Knie: Gedeeltelike vervanging | 277 | 4 825.34 | 221.6 | 3 860.27 | 3 | 244.26 | +T+M |
| 0646 Knee: Total replacement ● Knie: totale vervanging | 416 | 7 246.72 | 332.8 | 5 797.38 | 3 | 244.26 | +T+M |
| 0649 Ankle: Total replacement ● Enkel: Totalevervanging | 290.4 | 5 058.77 | 232.32 | 4 047.01 | 3 | 244.26 | +T+M |
| 0650 Ankle: Astragalectomy ● Enkel: Astragalektomie | 154 | 2 682.68 | 123.2 | 2 146.14 | 3 | 244.26 | +T+M |
| 3.2.7 Miscellaneous (Joints) ● Diverse (gewrigte) | | | | | | | |
| 0661 Aspiration of joint or intra-articular injection (not subject to rule G) (Modifier 0005 not applicable) ● Aspirasie van gewrig of intra-artikulêre inspuiting (nie onderhewig aan reël G nie) (Wysiger 0005 nie van toepassing) | 9 | 156.78 | 9 | 156.78 | 3 | 244.26 | +T |
| 0667 Arthroscopy (excluding after-care), modifiers 0005 and 0013 not applicable ● Artroskopies (nasorg uitgesluit), wysigers 0005 en 0013 nie van toepassing nie | 60 | 1 045.20 | 60 | 1 045.20 | 3 | 244.26 | +T |

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|-------|--|-------------------------|----------|--|----------|------------------------|------------------|---------------------------------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 0669 | Manipulation large joint under general anaesthetic (not subject to rule G) (Modifier 0005 not applicable) ● Manipulasie van groot gewrig onder algemene narkose (nie onderhewig aan reël G nie) (Wysiger 0005 nie van toepassing) | 14 | 243.88 | 14 | 243.88 | 4 3 | 325.68 244.26 | Hip+T Knee / Shoulder + T |
| 0670 | Only the consultation fee should be charged when manipulation of a large joint is performed with or without local anaesthetic ● Slegs konsultasiegelde mag gehef word wanneer 'n groot gewrig gemanipuleer word met of sonder lokale narkose | | | | | 4 3 | 325.68 244.26 | Hip+T Knee / Shoulder + T |
| 0673 | Meniscectomy or operation for other internal derangement of knee ● Menisektomie of operasie vir ander interne versteuring van knie | 109 | 1 898.78 | 109 | 1 898.78 | 3 | 244.26 | +T+M |
| 3.2.8 | Joint ligament reconstruction or suture ● Rekonstruksie of hegting van ligamente | | | | | | | |
| 0675 | Joint ligament reconstruction or suture: Ankle: Collateral ● Rekonstruksie of hegting van ligamente: Enkel: Kollateraal | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0677 | Joint ligament reconstruction or suture: Knee: Collateral ● Rekonstruksie of hegting van ligamente: Knie: Kollateraal | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0678 | Joint ligament reconstruction or suture: Knee: Cruciate ● Rekonstruksie of hegting van ligamente: Knie: Kruisligament | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0679 | Joint ligament reconstruction or suture: Ligament augmentation procedure of knee ● Rekonstruksie of hegting van ligamente: Versterkte knie ligament herstel | 280 | 4 877.60 | 224 | 3 902.08 | 3 | 244.26 | +T+M |
| 0680 | Joint ligament reconstruction or suture: Digital joint ligament ● Rekonstruksie of hegting van ligamente: Digitale gewrig ligament | 165 | 2 874.30 | 132 | 2 299.44 | 3 | 244.26 | +T+M |
| 3.3 | Amputations ● Amputasies | | | | | | | |
| 3.3.1 | Specific amputations ● Spesifieke amputasies | | | | | | | |
| 0682 | Amputation: Fore-quarter amputation ● Amputasie: Voorkwartamputasie | 294 | 5 121.48 | 235.2 | 4 097.18 | 9 | 732.78 | +T+M |
| 0683 | Amputation: Through shoulder ● Amputasie: Deur skouer | 148 | 2 578.16 | 120 | 2 090.40 | 5 | 407.10 | +T+M |
| 0685 | Amputation: Upper arm or fore-arm ● Amputasie: Bo-arm of voorarm | 116 | 2 020.72 | 116 | 2 020.72 | 3 | 244.26 | +T+M |
| 0687 | Partial amputation of the hand: One ray ● Amputasie: Amputasie van gedeelte van hand: Een straal | 102 | 1 776.84 | 102 | 1 776.84 | 3 | 244.26 | +T+M |
| 0691 | Amputation: Whole or part of finger (skin flap included) ● Amputasie: Gedeelte van, of totale vinger (sluit vel flap in) | 116.8 | 2 034.66 | 116.80 | 2 034.66 | 3 | 244.26 | +T+M |
| 0693 | Hindquarter amputation ● Agterkwart amputasie | 420 | 7 316.40 | 336 | 5 853.12 | 6 | 488.52 | +T+M |
| 0695 | Amputation: Through hip joint region ● Amputasie: Deur heupgewrigstreek | 192 | 3 344.64 | 153.6 | 2 675.71 | 6 | 488.52 | +T+M |
| 0697 | Amputation: Through thigh ● Amputasie: Deur dybeen | 205 | 3 571.10 | 164 | 2 856.88 | 6 | 488.52 | +T+M |
| 0699 | Amputation: Below knee, through knee/Syme ● Amputasie: Onder knie, deur knie of Syme | 194 | 3 379.48 | 155.2 | 2 703.58 | 5 | 407.10 | +T+M |
| 0701 | Amputation: Trans-metatarsal or trans-tarsal ● Amputasie: Transmetatarsaal of transtarsaal | 142 | 2 473.64 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0703 | Amputation: Foot: One ray ● Amputasie: Voet: Een straal | 97 | 1 689.74 | 97 | 1 689.74 | 3 | 244.26 | +T+M |
| 0705 | Amputation: Toe (skin flap included) ● Amputasie: Toon (vel flap ingesluit) | 66 | 1 149.72 | 66 | 1 149.72 | 3 | 244.26 | +T+M |

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|--|-------------------------|-----------|--|-----------|------------------------|--------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.3.2 Post-amputation reconstruction ● Rekonstruksie na amputasie | | | | | | | |
| 0706 Post-amputation reconstruction: Skin flap taken from a site remote from the injured finger or in cases of an advanced flap e.g. Cutler ● Rekonstruksie na amputasie: Waar velflap geneem word van 'n liggaamsdeel verwyder van die beseerde vinger of in gevalle van verplasingflap bv. Cutler Note: If not performed on thumb or index finger it must be motivated ● Opmerking: Indien nie uitgevoer op duim of wysvinger nie moet dit gemotiveer word | 75 | 1 306.50 | 75 | 1 306.50 | 3 | 244.26 | +T+M |
| 0707 Post-amputation reconstruction: Krukenberg reconstruction ● Rekonstruksie na amputasie: Krukenbergrekonstruksie | 206 | 3 588.52 | 164.8 | 2 870.82 | 3 | 244.26 | +T+M |
| 0709 Post-amputation reconstruction: Metacarpal transfer ● Rekonstruksie na amputasie: Metakarpale verplanting | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T+M |
| 0711 Post-amputation reconstruction: Pollicization of the finger (Prior permission must be obtained from the Commissioner at all times) ● Rekonstruksie na amputasie: Polliisasie van vinger (Vooraf goedkeuring moet ten alle tye vanaf die Kommissaris verkry word) | 282 | 4 912.44 | 225.6 | 3 929.95 | 3 | 244.26 | +T+M |
| 0712 Post-amputation reconstruction: Toe to thumb transfer (Prior permission must be obtained from the Commissioner at all times) ● Rekonstruksie na amputasie: Toon na duim verplanting (Vooraf goedkeuring moet ten alle tye vanaf die Kommissaris verkry word) | 800 | 13 936.00 | 640 | 11 148.80 | 3 | 244.26 | +T+M |
| 3.4 Muscles, tendons and fascias ● Spiere, tendons en fasciae | | | | | | | |
| 3.4.1 Investigations ● Ondersoeke | | | | | | | |
| 0713 Electromyography ● Elektromiografie | 75 | 1 306.50 | 75 | 1 306.50 | 3 | 244.26 | +T |
| 0714 Electro-myographic neuro-muscular junctional study, including edrophonium respons (not to be used with item 2730) ● Elektromiografiese neuro- muskulêre verbindingstudie, ingeslote edrophonium respons (moet nie saam met item 2730 gebruik word nie) | 57 | 992.94 | 57 | 992.94 | 3 | 244.26 | +T |
| 0715 Strength duration curve per session ● Kragduur-kromme per sessie | 10.5 | 182.91 | 10.5 | 182.91 | 3 | 244.26 | +T |
| 0717 Electrical examination of single nerve or muscle ● Elektriese ondersoek van enkele senuwee of spier | 9 | 156.78 | 9 | 156.78 | 3 | 244.26 | +T |
| 0721 Voltage integration during isometric contraction ● Stroomspanningsintegrasie tydens isometriese kontrakisie | 12 | 209.04 | 12 | 209.04 | 3 | 244.26 | +T |
| 0723 Tonometry with edrophonium ● Tonometrie met edrophonium | 8 | 139.36 | 8 | 139.36 | 3 | 244.26 | +T |
| 0725 Isometric tension studies with edrophonium ● Isometriese spanningstudies met edrophonium | 10 | 174.20 | 10 | 174.20 | 3 | 244.26 | +T |
| 0727 Cranial reflex study (both early and late responses) supra occulofacial, corneofacial or flabellofacial: Unilateral ● Kraniale refleksstudie (vroeë en laat reaksies) supra-occulofacialis, corneofacialis of flabello-facialis: Unilateraal | 8 | 139.36 | 8 | 139.36 | 3 | 244.26 | +T |
| 0728 Cranial reflex study (both early and late responses) supra occulofacial, corneofacial or flabellofacial: Bilateral ● Kraniale refleksstudie (vroeë en laat reaksies) supra-occulofacialis, corneofacialis of flabello-facialis: Bilateraal | 14 | 243.88 | 14 | 243.88 | 3 | 244.26 | +T |
| 0729 Tendon reflex time ● Tendon refleks-tyd | 7 | 121.94 | 7 | 121.94 | 3 | 244.26 | +T |
| 0730 Limb-brain somatosensory studies (per limb) ● Ledemaat-brein somatosensoriese studies (per ledemaat) | 49 | 853.58 | 49 | 853.58 | 3 | 244.26 | +T |
| 0731 Vision and audiosensory studies ● Visuele en oudiosensoriese toetse | 49 | 853.58 | 49 | 853.58 | | | |
| 0733 Motor nerve conduction studies (single nerve) ● Bestudering van geleiding deur motoriese senuwee (enkelsenuwee) | 26 | 452.92 | 26 | 452.92 | | | |
| 0735 Examinations of sensory nerve conduction by sweep averages (single nerve) ● Ondersoek van sensoriese senuwee-geleiding met golwingsgemiddeldes (enkele senuwee) | 31 | 540.02 | 31 | 540.02 | 3 | 244.26 | +T |
| 0737 Biopsy for motor nerve terminals and end plates ● Biopsie vir motorsenuwee eindpunte en eindplate | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 0739 Combined muscle biopsy with end plates and nerve terminal biopsy ● Gekombineerde spierbiopsie met eindplate en senuwee-eindpunt biopsie | 34 | 592.28 | 34 | 592.28 | 8 | 651.36 | +T |
| 0740 Muscle fatigue studies ● Spieruitputtingsondersoeke | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 0741 Muscle biopsy ● Spierbiopsie | 20 | 348.40 | 20 | 348.40 | 8 | 651.36 | +T |
| 0742 Global fee for all muscle studies, including histochemical studies ● Globale tarief vir alle spierstudies, histochemiese studies ingeslote | 262 | 4 564.04 | | | | | |
| 4701 Biochemical estimations on muscle biopsy specimens: Creatine kinase ● Biochemiese toetse op spierbiopsie-monsters: Kreatine kinase | 20.25 | 352.76 | | | | | |

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| | | U/E | R | U/E | R | U/E | R | T/M |
| 4703 | Biochemical estimations on muscle biopsy specimens: Adenylate kinase ● Biochemiese toetse op spierbiopsie-monsters: Adenylate kinase | 33.3 | 580.09 | | | | | |
| 4705 | Biochemical estimations on muscle biopsy specimens: Pyruvate kinase ● Biochemiese toetse op spierbiopsie-monsters: Pyruvate kinase | 5.7 | 99.29 | | | | | |
| 4707 | Biochemical estimations on muscle biopsy specimens: Lactate dehydrogenase ● Biochemiese toetse op spierbiopsie-monsters: Laktate dehydrogenase | 1.6 | 27.87 | | | | | |
| 4709 | Biochemical estimations on muscle biopsy specimens: Adenylate deaminase ● Biochemiese toetse op spierbiopsie-monsters: Adenylate deaminase | 9.9 | 172.46 | | | | | |
| 4711 | Biochemical estimations on muscle biopsy specimens: Phosphoglycerate kinase ● Biochemiese toetse op spierbiopsie-monsters: Fosfoglykerate kinase | 13.7 | 238.65 | | | | | |
| 4713 | Biochemical estimations on muscle biopsy specimens: Phosphoglycerate mutase ● Biochemiese toetse op spierbiopsie-monsters: Fosfoglykerate mutase | 25.9 | 451.18 | | | | | |
| 4715 | Biochemical estimations on muscle biopsy specimens: Enolase ● Biochemiese toetse op spierbiopsie-monsters: Enolase | 32.7 | 569.63 | | | | | |
| 4717 | Biochemical estimations on muscle biopsy specimens: Phosphofruktokinase ● Biochemiese toetse op spierbiopsie-monsters: Fosfofruktokinase | 37.7 | 656.73 | | | | | |
| 4719 | Biochemical estimations on muscle biopsy specimens: Aldolase ● Biochemiese toetse op spierbiopsie-monsters: Aldolase | 15.75 | 274.37 | | | | | |
| 4721 | Biochemical estimations on muscle biopsy specimens: Glyceraldehyde 3 Phosphate Dehydrogenase ● Biochemiese toetse op spierbiopsie-monsters: Glykeraldehide 3 Fosfate Dehydrogenase | 11.06 | 192.67 | | | | | |
| 4723 | Biochemical estimations on muscle biopsy specimens: Phosphorylase ● Biochemiese toetse op spierbiopsie-monsters: Fosforylase | 34.7 | 604.47 | | | | | |
| 4725 | Biochemical estimations on muscle biopsy specimens: Phosphoglucomutase ● Biochemiese toetse op spierbiopsie-monsters: Fosfoglukomutase | 40.3 | 702.03 | | | | | |
| 4727 | Biochemical estimations on muscle biopsy specimens: Phosphohexose Isomerase ● Biochemiese toetse op spierbiopsie-monsters: Fosfohexose isomerase | 28.8 | 501.70 | | | | | |
| 3.4.2 | Decompression Operations ● Dekompressie Operasies | | | | | | | |
| 0743 | Major Compartmental Decompression ● Ekstensiewe Kompartementele Dekompressie | 132 | 2 299.44 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0744 | Decompression operation: Fasciotomy only ● Dekompressie operasie: Fasciotomie alleenlik | 60 | 1 045.20 | 60 | 1 045.20 | 3 | 244.26 | +T |

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|---|-------------------------|----------|--|----------|------------------------|--------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.4.3 Muscle and tendon repair ● Spier- en pees-herstel | | | | | | | |
| 0745 Muscle and tendon repair: Biceps humeri ● Spier en tendon herstel: Biceps humeri | 109 | 1 898.78 | 109 | 1 898.78 | 3 | 244.26 | +T |
| 0746 Muscle and tendon repair: Removal of calcification in Rotator cuff ● Spier en tendon herstel: Verwydering van verkalking in Rotatorkraag | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 0747 Muscle and tendon repair: Rotator cuff ● Spier en tendon herstel: Rotatorkraag | 134 | 2 334.28 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 0748 Muscle and tendon repair: Debridement rotator cuff ● Spier en tendon herstel: Debridement rotatorkraag | 139.7 | 2 433.57 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 0749 Muscle and tendon repair: Scapulopecty - stand alone procedure ● Spier en tendon herstel: Skapulopeksie - alleenstaande prosedure | 271.90 | 4 736.50 | 217.52 | 3 789.20 | 4 | 325.68 | +T |
| 0755 Muscle and tendon repair: Infrapatellar or quadriceps tendon ● Spier en tendon herstel: Infrapatellere of kwadrisepees | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0757 Muscle and tendon repair: Achilles tendon repair ● Spier en | 197.6 | 3 442.19 | 158.08 | 2 753.75 | 4 | 325.68 | +T |
| 0759 Muscle and tendon repair: Other single tendon ● Spier en tendon herstel: Ander enkele pees | 77 | 1 341.34 | 77 | 1 341.34 | 3 | 244.26 | +T |
| 0763 Muscle and tendon repair: Tendon or ligament injection ● Spier en tendon herstel: Pees- of ligamentinspuiting | 9 | 156.78 | 9 | 156.78 | 3 | 244.26 | +T |
| 0767 Hand: Flexor tendon suture: Primary (per tendon, Modifier 0005 not applicable) ● Hand: Fleksortendon hegting: Primêr (per pees, Wysiger 0005 nie van toepassing) | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0769 Hand: Flexor tendon suture: Secondary (per tendon, Modifier 0005 not applicable) ● Hand: Fleksortendon hegting: Sekondêr (per pees), Wysiger 0005 nie van toepassing | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T |
| 0771 Extensor tendon suture: Primary (per tendon, Modifier 0005 not applicable) ● Ekstensor-tendon hegting: Primêr (per pees, Wysiger 0005 nie van toepassing) | 129.7 | 2 259.37 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0773 Extensor tendon suture: Secondary (per tendon, Modifier 0005 not applicable) ● Ekstensor-tendon hegting: Sekondêr (per pees, Wysiger 0005 nie van toepassing) | 80 | 1 393.60 | 80 | 1 393.60 | 3 | 244.26 | +T |
| 0774 Repair of Boutonnière deformity or Mallet Finger with graft ● Herstel van Boutonnière-deformiteit of Mallet-vinger met peesverplanting | 183.7 | 3 200.05 | 146.96 | 2 560.04 | 3 | 244.26 | +T |
| 3.4.4 Tendon graft ● Pees oorplanting | | | | | | | |
| 0775 Free tendon graft ● Vrye peesoorplanting | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T |
| 0776 Reconstruction of pulley for flexor tendon ● Rekonstruksie van katrol van 'n fleksorpees | 50 | 871.00 | 50 | 871.00 | 3 | 244.26 | +T |
| 0777 Tendon graft: Finger: Flexor ● Tendon-oorplanting: Vinger: Fleksor | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T |
| 0779 Tendon graft: Finger: Extensor ● Tendon-oorplanting: Vinger: Ekstensor | 122 | 2 125.24 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0780 Two stage flexor tendon graft using silastic rod I Fleksor pees oorplanting silastiese stafies in twee stadia | 240 | 4 180.80 | 192 | 3 344.64 | 3 | 244.26 | +T |
| 3.4.5 Tenolysis ● Tenolise | | | | | | | |
| 0781 Tendon freeing operation, except where specified elsewhere ● Tenolise indien nie elders gespesifiseer nie | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T |
| 0782 Carpal tunnel syndrome ● Karpale tonnel-sindroom | 98.7 | 1 719.35 | 98.7 | 1 719.35 | 3 | 244.26 | +T |
| 0783 Tenolysis: De Quervain ● Tendolise: De Quervain | 38 | 661.96 | 38 | 661.96 | 3 | 244.26 | +T |
| 0784 Trigger finger ● Snellervinger | 38 | 661.96 | 38 | 661.96 | 3 | 244.26 | +T |
| 0785 Flexor tendon freeing operation following free tendon graft or suture ● Fleksorpees bevryding na vrye pees oorplanting of hegting | 186.8 | 3 254.06 | 149.44 | 2 603.24 | 3 | 244.26 | +T |
| 0787 Extensor tendon freeing operation following graft or suture in finger, hand or forearm ● Loslating van ekstensorpees na oorplanting of hegting in vinger, hand of voorarm | 180.9 | 3 151.28 | 144.72 | 2 521.02 | 3 | 244.26 | +T |
| 0788 Intrinsic tendon release per finger ● Intrinsieke tenolise per vinger | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T |
| 0789 Central tendon tenotomy for Boutonnière deformity ● Sentrale tendon tenotomie vir Boutonnière deformiteit | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T |
| 3.4.6 Tenodesis ● Tenodese | | | | | | | |
| 0790 Tenodesis: Digital joint ● Tenodese: Digitale gewrig | 90 | 1 567.80 | 90 | 1 567.80 | 3 | 244.26 | +T |

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|--------------|---|-------------------------|----------|--|----------|------------------------|--------|------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 3.4.7 | Muscle, tendon and fascia transfer ● Spier-, pees- en fascia-verplanting | | | | | | | |
| 0791 | Single tendon transfer ● Enkele peesverplanting | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T |
| 0792 | Multiple tendon transfer ● Veelvuldige peesverplanting | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0793 | Hamstring to quadriceps transfer ● Hampese na kwadriseps-verplanting | 141 | 2 456.22 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0794 | Pectoralis major or Latissimus dorsi transfer to biceps tendon ● Pektoralis major of Latissimus dorsi verplanting na besipstendon | 320 | 5 574.40 | 256 | 4 459.52 | 5 | 407.10 | +T |
| 0795 | Tendon transfer at elbow ● Peesverplanting by elmoog | 116 | 2 020.72 | 116 | 2 020.72 | 3 | 244.26 | +T |
| 0803 | Hand tendons: Single tendon transfer ● Hand tendons: Een peesverplanting | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T |
| 0809 | Hand tendons: Substitution for intrinsic paralysis of hand ● Hand tendons: Vervanging vir intrinsieke spierverlamming van hand | 224 | 3 902.08 | 179.2 | 3 121.66 | 3 | 244.26 | +T |
| 0811 | Hand tendons: Opponens tendon transfer (including obtaining of graft) ● Hand tendons: Opponens tendonverplanting (sluit verkryging van verplanting in) | 220.6 | 3 842.85 | 176.48 | 3 074.28 | 3 | 244.26 | +T |
| 3.4.8 | Muscle slide operations and tendon lengthening ● Spierstropingsoperasies en peesverlenging | | | | | | | |
| 0812 | Percutaneous Tenotomy: All sites ● Perkutane Tenotomie: Alle areas | 38 | 661.96 | 38 | 661.96 | 3 | 244.26 | +T |
| 0813 | Torticollis ● Tortikollis | 96 | 1 672.32 | 96 | 1 672.32 | 5 | 407.10 | +T |
| 0815 | Scalenotomy ● Skalenotomie | 132 | 2 299.44 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 0817 | Scalenotomy with excision of first rib ● Skalenotomie met eksisie van eerste rib | 190 | 3 309.80 | 152 | 2 647.84 | 3 | 244.26 | +T+M |
| 0822 | Open release elbow (Mitals) - stand alone procedure ● Elmoog loslating - oop prosedure (Mitals) - alleenstaande prosedure | 278.20 | 4 846.24 | 222.56 | 3 877.00 | 3 | 244.26 | +T+M |
| 0823 | Excision or slide for Volkmann's Contracture ● Eksisie of prosedure vir Volkmann se Kontraktuur | 192 | 3 344.64 | 153.6 | 2 675.71 | 3 | 244.26 | +T |
| 0825 | Hip: Open muscle release ● Heup: Ope spierloslating | 116 | 2 020.72 | 116 | 2 020.72 | 7 | 569.94 | +T |
| 0829 | Knee: Quadriceps plasty ● Knie: Kwadrisepsplastiek | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T |
| 0831 | Knee: Open tenotomy ● Knie: Oop tenotomie | 141 | 2 456.22 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0835 | Calf I Kuit | 96 | 1 672.32 | 96 | 1 672.32 | 4 | 325.68 | +T |
| 0837 | Open Elongation Tendon Achilles ● Ope Verlenging Achillespees | 96 | 1 672.32 | 96 | 1 672.32 | 4 | 325.68 | +T |
| 0838 | Percutaneous "Hoke" elongation tendoachilles - stand alone procedure I Perkutane verlenging tendo achilles ("Hoke")-alleenstaande prosedure | 79.30 | 1 381.41 | 79.30 | 1 381.41 | 4 | 325.68 | +T |
| 0845 | Foot: Plantar fasciotomy ● Voet: Plantare fasciotomie | 70 | 1 219.40 | 70 | 1 219.40 | 3 | 244.26 | +T |
| 3.5 | Bursae and ganglia ● Bursas en ganglions | | | | | | | |
| 0847 | Excision: Semi-membranosus ● Uitsnyding: Semi-membranosus | 90 | 1 567.80 | 90 | 1 567.80 | 4 | 325.68 | +T |
| 0849 | Excision: Prepatellar ● Uitsnyding: Prepatellêr | 45 | 783.90 | 45 | 783.90 | 3 | 244.26 | +T |
| 0851 | Excision: Olecranon ● Uitsnyding: Olekranon | 81.8 | 1 424.96 | 81.8 | 1 424.96 | 3 | 244.26 | +T |
| 0853 | Excision: Small bursa or ganglion ● Uitsnyding: Klein bursa of ganglion | 80.9 | 1 409.28 | 80.9 | 1 409.28 | 3 | 244.26 | +T |
| 0855 | Excision: Compound palmar ganglion or synovectomy ● Uitsnyding: Saamgestelde ganglion in handpalm of sinovektomie | 128 | 2 229.76 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 0857 | Bursae and ganglia: Aspiration or injection (not subject to rule G) (Modifier 0005 not applicable) ● Bursas en ganglions: Aspirasie of inspuiting (nie onderhewig aan reël G) (Wysiger 0005 nie van toepassing) | 9 | 156.78 | 9 | 156.78 | 3 | 244.26 | +T |

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|---|-------------------------|----------|--|----------|------------------------|--------|------------------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.6 Musculo-skeletal system: Miscellaneous ● Spier-skeletstelsel: Diverse | | | | | | | |
| 3.6.1 Leg lengthening ● Beenverlenging | | | | | | | |
| 0861 Leg lengthening ● Beenverlenging | 416 | 7 246.72 | 332.8 | 5 797.38 | 3 | 244.26 | +T+M |
| 3.6.2 Removal of internal fixatives or prosthesis ● Verwydering van prostese of inwendige hegmiddels | | | | | | | |
| 0883 Readily accessible ● Maklik bekombaar | 36.6 | 637.57 | 36.6 | 637.57 | | | As per bone |
| 0884 Less accessible ● Moeilik bekombaar | 75.5 | 1 315.21 | 75.5 | 1 315.21 | | | + M |
| 0885 Removal of prosthesis for infection soon after operation ● Verwydering van prostese vir infeksie kort na operasie | 128 | 2 229.76 | 120 | 2 090.40 | | | Soos per been +M |
| 0886 Late removal of infected or not infected total joint replacement prosthesis (including six weeks after-care): ADD to the item for total joint replacement of the specific joint ● Laat verwydering van geïnfecteerde of nie-geïnfecteerde totale gewrigsprostese (insluitende ses weke nasorg): VOEG BY Gelde vir totale vervanging van betrokke gewrig | + 64 | 1 114.88 | 64 | 1 114.88 | 6 | 488.52 | +T+M |
| 3.7 Plasters (not subject to rule G) ● Gips (nie onderhewig aan reël G) | | | | | | | |
| Note: The initial application of a plaster cast is included in the scheduled fee ● Opmerking: Die eerste aanwending van gips is by die oorspronklike gelde ingesluit | | | | | | | |
| Note: The Commissioner will only consider payment i.r.o. splinting material (Scotchcast, Dynacast, etc.) in the following cases (not applicable when Plaster of Paris is used): | | | | | | | |
| Where extremity splints are applied for at least five weeks: A maximum of one application for an upper extremity injury A maximum of two applications for a lower extremity injury | | | | | | | |
| Opmerking: Die Kommissaris sal slegs betaling oorweeg t.o.v. spalkingsmateriaal (Scotchcast, Dynacast, ens) in die volgende gevalle (nie van toepassing wanneer gips gebruik word nie): | | | | | | | |
| Waar ledemaatgipse vir ten minste 5 weke aanby: Maksimum van een aanwending vir boonste ledemaatbesering | | | | | | | |
| 'n Maksimum van twee aanwendings vir 'n onderste ledemaatbesering | | | | | | | |
| 0887 Long limb cast (excluding after-care) (modifier 0005 not applicable) ● Lang ledemaat gips (nasorg uitgesluit) (wysiger 0005 nie van toepassing) | 13 | 226.46 | 13 | 226.46 | 3 | 244.26 | +T |
| 0888 Short limb cast (excluding after-care) (modifier 0005 not applicable) ● Kort ledemaat gips (nasorg uitgesluit) (wysiger 0005 nie van toepassing) | 6.6 | 114.97 | 6.6 | 114.97 | 3 | 244.26 | +T |
| 0889 Spica, plaster jacket or hinged cast brace (excluding aftercare) ● Spika, gipsbaadjie of geskarnierde stut (nasorg uitgesluit) | 32 | 557.44 | 32 | 557.44 | 4 | 325.68 | +T |
| 3.8 Specific areas ● Spesifieke areas | | | | | | | |
| 3.8.1 Foot and ankle ● Voet en Enkel | | | | | | | |
| 0900 Excision tarsal coalition - stand alone procedure □ ● Verwydering van tarsale koalisie - alleenstaande prosedure | 141.5 | 2 464.93 | 120.00 | 2 090.40 | 3 | 244.26 | +T+M |
| 0901 Tenotomy single tendon ● Tenotomie een pees | 63.3 | 1 102.69 | 63.3 | 1 102.69 | 3 | 244.26 | +T+M |
| 0903 Hammertoe: one toe ● Hamertoon: een toon | 99.5 | 1 733.29 | 99.5 | 1 733.29 | 3 | 244.26 | +T+M |
| 0905 Fillet of toe or Ruiz-Mora procedure ● Toonontbening of Ruiz-Mora prosedure | 99.5 | 1 733.29 | 99.5 | 1 733.29 | 3 | 244.26 | +T+M |
| 0906 Arthrodesis Hallux ● Artrodese Hallux | 148 | 2 578.16 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0909 Excision arthroplasty ● Eksisie artroplastie | 145.2 | 2 529.38 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 0910 Cheilectomy or metatarsophangeal implant Hallux ● Cheilektomie of metatarso-falangiale vervang Hallux | 183 | 3 187.86 | 146.4 | 2 550.29 | 3 | 244.26 | +T+M |
| 0911 Metatarsal osteotomy or Lapidus or similar or Chevron - stand alone procedure ● Metatarsale osteotomie of Lapidus of derglyke prosedure of Chevron - alleenstaande prosedure | 189.2 | 3 295.86 | 151.36 | 2 636.69 | 3 | 244.26 | +T+M |
| 5730 Hallux valgus double osteotomy etc ● Hallux valgus dubbele osteotomie ens. | 182.60 | 3 180.89 | 146.08 | 2 544.71 | 3 | 244.26 | +T+M |
| 5731 Distal soft tissue procedure for Hallux Valgus ● Distale sagteweefsel prosedure vir Hallux Valgus | 173.6 | 3 024.11 | 138.88 | 2 419.29 | 3 | 244.26 | +T+M |
| 5732 Aitkin procedure or similar ● Aitkin operasie of derglyke ingreep | 166.8 | 2 905.66 | 133.44 | 2 324.52 | 3 | 244.26 | +T+M |
| 5734 Removal bony prominence foot (bunionette not applicable to COID) ● Verwyder benige prominensie aan voet (bunionette nie van toepassing op COID) | 91 | 1 585.22 | 91 | 1 585.22 | 3 | 244.26 | +T+M |
| 5735 Repair angular deformity toe (lesser toes) ● Herstel wanbelyning toon (kleiner tone) | 97.2 | 1 693.22 | 97.2 | 1 693.22 | 3 | 244.26 | +T+M |
| 5736 Sesamoidectomy ● Eksisie sesamoid been | 97.8 | 1 703.68 | 97.8 | 1 703.68 | 3 | 244.26 | +T+M |
| 5737 Repair major foot tendons e.g. Tib Post ● Heg groot pese in voet b.v. Tib post | 147.30 | 2 565.97 | 120 | 2 090.40 | 3 | 244.26 | +T |

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| | | U/E | R | U/E | R | U/E | R | T/M |
| 5738 | Repair of dislocating peroneal tendons ● Herstel ontwrigting peronius pese | 173.2 | 3 017.14 | 138.56 | 2 413.72 | 3 | | 244.26 +T |
| 5740 | Steindler strip – plantar fascia ● Steindler stropping – plantare fascia | 97.2 | 1 693.22 | 97.2 | 1 693.22 | 3 | | 244.26 +T |
| 5742 | Tendon transfer foot ● Pees verplanting voet | 172 | 2 996.24 | 137.6 | 2 396.99 | 3 | | 244.26 +T |
| 5743 | Capsulotomy metatarsophalangeal joints – voet ● Kapsulotomie metatarsofalangeale gewigte – voet | 86.8 | 1 512.06 | 86.8 | 1 512.06 | 3 | | 244.26 +T |
| 3.8.3 | Replantation ● Herinplantings | | | | | | | |
| 0912 | Replantation of amputated upper limb proximal to wrist joint ● Replantasie van geamputeerde boonste ledemaat proximaal tot polsgewrig | 730 | 12 716.60 | 584 | 10 173.28 | 3 | | 244.26 +T+M |
| 0913 | Replantation of thumb ● Replantasie van duim | 670 | 11 671.40 | 536 | 9 337.12 | 3 | | 244.26 +T+M |
| 0914 | Replantation of a single digit (to be motivated), for multiple digits, modifier 0005 applicable ● Replantasie van 'n enkel vinger (rnoet gemotiveer word), vir veelvuldige vingers is wysiger 0005 toepaslik | 580 | 10 103.60 | 464 | 8 082.88 | 3 | | 244.26 +T+M |
| 0915 | Replantation operation through the palm ● Replantasie-operasie deur die handpalm | 1270 | 22 123.40 | 1016 | 17 698.72 | 3 | | 244.26 +T+M |
| 3.8.4 | Hands: (Note: Skin: See Integumentary system) ● Hande: (Let wel: Vel: Sien Huidstelsel) | | | | | | | |
| 0919 | Tumours: Epidermoid cysts ● Tumore: Epidermoïde siste | 35 | 609.70 | 35 | 609.70 | 3 | | 244.26 +T+M |
| 0922 | Removal of foreign bodies requiring incision: Under local anaesthetic ● Verwydering van vreemde liggaampies wat insnyding vereis: Onder lokale verdoving | 19 | 330.98 | 19 | 330.98 | 3 | | 244.26 +T+M |
| 0923 | Removal of foreign bodies requiring incision: Under general or regional anaesthetic ● Verwydering van vreemde liggaampies wat insnyding vereis: Onder algemene of streeksnarkose | 32 | 557.44 | 32 | 557.44 | 3 | | 244.26 +T+M |
| 0924 | Crushed hand injuries: Initial extensive soft tissue toilet under general anaesthetic (sliding scale) ● Vergruisde handbeserings: Eerste ekstensiewe sagteweefsel toilet onder algemene narkose (glyskaal) | 37 | 644.54 | 37 | 644.54 | | | |
| | | to/tot | #VALUE! | to/tot | #VALUE! | | | |
| | | 110 | 1 916.20 | 110 | 1 916.20 | 3 | | 244.26 +T+M |
| 0925 | Crushed hand injuries: Subsequent dressing changes under general anaesthetic ● Vergruisde handbeserings: Daaropvolgende verbandhenuwings onder algemene narkose | 16 | 278.72 | 16 | 278.72 | 3 | | 244.26 +T+M |
| 0926 | Initial treatment of fractures, tendons, nerves, loss of skin and blood vessels, including removal of dead tissue under general anaesthesia and six weeks after-care ● Aanvanklike behandeling van frakture, pese, senuwees, velverlies en bloedvate, insluitende verwydering van dooie weefsel onder algemene narkose en ses weke se nasorg | 269 | 4 685.98 | 215.2 | 3 748.78 | 3 | | 244.26 +T+M |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---|-------------------------|-----------------|--|-----------------|------------------------|----------------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3.8.5 Spine ● Werwelkolom | | | | | | | |
| 0927 Excision of one vertebral body, for a lesion within the body (no decompression) ● Eksisie van een werwel liggaam vir 'n letsel in die werwel (geen dekompressie nie) | 207 | 3 605.94 | 165.6 | 2 884.75 | 3 | 244.26 | +T+M |
| 0928 Excision of each additional vertebral segment for a lesion within the body (no decompression) ● Vir elke bykomende werwel vir 'n letsel in die werwel (geen dekompressie nie) | + 42 | 731.64 | 42 | 731.64 | 3 | 244.26 | +T+M |
| 0929 Manipulation of spine with anaesthetic (no after-care), modifier 0005 not applicable ● Manipulasie van werwelkolom met narkose (nasorg uitgesluit) wysiger 0005 nie van toepassing nie | 14 | 243.88 | 14 | 243.88 | 5 | 407.10 | +T+M |
| 0930 Posterior osteotomy of spine: One vertebral segment ● Posterior spinale osteotomie: Een vertebrale segment | 339 | 5 905.38 | 271.2 | 4 724.30 | 3 | 244.26 | +T+M |
| 0931 Posterior spinal fusion: One level ● Posterior spinale fusie: Een vlak | 385 | 6 706.70 | 308 | 5 365.36 | 3 | 244.26 | +T+M |
| 0932 Posterior osteotomy of spine: Each additional vertebral segment ● Posterior spinale osteotomie: Elke bykomende segment | + 103 | 1 794.26 | 103 | 1 794.26 | 3 | 244.26 | +T+M |
| 0933 Anterior spinal osteotomy with disc removal: One vertebral segment ● Anterior spinale osteotomie met diskus verwydering: Een bewegings segment | 315 | 5 487.30 | 252 | 4 389.84 | 3 | 244.26 | +T+M |
| 0936 Anterior spinal osteotomy with disc removal: Each additional vertebral segment ● Anterior spinale osteotomie met diskus verwydering: Elke bykomende bewegings segment | + +103 | 1 794.26 | +103 | 1 794.26 | 3 | 244.26 | +T+M |
| 0938 Anterior fusion base of skull to C2 ● Anterior fusie skedelbasis tot C2 | 449 | 7 821.58 | 359.2 | 6 257.26 | 4 | 325.68 | +T+M |
| 0939 Trans-abdominal anterior exposure of the spine for spinal-fusion only if done by a second surgeon ● Transabdominale anterior blootlegging van die werwelkolom vir spinale fusie slegs indien dit deur 'n tweede chirurg gedoen word | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0940 Transthoracic anterior exposure of the spine if done by a second surgeon ● Trans-torakale anterior blootlegging van die werwelkolom indien dit deur 'n tweede chirurg gedoen word | 160 | 2 787.20 | 128 | 2 229.76 | 3 | 244.26 | +T+M |
| 0941 Anterior interbody fusion: One level ● Anterior tussenwerwel fusie: Een vlak | 360 | 6 271.20 | 288 | 5 016.96 | 3 | 244.26 | +T+M |
| 0942 Anterior interbody fusion: Each additional level ● Anterior tussenwerwelfusie: Elke bykomende vlak | + +102 | 1 776.84 | +102 | 1 776.84 | 3 | 244.26 | +T+M |
| 0943 Laminectomy with decompression of nerve roots and disc removal: One level ● Laminektomie met dekompressie van senuweewortels of diskus verwydering: Een vlak | 240 | 4 180.80 | 192 | 3 344.64 | 3 | 244.26 | +T+M |
| 0944 Posterior fusion: Occiput to C2 ● Posterior fusie: Occiput tot C2 | 390 | 6 793.80 | 312 | 5 435.04 | 4 | 325.68 | +T+M |
| 0946 Posterior spinal fusion: Each additional level ● Posterior spinale fusie: Elke bykomende vlak | + +111 | 1 933.62 | +111 | 1 933.62 | 3 | 244.26 | +T+M |
| 0948 Posterior interbody lumbar fusion: One level ● Posterior tussen werwel lumbale fusie: Een vlak | 364 | 6 340.88 | 291.2 | 5 072.70 | 3 | 244.26 | +T+M |
| 0950 Posterior interbody lumbar fusion: Each additional interspace ● Posterior tussen werwel lumbale fusie: Elke bykomende interspasie | + +95 | 1 654.90 | +95 | 1 654.90 | 3 | 244.26 | +T+M |
| 0959 Excision of coccyx ● Uitsnyding van koksiks | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T+M |
| 0960 Posterior non-segmental instrumentation ● Posterior non-segment instrumentasie | 167 | 2 909.14 | 133.6 | 2 327.31 | 5 | 407.10 | +T+M |
| 0961 Costo-transversectomy ● Kosto-transversektomie | 198 | 3 449.16 | 158.4 | 2 759.33 | 3 | 244.26 | +T+M |
| 0962 Posterior segmental instrumentation: 2 to 6 vertebrae ● Posterior segmentale instrumentasie: 2 tot 6 werwels | 176 | 3 065.92 | 140.8 | 2 452.74 | 5 | 407.10 | +T+M |
| 0963 Antero-lateral decompression of spinal cord or anterior debridement ● Antero-laterale dekompressie van rugmurg of anterior debridement | 326 | 5 678.92 | 260.8 | 4 543.14 | 3 | 244.26 | +T+M |
| 0964 Posterior segmental instrumentation: 7 to 12 vertebrae ● Posterior segmentale instrumentasie: 7 tot 12 werwels | 201 | 3 501.42 | 160.8 | 2 801.14 | 5 | 407.10 | +T+M |
| 0966 Posterior segmental instrumentation: 13 or more vertebrae ● Posterior segmentale instrumentasie: 13 of meer werwels | 245 | 4 267.90 | 196 | 3 414.32 | 5 | 407.10 | +T+M |
| 0968 Anterior instrumentation: 2 to 3 vertebrae ● Anterior instrumentasie: 2 tot 3 werwels | 159 | 2 769.78 | 127.2 | 2 215.82 | 5 | 407.10 | +T+M |
| 0969 Skull or skull-femoral traction including two weeks after-care ● Skedel of skedelfemorale traksie plus twee weke nasorg | 64 | 1 114.88 | 64 | 1 114.88 | -- | #VALUE! | |
| 0970 Anterior instrumentation: 4 to 7 vertebrae ● Anterior instrumentasie: 4 tot 7 werwels | 185 | 3 222.70 | 148 | 2 578.16 | 5 | 407.10 | +T+M |
| 0972 Anterior instrumentation: 8 or more vertebrae ● Anterior instrumentasie: 8 of meer werwels | 206 | 3 588.52 | 164.8 | 2 870.82 | 5 | 407.10 | +T+M |
| 0974 Additional pelvic fixation of instrumentation other than sacrum ● Bykomende pelvisse fiksasie, sakrum uitgesluit | 108 | 1 881.36 | 108 | 1 881.36 | 5 | 407.10 | +T+M |
| 5750 Reinsertion of instrumentation ● Herposisionering van instrumentasie | 276 | 4 807.92 | 220.8 | 3 846.34 | 6 | 488.52 | +T+M |
| 5751 Removal of posterior non-segmental instrumentation ● Verwydering van posterior non-segmentale instrumentasie | 173 | 3 013.66 | 138.4 | 2 410.93 | 6 | 488.52 | +T+M |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | | U/E | R | U/E | R | U/E | R | T/M |
| 5752 | Removal of posterior segmental instrumentation ● Verwydering van posterior segmentale instrumentasie | 175 | 3 048.50 | 140 | 2 438.80 | 6 | 488.52 | +T+M |
| 5753 | Removal of anterior instrumentation ● Verwydering van anterior instrumentasie | 204 | 3 553.68 | 163.2 | 2 842.94 | 6 | 488.52 | +T+M |
| 5755 | Laminectomy for spinal stenosis (exclude discectomy, foraminotomy and spondylolisthesis): One or two levels ● Laminektomie vir spinale stenose (uitgesluit diskektomie, foraminotomie en spondilolistese): Een of twee vlakke | 295 | 5 138.90 | 236 | 4 111.12 | 3 | 244.26 | +T+M |
| 5756 | Laminectomy with full decompression for spondylolisthesis (Gill procedure) ● Laminektomie met volle dekompressie vir spondilolistese (Gill prosedure) | 304 | 5 295.68 | 243.2 | 4 236.54 | 3 | 244.26 | +T+M |
| 5757 | Laminectomy for decompression without foraminotomy or discectomy more than two levels ● Laminektomie vir dekompressie sonder foraminotomie of diskektomie meer as twee vlakke | 321 | 5 591.82 | 256.8 | 4 473.46 | 3 | 244.26 | +T+M |
| 5758 | Laminectomy with decompression of nerve roots and disc removal: Each additional level ● Laminektomie met dekompressie van senuweewortels en diskus verwydering: Elke bykomende vlak | 63 | 1 097.46 | 63 | 1 097.46 | 3 | 244.26 | +T+M |
| 5759 | Laminectomy for decompression discectomy etc., revision operation ● Laminektomie vir dekompressie diskektomie ens., herhalings operasie | 352 | 6 131.84 | 281.6 | 4 905.47 | 4 | 325.68 | +T+M |
| 5760 | Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: One level ● Laminektomie, fasektomie dekompressie van laterale reses stenose plus spinale stenose: Een vlak | 301 | 5 243.42 | 240.8 | 4 194.74 | 3 | 244.26 | +T+M |
| 5761 | Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: Each additional level ● Laminektomie, fasektomie, dekompressie van laterale reses stenose plus spinale stenose: Elke bykomende vlak | 68 | 1 184.56 | 68 | 1 184.56 | 3 | 244.26 | +T+M |
| 5763 | Anterior disc removal and spinal decompression cervical: One level ● Anterior diskus verwydering en spinale dekompressie servikaal: Een vlak | 344 | 5 992.48 | 275.2 | 4 793.98 | 3 | 244.26 | +T+M |
| 5764 | Anterior disc removal and spinal decompression cervical: Each additional level ● Anterior diskus verwydering en spinale dekompressie servikaal: Elke bykomende vlak | 81 | 1 411.02 | 81 | 1 411.02 | 3 | 244.26 | +T+M |
| 5765 | Vertebral corpectomy for spinal decompression: One level ● Vertebrale korpektomie vir spinale dekompressie: Een vlak | 466 | 8 117.72 | 372.8 | 6 494.18 | 3 | 244.26 | +T+M |
| 5766 | Vertebral corpectomy for spinal decompression: Each additional level ● Vertebrale korpektomie vir spinale dekompressie: Elke bykomende vlak | 88 | 1 532.96 | 88 | 1 532.96 | 3 | 244.26 | +T+M |
| 5770 | Use of microscope in spinal and intercranial procedures (modifier 0005 not applicable) ● Gebruik van mikroskoop vir spinale of interkraniale prosedures (wysiger 0005 is nie toepaslik nie) | 71 | 1 236.82 | 71 | 1 236.82 | | | |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | U/E | R | U/E | R | U/E | R | T/M |
| 3.9 Facial bone procedures ● Gesigsbeenprosedures Please note: Modifiers 0046 to 0058 are not applicable to section 3.9 of the tariff ● Let wel: Wysigers 0046 tot 0058 is nie van toepassing op afdeling 3.9 van die tarief nie | | | | | | | |
| 0987 Repair of orbital floor (blowout fracture) ● Herstel van orbi-tale vloer (uitbars fraktuur) | 184.6 | 3 215.73 | 147.68 | 2 572.59 | 4 | 325.68 | +T+M |
| 0988 Genioplasty ● Genioplastie | 263 | 4 581.46 | 210.4 | 3 665.17 | 4 | 325.68 | +T+M |
| 0989 Open reduction and fixation of central mid-third facial fracture with displacement: Le Fort II ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Le Fort II | 202.2 | 3 522.32 | 161.76 | 2 817.86 | 4 | 325.68 | +T+M |
| 0990 Open reduction and fixation of central mid-third facial fracture with displacement: Le Fort II ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Le Fort II | 302 | 5 260.84 | 241.6 | 4 208.67 | 4 | 325.68 | +T+M |
| 0991 Open reduction and fixation of central mid-third facial fracture with displacement: Le Fort III ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Le Fort III | 433 | 7 542.86 | 346.4 | 6 034.29 | 4 | 325.68 | +T+M |
| 0992 Open reduction and fixation of central mid-third facial fracture with displacement: Le Fort I Osteotomy ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Le Fort I Osteotomie | 970 | 16 897.40 | 776 | 13 517.92 | 4 | 325.68 | +T+M |
| 0993 Open reduction and fixation of central mid-third facial fracture with displacement: Palatal Osteotomy ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Verhemelte Osteotomie | 302 | 5 260.84 | 241.6 | 4 208.67 | 4 | 325.68 | +T+M |
| 0994 Open reduction and fixation of central mid-third facial fracture with displacement: Le Fort II Osteotomy (team fee) ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Le Fort II Osteotomie (gelde vir span) | 1103 | 19 214.26 | 882.4 | 15 371.41 | 4 | 325.68 | +T+M |
| 0995 Open reduction and fixation of central mid-third facial fracture with displacement: Le Fort III Osteotomy (team fee) ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Le Fort III Osteotomie (gelde vir span) | 1654 | 28 812.68 | 1323.2 | 23 050.14 | 4 | 325.68 | +T+M |
| 0996 Open reduction and fixation of central mid-third facial fracture with displacement: Fracture of maxilla without displacement ● Oop reduksie en fiksering van fraktuur van sentrale middel-derde van gesig: Fraktuur van maksilla sonder verplasing | | | | | | | |
| 0997 Mandible: Fractured nose and zygoma: Open reduction and fixation ● Mandibula: Frakture van neus en sigoom: Oop reduksie en fiksering | 302 | 5 260.84 | 241.6 | 4 208.67 | 3 | 244.26 | +T+M |
| 0999 Mandible: Fractured nose and zygoma: Closed reduction by inter-maxillary fixation ● Mandibula: Frakture van neus en sigoom: Geslote reduksie d.m.v. intermaksillere fiksering | 184 | 3 205.28 | 147.2 | 2 564.22 | 3 | 244.26 | +T+M |
| 1001 Temporomandibular joint: Reconstruction for dysfunction ● Temporomandibulêre gewrig: Rekonstruksie weens abnormale funksie: | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T+M |
| 1003 Manipulation: Immobilisation and follow-up of fractured nose ● Manipulasie: Immobilisering en nabehandeling van gebreekte neus | 35 | 609.70 | 35 | 609.70 | 3 | 244.26 | +T+M |
| 1005 Nasal fracture without manipulation ● Neusfraktuur sonder manipulasie | | | | | | | |
| 1007 Mandibulectomy ● Mandibulektomie | 320 | 5 574.40 | 256 | 4 459.52 | 5 | 407.10 | +T+M |
| 1009 Maxillectomy ● Maksillektomie | 382.5 | 6 663.15 | 306 | 5 330.52 | 4 | 325.68 | +T+M |
| 1011 Bone graft to mandible ● Beentransplantasie aan onderkaak | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T+M |
| 1012 Adjustment of occlusion by ramisection ● Regstel van afsluiting d.m.v. ramiseksie. | 227 | 3 954.34 | 181.6 | 3 163.47 | 4 | 325.68 | +T+M |
| 1013 Fracture of arch of zygoma without displacement ● Fraktuur van sigoma sonder verplasing | | | | | | | |
| 1015 Fracture of arch of zygoma with displacement requiring operative manipulation but not including associated fractures; recent fractures (within four weeks) ● Onlangse fraktuur van sigoma (binne vier weke) met verplasing wat operatiewe manipulasie benodig, gepaardgaande fraktuur uitgesluit | 131 | 2 282.02 | 120 | 2 090.40 | 3 | 244.26 | +T+M |
| 1017 Fracture of arch of zygomawith displacement requiring operative manipulation (not including associated fractures) (after four weeks) ● Fraktuur van sigoma met verplasing wat operatiewe manipulasie benodig (gepaardgaande frakture uitgesluit) (na vier weke) | 262 | 4 564.04 | 209.6 | 3 651.23 | 3 | 244.26 | +T+M |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---|-------------------------|----------|--|----------|------------------------|---------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 4. RESPIRATORY SYSTEM ● ASEMHALINGSTELSEL | | | | | | | |
| 4.1 Nose and sinuses ● Neus en sinusse | | | | | | | |
| 1018 Flexible nasopharyngolaryngoscope examination ● Nasofaringeale en larinks ondersoek met buigbare teleskoop | 51.94 | 904.79 | | | | | |
| 1019 ENT endoscopy in rooms with rigid endoscope ● ONK endoskopie in kamers met onbuigbare endoskoop | 12 | 209.04 | | | | | |
| 1020 Repair of perforated septum: Any method ● Herstel van septum perforasie: enige metode | 141.9 | 2 471.90 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 1022 Functional reconstruction of nasal septum ● Funksionele rekonstruksie van neusseptum | 121.2 | 2 111.30 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 1024 Insertion of silastic obturator into nasal septum perforation (excluding material) ● Inplaas van 'n silastiese obturator in 'n perforasie van die neusseptum (materiaal uitgesluit) | 30 | 522.60 | 30 | 522.60 | 4 | 325.68 | +T |
| 1025 Intranasal antrostomy (modifier 0005 to apply to opposite side of nose) ● Intrasale antrostomie (wysiger 0005 van toepassing op teenoorgestelde kant van neus) | 64.6 | 1 125.33 | 64.6 | 1 125.33 | 4 | 325.68 | +T |
| 1027 Dacrocystorhinostomy ● Dakrosistorinostomie | 210 | 3 658.20 | 168 | 2 926.56 | 5 | 407.10 | +T |
| 1029 Turbinectomy (modifier 0005 to apply to opposite side of nose) ● Turbinektomie (wysiger 0005 van toepassing op teenoorgestelde kant van neus) | 62.6 | 1 090.49 | 62.6 | 1 090.49 | 4 | 325.68 | +T |
| 1030 Endoscopic turbinectomy: laser or microdebrider ● Endoskopiese turbinektomie: laser of mikrodebrider | 90 | 1 567.80 | 90 | 1 567.80 | 5 | 407.10 | +T |
| 1034 Autogenous nasal bone transplant: Bone removal included ● Outogene beentransplantasie van die neus: Verwydering van been ingeslote | 100 | 1 742.00 | 100 | 1 742.00 | 4 | 325.68 | +T |
| 1035 Unilateral functional endoscopic sinus surgery (unilateral) ● Funksionele endoskopiese sinus chirurgie (unilateraal) | 140 | 2 438.80 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 1036 Bilateral functional endoscopic sinus surgery ● Bilaterale funksionele endoskopiese sinus chirurgie. | 245 | 4 267.90 | 196 | 3 414.32 | 4 | 325.68 | +T |
| 1037 Diathermy to nose or pharynx exclusive of consultation fee, uni- or bilateral: Under local anaesthetic ● Diatermie van neus of farinks, konsultasiegelde uitgesluit, uni- of bilateraal: Met plaaslike verdowing | 8 | 139.36 | 8 | 139.36 | | | |
| 1039 Diathermy to nose or pharynx exclusive of consultation fee, uni- or bilateral: Under general anaesthetic ● Diatermie van neus of farinks, konsultasiegelde uitgesluit, uni- of bilateraal: Met algemene verdowing | 35 | 609.70 | 35 | 609.70 | 4 | 325.68 | +T |
| 1041 Control severe epistaxis requiring hospitalisation: Anterior plugging (unilateral) Erge epistakse kontrole wat hospitalisasie vereis: Anterior tamponade (unilateraal) | 40 | 696.80 | 40 | 696.80 | 6 | 488.52 | +T |
| 1043 Control severe epistaxis requiring hospitalisation: Anterior and posterior plugging (unilateral) Erge epistakse kontrole wat hospitalisasie vereis: Anterior en posterior tamponade (unilateraal) | 60 | 1 045.20 | 60 | 1 045.20 | 6 | 488.52 | +T |
| 1045 Ligation anterior ethmoidal artery ● Afbind van anterior etmoidale arterie | 135.4 | 2 358.67 | 120 | 2 090.40 | 6 | 488.52 | +T |
| 1047 Cladwell-Luc operation (unilateral) ● Cladwell-Luc operasie (unilateraal) | 137.3 | 2 391.77 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 1049 Ligation internal maxillary artery ● Afbind van interne maksillêre arterie | 196 | 3 414.32 | 156.8 | 2 731.46 | 6 | 488.52 | +T |
| 1050 Vidian neurectomy (transantral or transnasal) ● Neurektomie van nervus vidii (transantraal of transnasaal) | 113 | 1 968.46 | 113 | 1 968.46 | 4 | 325.68 | +T |
| 1054 Antroscopy through the canine fossa (modifier 0005 to apply to opposite side of nose) ● Antroskopie deur die caninus fossa (wysiger 0005 van toepassing op teenoorgestelde kant van neus) | 37.3 | 649.77 | -- | #VALUE! | -- | #VALUE! | |
| 1055 External frontal ethmoidectomy ● Eksterne fronto-etmoidektomie | 190.7 | 3 321.99 | 152.56 | 2 657.60 | 4 | 325.68 | +T |
| 1057 External ethmoidectomy and/or sphenoidectomy (unilateral) ● Eksterne etmoidektomie en/of sfenoidektomie (unilateraal) | 199.4 | 3 473.55 | 159.52 | 2 778.84 | 4 | 325.68 | +T |
| 1059 Frontal osteomyelitis ● Frontale osteomiëlitis | 194 | 3 379.48 | 155.2 | 2 703.58 | 4 | 325.68 | +T |
| 1061 Lateral rhinotomy ● Laterale rhinotomie | 164 | 2 856.88 | 131.2 | 2 285.50 | 4 | 325.68 | +T |
| 1063 Removal of foreign bodies from nose at rooms ● Verwydering van vreemde voorwerpe uit neus by spreekkamer | 10 | 174.20 | 10 | 174.20 | | | |
| 1065 Removal of foreign body from nose under general anaesthetic ● Verwydering van vreemde voorwerp uit die neus onder algemene narkose | 38.6 | 672.41 | 38.6 | 672.41 | 4 | 325.68 | +T |
| 1067 Proof puncture, unilateral at rooms ● Sinusspoeling, unilateraal by spreekkamer | 10 | 174.20 | 10 | 174.20 | 4 | 325.68 | +T |
| 1069 Proof puncture, uni- or bilateral under general anaesthetic ● Sinusspoeling, uni- of bilateraal onder algemene narkose | 35 | 609.70 | 35 | 609.70 | 4 | 325.68 | +T |
| 1075 Multiple intranasal procedures: Not to exceed (see Modifier 0068) ● Veelvuldige intranasale prosedures: Maksimum bedrag (sien Wysiger 0068) | 194 | 3 379.48 | 155.2 | 2 703.58 | 4 | 325.68 | +T |
| 1077 Septum abscess, at room, including after-care ● Septumabses, by spreekkamer, nabehandeling ingesluit | 8 | 139.36 | 8 | 139.36 | | | |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
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| | | U/E | R | U/E | R | U/E | R | T/M |
| 1079 | Septum abscess, under general anaesthetic ● Septumabses, onder algemene verdoving | 35 | 609.70 | 35 | 609.70 | 4 | 325.68 | +T |
| 1081 | Oro-antral fistula (without Caldwell-Luc) ● Oro-antrale fistel (sonder Caldwell-Luc) | 111.8 | 1 947.56 | 111.8 | 1 947.56 | 4 | 325.68 | +T |
| 1083 | Choanal atresia: Intranasal approach ● Atresie van agterste neusopening: Intranasale metode | 113 | 1 968.46 | 113 | 1 968.46 | 5 | 407.10 | +T |
| 1084 | Choanal atresia: Transpalatal approach ● Atresie van agterste neusopening: Transpalatien metode | 194 | 3 379.48 | 155.2 | 2 703.58 | 7 | 569.94 | +T |
| 1085 | Total reconstruction of the nose: Including reconstruction of nasal septum (septumplasty) nasal pyramid (osteotomy) and nasal tip ● Rekonstruksie van die neus: Insluitende rekonstruksie van die septum (septumplasty), die piramiede (osteotomie) en neuspunt | 350 | 6 097.00 | 280 | 4 877.60 | 5 | 407.10 | +T |
| 1087 | Subtotal reconstruction consisting of any two of the following: Septumplasty, osteotomy, nasal tip reconstruction ● Subtotale rekonstruksie, bestaande uit enige twee van die volgende: Septumplastie, osteotomie, neuspunt-rekonstruksie | 210 | 3 658.20 | 168 | 2 926.56 | 5 | 407.10 | +T |
| 1089 | Forehead rhinoplasty (all stages): Total ● Voorhoof-rinoplastie (alle stadiums): Volledig | 552 | 9 615.84 | 441.6 | 7 692.67 | 5 | 407.10 | +T |
| 1091 | Forehead rhinoplasty (all stages): Partial ● Voorhoof-rinoplastie (alle stadiums): Gedeeltelik | 414 | 7 211.88 | 331.2 | 5 769.50 | 5 | 407.10 | +T |
| 4.3 | Larynx ● Larinks | | | | | | | |
| 1117 | Laryngeal intubation ● Laringeale intubasie | 10 | 174.20 | 10 | 174.20 | | | |
| 1118 | Laryngeal stroboscopy with video capture ● Laringeale stroboskopie met video vaslegging. | 39 | 679.38 | 39 | 679.38 | 6 | 488.52 | +T |
| 1119 | Laryngectomy without block dissection of the neck ● Laringektomie sonder blokdisseksie van die nek | 430 | 7 490.60 | 344 | 5 992.48 | 7 | 569.94 | +T |
| 1127 | Tracheostomy ● Trageostomie | 90 | 1 567.80 | 90 | 1 567.80 | 9 | 732.78 | +T |
| 1129 | External laryngeal operation, e.g. laryngeal stenosis, laryngocele, abductor, paralysis, laryngofissure ● Eksterne laringeale operasie, bv. vir laringeale stenose, laringeoseel, abduktor-paralise, laringo-fissuur | 294.4 | 5 128.45 | 235.52 | 4 102.76 | 8 | 651.36 | +T |
| 1130 | Diagnostic laryngoscopy including biopsy ● Diagnostiese laringoskopies insluitende biopsie | 41.4 | 721.19 | 41.4 | 721.19 | 6 | 488.52 | +T |
| 1131 | Direct laryngoscopy plus foreign body removal ● Direkte laringoskopies plus vreemde voorwerp verwydering | 64.6 | 1 125.33 | 64.6 | 1 125.33 | 6 | 488.52 | +T |
| 4.4 | Bronchial procedure ● Bronchiale prosedures | | | | | | | |
| 1132 | Bronchoscopy: Diagnostic bronchoscopy without removal of foreign object ● Brongoskopies: Diagnostiese brongoskopies sonder verwydering van vreemde voorwerp | 65 | 1 132.30 | 65 | 1 132.30 | 6 | 488.52 | +T |
| 1133 | Bronchoscopy: With removal of foreign body ● Brongoskopies: Met verwydering van vreemde voorwerp | 80 | 1 393.60 | 80 | 1 393.60 | 8 | 651.36 | +T |
| 1134 | Bronchoscopy: Bronchoscopy with laser ● Brongoskopies: Brongoskopies met laser | 75 | 1 306.50 | -- | #VALUE! | 8 | 651.36 | +T |
| 1136 | Nebulisation (in rooms) ● Nebuliserings (in kamers) | 12 | 209.04 | 12 | 209.04 | | | Fees as for specialist/Gelde soos vir spesialis |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|--------------|---|-------------------------|----------|--|----------|------------------------|--------|---|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 1137 | Bronchial lavage ● Brongiale spoeling | -- | #VALUE! | -- | #VALUE! | 8 | 651.36 | +T |
| 1138 | Thoracotomy: for bronchopleural fistula (including ruptured bronchus, any cause) ● Torakotomie: vir brongo-pleurale fistel (ruptuur van die brongus, alle oorsake, ingeslote) | 350 | 6 097.00 | 280 | 4 877.60 | 12 | 977.04 | +T |
| 4.5 | Pleura ● Pleura | | | | | | | |
| 1139 | Pleural needle biopsy (not including aftercare): modifier 0005 not applicable ● Naaldbiopsie van pleura (nasorg uitgesluit): wysiger 0005 nie van toepassing nie | 50 | 871.00 | 50 | 871.00 | 3 | 244.26 | +T |
| 1141 | Insertion of intercostal catheter (under water drainage) ● Inplasing van tussenribse kateter (met onderwater-dreinasie) | 50 | 871.00 | 50 | 871.00 | 6 | 488.52 | +T |
| 1143 | Paracentesis chest: Diagnostic ● Parasentese borskas: Diagnosties | 8 | 139.36 | 8 | 139.36 | 3 | 244.26 | +T |
| 1145 | Paracentesis chest: Therapeutic ● Parasentese borskas: Terapeuties | 13 | 226.46 | 13 | 226.46 | 3 | 244.26 | +T |
| 1147 | Pneumothorax: Induction (diagnostic) ● Pneumotoraks: Induksie (diagnosties) | 25 | 435.50 | 25 | 435.50 | | | |
| 1149 | Pleurectomy ● Pleurektomie | 250 | 4 355.00 | 200 | 3 484.00 | 11 | 895.62 | +T |
| 1151 | Decortication of lung ● Dekortikasie van long | 350 | 6 097.00 | 280 | 4 877.60 | 11 | 895.62 | +T |
| 1153 | Chemical pleurodesis (instillation silver nitrate, tetracycline, talc, etc) ● Chemiese pleurodesis (instillering silwernitraat, tetrasiklien, talk, ens) | 55 | 958.10 | 55 | 958.10 | 3 | 244.26 | +T |
| 4.6 | Pulmonary procedures ● Longprosedures | | | | | | | |
| 4.6.1 | Surgical ● Chirurgies | | | | | | | |
| 1155 | Needle biopsy lung (not including after-care): modifier 0005 not applicable ● Naaldbiopsie long (nasorg uitgesluit): wysiger 0005 nie van toepassing nie | 32 | 557.44 | 32 | 557.44 | 5 | 407.10 | +T |
| 1157 | Pneumectomy ● Pneumonektomie | 350 | 6 097.00 | 280 | 4 877.60 | 11 | 895.62 | +T |
| 1159 | Pulmonary lobectomy ● Pulmonêre lobektomie | 389.5 | 6 785.09 | 311.6 | 5 428.07 | 11 | 895.62 | +T |
| 1161 | Segmental lobectomy ● Segmentale lobektomie | 365 | 6 358.30 | 292 | 5 086.64 | 11 | 895.62 | +T |
| 1163 | Excision tracheal stenosis: Cervical ● Eksisie van stenose van trachea: Servikaal | 375 | 6 532.50 | 300 | 5 226.00 | 8 | 651.36 | +T |
| 1164 | Excision tracheal stenosis: Intra-thoracic ● Eksisie van stenose van trachea: Intratorakaal | 350 | 6 097.00 | 280 | 4 877.60 | 12 | 977.04 | +T |
| 1171 | Drainage empyema (including six weeks after-treatment) ● Dreinerings van empieem (insluitende ses weke nabehandeling) | 170 | 2 961.40 | 136 | 2 369.12 | 11 | 895.62 | +T |
| 1173 | Drainage of lung abscess (including six weeks after-treatment) ● Dreinerings van longabses (insluitende ses weke nabehandeling) | 170 | 2 961.40 | 136 | 2 369.12 | 11 | 895.62 | +T |
| 1175 | Thoracotomy (limited): Limited: For lung or pleural biopsy ● Torakotomie (beperk): Beperk: Vir biopsie van long of pleura | 115 | 2 003.30 | 115 | 2 003.30 | 11 | 895.62 | +T |
| 1177 | Thoracotomy: Major: Diagnostic ● Torakotomie: Groot: Diagnosties | 215 | 3 745.30 | 172 | 2 996.24 | 11 | 895.62 | +T |
| 1179 | Thoracoscopy ● Torakoskopie | 89 | 1 550.38 | 89 | 1 550.38 | 11 | 895.62 | +T |
| 4.6.2 | Pulmonary function tests ● Longfunksietoetse | | | | | | | |
| 1186 | Flow volume test: Inspiration/expiration ● Vloeivolumetoets: Inspirasie/ekspirasie | 30 | 522.60 | 30 | 522.60 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1188 | Flow volume test: Inspiration/expiration pre- and post-bronchodilator (to be charged for only with first consultation--thereafter item 1186 applies) ● Vloeivolumetoets: Inspirasie/ekspirasie voor- en na-brongodilator (hefbaar slegs tydens eerste konsultasie--daarna is item 1186 toepaslik) | 50 | 871.00 | 50 | 871.00 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1189 | Forced expirogram only ● Forseerde ekspiogram alleenlik | 10 | 174.20 | 10 | 174.20 | | | |
| 1191 | N2 single breath distribution ● N2 enkel asem verspreiding | 10 | 174.20 | 10 | 174.20 | | | |
| 1197 | Compliance and resistance, using oesophageal balloon ● Rekbaarheid en weerstand d.m.v. esofageale ballon | 24 | 418.08 | 24 | 418.08 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1198 | Prolonged postexposure evaluation of bronchospasm with multiple spirometric determinations after antigen, cold air, methacholine or other chemical agent or after exercise, with subsequent spirometry ● Verlengde na-blootstelling bepaling van brongospasme met spirometrie voor en na antigen, koue lug, meta cholien of ander chemiese agent, of na oefening met opvolg spirometrie | 55.89 | 973.60 | 55.89 | 973.60 | | | |
| 1199 | Pulmonary stress testing: For determination of VO2 max I Pulmonale inspanningstoets: vir bepaling van maksimum VO2 | 96.5 | 1 681.03 | 96.5 | 1 681.03 | | | |
| 1201 | Maximum inspiratory/expiratory pressure ● Maksimum inspiratoriese/ekspiratoriese druk | 5 | 87.10 | 5 | 87.10 | | | Fees as for specialist/Gelde soos vir spesialis |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|-------|--|---|----------|---|----------|------------------------|---|---|
| | | U/E | R | U/E | R | U/E | R | T/M |
| | | Pulmonologists and Practitioners accredited to SATS Pulmonoloë en praktisyns geakrediteer deur SATS | | Other Specialists and General practitioner Ander Spesialiste en Algemene Praktisyn | | Anaesthetic Narkose | | |
| | | U/E | R | U/E | R | U/E | R | T/M |
| 1193 | Functional residual capacity or residual volume: helium method, nitrogen open circuit method, or other method ● Funksionele residuele kapasiteit of residuele volume: helium, stikstof opebaan of ander metode | 37.76 | 657.78 | | | | | |
| 1195 | Thoracic gas volume ● Intra torakale gas volume | 37.93 | 660.74 | | | | | |
| 1196 | Determination of resistance to airflow, oscillatory or plethysmographic methods ● Bepaling van lugweg weerstand ossillasie of met pletismograaf | 45.31 | 789.30 | | | | | |
| 1200 | Carbon monoxide diffusing capacity, any method ● Kool monoksied diffusie, enige metode | 38.06 | 663.01 | | | | | |
| 4.7 | Intensive care (in intensive care or high care unit): Respiratory, cardiac, general ● Intensiewe sorg (in intensiewe of hoërsorgeenheid): Respiratories, kardiaal, algemeen. | | | | | | | |
| 4.7.1 | Tariff items for intensive care ● Tarief items vir intensiewe sorg Category 1: Cases requiring intensive monitoring (to include cases where physiological instability is anticipated, e.g. diabetic pre-coma, asthma, gastro-intestinal haemorrhage, etc). Please note that item 1204 may not be charged by the responsible surgeon for monitoring a patient post-operatively in ICU or in the high-care unit since post-operative monitoring is included in the fee for the procedure Kategorie 1: Gevalle wat intensiewe monitoring vereis (sluit spesifieke gevalle in waar fisiologiese onstabielheid vermoed word, bv. diabetiese pre-koma, asma, gastrointestinale bloeding, ens). Let asseblief daarna op dat item 1204 nie deur die verantwoordelike chirurg gehel mag word vir monitering van die pasient na-operatief in die intensiewe sorg-eenheid of in die hoe sorg aangesien na-operatiewe monitering ingesluit is in die gelde vir die prosedure. | | | | | | | |
| 1204 | Category 1: Per day ● Kategorie 1: Per dag Category 2: Cases requiring active system support (where active specialised intervention is required in cases such as acute myocardial infarction; diabetic coma, head injury, severe asthma, acute pancreatitis, eclampsia, flail chest, etc.) Ventilation may or may not be part of the active system support. Kategorie 2: Gevalle wat aktiewe sisteem bystand vereis (waar aktiewe gespesialiseerde intervensie vereis word, byvoorbeeld akute miokardiale infarksie, diabetiese koma, hoofbesering, ernstige asma, akute pankreatitis, eklampsie, vleel borskas, ens.) Ventilasië mag deel uitmaak of nie deel uitmaak van die aktiewe sisteem bystand nie | 30 | 522.60 | 30 | 522.60 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1205 | Category 2: First day ● Kategorie 2: Eerste dag | 100 | 1 742.00 | 100 | 1 742.00 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1206 | Category 2: Subsequent days, per day ● Kategorie 2: Daaropvolgende dae, per dag | 50 | 871.00 | 50 | 871.00 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1207 | Category 2: After two weeks, per day ● Kategorie 2: Na twee weke, per dag | 30 | 522.60 | 30 | 522.60 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1208 | Category 3: Cases with multiple organ failure or Category 2 patients that may require multidisciplinary intervention Kategorie 3: Gevalle met veelvuldige orgaan ineenstorting of Kategorie 2 pasiente wat multidisiplinêre intervensie mag vereis Category 3: First day (principal practitioner) Kategorie 3: Eerste dag (hoof praktisyn) | 137 | 2 386.54 | 120 | 2 090.40 | | | Fees as for specialist/Gelde soos vir spesialis |
| 1209 | Category 3: First day (per involved practitioner) Kategorie 3: Eerste dag (per betrokke praktisyn) | 58 | 1 010.36 | 58 | 1 010.36 | | | Fees as for specialist/Gelde soos vir spesialis |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|------|---|---|--|----------|------------------------|----------|---|
| | U/E | R | U/E | R | U/E | R | T/M |
| 1210 | Category 3: Subsequent days (per involved practitioner) Kategorie 3: Opvolgende dae (per betrokke praktisyn) | | 50 | 871.00 | 50 | 871.00 | Fees as for specialist/Gelde soos vir spesialis |
| 1211 | Cardio-respiratory resuscitation: Prolonged attendance in cases of emergency (<i>not necessarily in ICU</i>) 50,00 clinical procedure units (R871.00) per half hour or part thereof for the first hour per practitioner, thereafter 25,00 clinical procedure units (R435.50) per half hour up to a maximum of 150,00 clinical procedure units (R2613.00) per practitioner. Resuscitation fee includes <i>all</i> necessary additional procedures e.g. infusion, intubation, etc. Kardio-respiratoriese resussitasie: Verlengde bystand in noodgevallen (<i>nie noodwendig in intensiewe sorg eenheid nie</i>) 50,00 kliniese prosedure eenhede (R871.00) per halfuur of gedeelte daarvan vir die eerste uur per praktisyn, daarna 25,00 kliniese prosedure eenhede (R435.50) per halfuur met 'n maksimum van 150,00 kliniese prosedure eenhede (R2613.00) per praktisyn Resussitasiegelde sluit alle nodige bykomende prosedures in byvoorbeeld infuus, intubasie, ens. | | 50 | 871.00 | | | |
| | | | 25 | 435.50 | | | |
| | | | 150 | 2 613.00 | | | |
| 1212 | Ventilation: First day • Ventilasië: Eerste dag | | 75 | 1 306.50 | 75 | 1 306.50 | Fees as for specialist/Gelde soos vir spesialis |
| 1213 | Ventilation: Subsequent days • Ventilasië: Opvolgende dae | | 50 | 871.00 | 50 | 871.00 | Fees as for specialist/Gelde soos vir spesialis |
| 1214 | Ventilation: After two weeks, per day • Ventilasië: Na twee weke, per dag | | 25 | 435.50 | 25 | 435.50 | Fees as for specialist/Gelde soos vir spesialis |
| 1215 | Insertion of arterial pressure cannula • Inplasing van arteriële druk kannule | | 25 | 435.50 | 25 | 435.50 | Fees as for specialist/Gelde soos vir spesialis |
| 1216 | Insertion of Swan Ganz catheter for haemodynamics monitoring • Inplasing van Swan Ganz kateter vir hemodinamiese monitering | | 50 | 871.00 | 50 | 871.00 | Fees as for specialist/Gelde soos vir spesialis |
| 1217 | Insertion of central venous line via peripheral vein • Inplasing van sentrale veneuse lyn via perifere vena | | 10 | 174.20 | 10 | 174.20 | Fees as for specialist/Gelde soos vir spesialis |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|------|---|--------|--|--------|------------------------|---|---|
| | U/E | R | U/E | R | U/E | R | T/M |
| 1218 | Insertion of central venous line via subclavian or jugular veins ● Inplasing van sentrale veneuse lyn via subklaviese of jugulêre venas | 25 | 435.50 | 25 | 435.50 | | Fees as for specialist/Gelde soos vir spesialis |
| 1219 | Hyperalimantation (daily fee) ● Hiperalimantasie (dagtarief) | 15 | 261.30 | 15 | 261.30 | | Fees as for specialist/Gelde soos vir spesialis |
| 1220 | Patient-controlled analgesic pump: Hire fee: Per 24 hours (Cassette to be charged for according to item 0201 per patient) ● Pasiënt-beheerde verdowingspomp: Verhuringsgelde: Per 24 uur (Gelde vir kasset word gehê volgens item 0201 per pasiënt) | 30 | 522.60 | 30 | 522.60 | | Fees as for specialist/Gelde soos vir spesialis |
| 1221 | Professional fee for managing a patient-controlled analgesic pump: First 24 hours (for subsequent days charge appropriate hospital follow-up consultation) ● Professionele gelde vir bestuur van pasiënt-beheerde verdowingspomp: Eerste 24 uur (vir daaropvolgende dae word hospitaal opvolgkonsultasie gehê) | 30 | 522.60 | 30 | 522.60 | | Fees as for specialist/Gelde soos vir spesialis |
| 4.8 | Hyperbaric Oxygen Treatment ● Hiperbariese Suurstofbehandeling | | | | | | |
| 4804 | Monitoring of a patient at the hyperbaric chamber during hyperbaric treatment (includes pre-hyperbaric assessment, monitoring during treatment and post treatment evaluation): Low pressure table (1,5-1,8 ATA x 45-60 min) PROFESSIONAL COMPONENT ● Monitering van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitering tydens behandeling en opvolg ondersoek na behandeling in): Lae druk tabel (1,5-1,8 ATA x 45-60 min): PROFESSIONELE KOMPONENT | 30 | 522.60 | 30 | 522.60 | | |
| 4820 | Low pressure table (1,5-1,8 ATA x 45-60 min): TECHNICAL COMPONENT ● Lae druk tabel (1,5-1,8 ATA x 45-60 min): TEGNIËSE KOMPONENT | 101.13 | 1 761.68 | 101.13 | 1 761.68 | | |
| 4805 | Monitoring of a patient at the hyperbaric chamber during hyperbaric treatment (includes pre-hyperbaric assessment, monitoring during treatment and post treatment evaluation): Routine HBO table (2-2.5 ATA x 90-120 min) PROFESSIONAL COMPONENT ● Monitering van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitering tydens behandeling en opvolg ondersoek na behandeling in): Routine HST tabel (2-2.5 ATA x 90-120 min) PROFESSIONELE KOMPONENT | 60 | 1 045.20 | 60 | 1 045.20 | | |
| 4821 | Routine HBO table (2-2.5 ATA x 90-120 min): TECHNICAL COMPONENT ● Routine HST tabel (2-2,5 ATA x 90-120 min): TEGNIËSE KOMPONENT | 131.26 | 2 286.55 | 131.26 | 2 286.55 | | |
| 4806 | Monitoring of a patient at the hyperbaric chamber during hyperbaric treatment (includes pre-hyperbaric assessment monitoring during treatment and post treatment evaluation): Emergency HBO table (2.5-3 ATA x 90-120 min) PROFESSIONAL COMPONENT ● Monitering van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre- hiperbariese evaluering, monitering tydens behandeling en opvolg ondersoek na behandeling in): Nood HST tabel (2.5-3 ATA x 90- 120 min) PROFESSIONELE KOMPONENT | 80 | 1 393.60 | 80 | 1 393.60 | | |
| 4822 | Emergency HBO table (2,5-3 ATA x 90-120 min): TECHNICAL COMPONENT ● Nood HST tabel (2,5-3 ATA x 90-120 min): TEGNIËSE KOMPONENT | 131.26 | 2 286.55 | 131.26 | 2 286.55 | | |
| 4809 | Monitoring of a patient at the hyperbaric chamber during hyperbaric treatment (includes pre-hyperbaric assessment, monitoring during treatment and post treatment evaluation): USN TT5 (2,8 ATA x 135 min) PROFESSIONAL COMPONENT ● Monitering van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitering tydens behandeling en opvolg ondersoek na behandeling in): USN TT5 (2,8 ATA x 135 min) PROFESSIONELE KOMPONENT | 90 | 1 567.80 | 90 | 1 567.80 | | |
| 4825 | USN TT5 (2,8 ATA x 135 min): TECHNICAL COMPONENT ● USN TT5 (2,8 ATA x 135 min): TEGNIËSE KOMPONENT | 214.18 | 3 731.02 | 214.18 | 3 731.02 | | |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|------|--|-------------------------|-----------|--|-----------|------------------------|---|-----------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 4810 | Monitoring of a patient at the hyperbaric chamber during hyperbaric treatment (includes pre-hyperbaric assessment, monitoring during treatment and post treatment evaluation): USN TT6 (2.8 ATA x 285 min) PROFESSIONAL COMPONENT ● Monitoring van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitoring tydens behandeling en opvolg ondersoek na behandeling in): USN TT6 (2.8 ATA x 285 min) PROFESSIONELE KOMPONENT | 190 | 3 309.80 | 190 | 3 309.80 | | | |
| 4826 | USN TT6 (2.8 ATA x 285 min): TECHNICAL COMPONENT ● USN TT6 (2.8 ATA x 285 min): TEGNIESE KOMPONENT | 386.42 | 6 731.44 | 386.42 | 6 731.44 | | | |
| 4811 | Monitoring of a patient at the hyperbaric chamber during hyperbaric treatment (includes pre-hyperbaric assessment, monitoring during treatment and post treatment evaluation): USN TT6ext/6A or Cx 30 (2.8-6 ATA x 305-490 min) PROFESSIONAL COMPONENT ● Monitoring van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitoring tydens behandeling en opvolg ondersoek na behandeling in): USN TT6vlg/6A or Cx 30 (2.8-6 ATA x 305-490 min) PROFESSIONELE KOMPONENT | 327 | 5 696.34 | 327 | 5 696.34 | | | |
| 4827 | USN TT6ext (2.8-6 ATA x 305-490 min): TECHNICAL COMPONENT ● USN TT6vlg (2.8-6 ATA x 305-490 min): TEGNIESE KOMPONENT | 680.85 | 11 860.41 | 680.85 | 11 860.41 | | | |
| 4828 | USN 6A (2.8-6 ATA x 305-490 min): TECHNICAL COMPONENT ● USN 6A (2.8-6 ATA x 305-490 min): TEGNIESE KOMPONENT | 678.28 | 11 815.64 | 678.28 | 11 815.64 | | | |
| 4829 | USN Cx 30 (2.8-6 ATA x 305-490 min): TECHNICAL COMPONENT ● USN Cx 30 (2.8-6 ATA x 305-490 min): TEGNIESE KOMPONENT | 671.85 | 11 703.63 | 671.85 | 11 703.63 | | | |
| 4815 | Prolonged attendance inside a hyperbaric chamber: 40 clinical procedure units per half hour or part thereof for the first hour. Thereafter 20 clinical procedure units per half hour; minimum 40 clinical procedure units; maximum 320 clinical procedure units (Please indicate time in minutes and not per half hour) ● Verlengde bystand binne 'n hiperbariese kamer: 40 kliniese prosedure eenhede per halfuur of gedeelte daarvan vir die eerste uur. Daarna 20 kliniese prosedure eenhede per half uur; minimum 40 kliniese prosedure eenhede; maksimum 320 kliniese prosedure eenhede (dui asseblief tyd aan in minute en nie per halfuur) | | | | | | | |
| 5. | MEDIASTINAL PROCEDURES ● MEDIASTINALE PROSEDURES | | | | | | | |
| 1223 | Mediastinoscopy ● Mediastinoskopie | 95 | 1 654.90 | 95 | 1 654.90 | 5 | | 407.10 +T |
| 6. | CARDIOVASCULAR SYSTEM ● KARDIO-VASKULÊRE SISTEEM | | | | | | | |
| | MODIFIER GOVERNING FEES FOR AN ANAESTHESIOLOGIST OPERATING INTRA-AORTIC BALLOON PUMP (CARDIOVASCULAR SYSTEM) ● WYSIGER VAN TOEPASSING OP GELDE VIR 'N ANESTESIOLOOG VIR BEHEER VAN INTRA-AORTIESE BALLONPOMP (KARDIO-VASKULÊRE SISTEEM) | | | | | | | |
| 0100 | Where an anaesthesiologist would be responsible for operating an intra-aortic balloon pump, a fee of 75.00 clinical procedure units is applicable ● Waar 'n anestesiooloog verantwoordelik is vir beheer van 'n intra-aortiese ballonpomp is 'n tarief van 75.00 kliniese prosedure eenhede van toepassing | 75 | 1 306.50 | 75 | 1 306.50 | | | |

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|--|-------------------------|----------|--|----------|------------------------|-----------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 6.1 General • Algemeen General practitioner's fee for the taking of an ECG only • Algemene praktisyn se gelde vir slegs die neem van 'n EKG Where an ECG is done by a general practitioner and interpreted by a physician, the general practitioner is entitled to his full consultation fee, plus half of fee determined for ECG • Wanneer 'n EKG deur 'n algemene praktisyn geneem is en deur 'n spesialis vertolk word, is die algemene praktisyn geregtig op konsultasiegelde plus helfte van die bedrag toepaslik van die EKG | | | | | | | |
| 1228 General Practitioner's fee for the taking of an ECG only: Without effort: (1232) • Algemene praktisyn se gelde vir slegs die neem van 'n EKG: Rustend: (1232) | | | 4.5 | 78.39 | | | |
| 1229 General Practitioner's fee for the taking of an ECG only: Without and with effort: 1/2 (item 1233) • Algemene praktisyn se gelde vir slegs die neem van 'n EKG: Sonder en met inspanning: 1/2 (item 1233) Note: Items 1228 and 1229 deal only with the fees for taking of the ECG, the consultation fee must still be added • Opmerking: Items 1228 en 1229 dui slegs die gelde vir die neem van die EKG aan, die konsultasietarief moet bygevoeg word | | | 6.5 | 113.23 | | | |
| Physician's fee for interpreting an ECG • Internis se gelde vir vertolking van 'n EKG A specialist physician is entitled to the following fees for interpretation of an ECG tracing referred for interpretation • 'n Internis is geregtig op die volgende gelde vir die vertolking van 'n EKG wanneer dit verwys word vir vertolking. | | | | | | | |
| 1230 Physician's fee for interpreting an ECG: Without effort • Internis se gelde vir vertolking van 'n EKG: Rustend | 6 | 104.52 | | | | | |
| 1231 Physician's fee for interpreting an ECG: With and without effort • Internis se gelde vir vertolking van 'n EKG: Met en sonder inspanning | 10 | 174.20 | | | | | |
| 1232 Electrocardiogram: Without effort • Elektrokardiogram: Rustend | 9 | 156.78 | 9 | 156.78 | | | |
| 1233 Electrocardiogram: With and without effort • Elektrokardiogram: Met en sonder inspanning | 13 | 226.46 | 13 | 226.46 | | | |
| 1234 Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus • Inspannings-elektrokardiogram met behulp van 'n spesiale fiets-ergometer, monitorapparaat en beskikbaarheid van geassosieerde apparaat | 40 | 696.80 | 40 | 696.80 | | | |
| 1235 Multi-stage treadmill • Meerfasige trapmeultoets | 60 | 1 045.20 | 60 | 1 045.20 | | | |
| 1241 X-ray screening (Chest) • X-straaldeurligting (Borskas) | 4 | 69.68 | 4 | 69.68 | | | |
| 1245 Angiography cerebral: First two series • Angiografie serebraal: Eerste twee reekse | 34.3 | 597.51 | 34.3 | 597.51 | 4 | 325.68 +T | |
| 1246 Angiography peripheral: Per limb • Angiografie perifeer: Per ledemaat | 25 | 435.50 | 25 | 435.50 | 4 | 325.68 +T | |
| 1248 Paracentesis of pericardium • Parasentese van perikardium | 50 | 871.00 | 50 | 871.00 | 9 | 732.78 +T | |

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|---|-------------------------|-----------|--|----------|------------------------|---------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 6.3 Cardiac surgery ● Hartchirurgie | | | | | | | |
| 1311 Pericardial drainage ● Dreinerings van perikardium | 140 | 2 438.80 | 120 | 2 090.40 | 13 | 1058.46 | +T |
| 6.3.1 Open heart surgery ● Opehart-chirurgie | | | | | | | |
| 1322 Attendance at other operations for monitoring at bedside, by physician heart block, etc: Per hour ● Bystand by ander operasies, en toesighouding by siekbed deur internis by vir 'n hartblok, ens.: Per uur | 20 | 348.40 | | | | | |
| 6.4 Peripheral vascular system ● Perifere vasculêre sisteem | | | | | | | |
| 6.4.2 Arterio-venous-abnormalities ● Arterio-veneuse-afwykings | | | | | | | |
| 1369 Fistula or aneurysm (as for grafting of various arteries) ● Fistel of aneurisme (soos vir transplantasie van arteries) | | | | | | | |
| 6.4.3 Arteries ● Arteries | | | | | | | |
| 6.4.3.1 Aorta-iliac and major branches ● Aorta-iliac en groot takke | | | | | | | |
| 1373 Abdominal aorta and iliac artery: Ruptured ● Abdominale aorta en arteria iliaca: Geruptuur | 600 | 10 452.00 | 480 | 8 361.60 | 15 | 1221.30 | +T |
| 6.4.3.2 Iliac artery ● Arteria iliaca | | | | | | | |
| 1379 Prosthetic grafting and/or Thrombo-endarterectomy ● Inplanting van protese en/of Trombo-endarterektomie | 300 | 5 226.00 | 240 | 4 180.80 | 13 | 1058.46 | +T |
| 6.4.3.3 Peripheral ● Perifeer | | | | | | | |
| 1385 Prosthetic grafting ● Inplanting van protese | 255 | 4 442.10 | 204 | 3 553.68 | 5 | 407.10 | +T |
| 1387 Vein grafting proximal to knee joint ● Vena transplantasie bokant kniegewrig | 300 | 5 226.00 | 240 | 4 180.80 | 5 | 407.10 | +T |
| 1388 Vein grafting distal to knee joint ● Vena transplantasie onderkant kniegewrig | 444 | 7 734.48 | 355.2 | 6 187.58 | 5 | 407.10 | +T |
| 1389 Endarterectomy when not part of another specified procedure ● Endarterektomie wanneer nie 'n deel van 'n ander gespesifiseerde prosedure nie | 264 | 4 598.88 | 211.2 | 3 679.10 | 5 | 407.10 | +T |
| 1393 Embolectomy: Peripheral embolectomy transfemoral ● Embolektomie: Perifere transfemorale embolektomie | 168 | 2 926.56 | 134.4 | 2 341.25 | 5 | 407.10 | +T |
| 1395 Miscellaneous arterial procedures: Arterial suture: Trauma ● Diverse arteriële prosedures: Hegting van arterie: Trauma | 125 | 2 177.50 | 100 | 1 742.00 | 5 | 407.10 | +T |
| 1396 Suture major blood vessel (artery or vein) - trauma (major blood vessels are defined as aorta, innominate artery, carotid artery and vertebral 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) ● Hegting van groot bloetvaat (arterie of vena) - trauma (groot bloedate word omskryf as aorta innominate arterie, karotis arterie, en vertebrale arterie subklaviese arterie, axillêre arterie, iliaka arterie, gewone femorale en popliteale arterie. Die femorale en popliteale arterie word ingesluit as gevolg van die onbereikbaarheid van die arteries en moeilike chirurgiese blootlegging). | 264 | 4 598.88 | 211.2 | 3 679.10 | 15 | 1221.30 | +T |
| 1397 Profundoplasty ● Profundoplastie | 210 | 3 658.20 | 168 | 2 926.56 | 5 | 407.10 | +T |
| 1399 Distal tibial (ankle region) ● Tibiaal distaal (naby enkel) | 456 | 7 943.52 | 364.8 | 6 354.82 | 5 | 407.10 | +T |
| 1401 Femoro-femoral ● Femoro-femoraal | 254 | 4 424.68 | 203.2 | 3 539.74 | 5 | 407.10 | +T |
| 1402 Carotid-subclavian ● Carotis-subklavies | 288 | 5 016.96 | 230.4 | 4 013.57 | 8 | 651.36 | +T |
| 1403 Axillo-femoral (Bifemoral + 50% of the fee) ● Aksillo-femoraal (Bifemoraal + 50% van die fooi) | 288 | 5 016.96 | 230.4 | 4 013.57 | 8 | 651.36 | +T |

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|---|-------------------------|----------|--|----------|------------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 6.4.4 Veins ● Venas | | | | | | | |
| 1407 Ligation of saphenous vein ● Afbinding van vena saphena | 50 | 871.00 | 50 | 871.00 | 3 | 244.26 | +T |
| 1408 Placement of Hickman catheter or similar ● Inplasing van Hickman kateter of soortgelyk | 91 | 1 585.22 | 91 | 1 585.22 | 4 | 325.68 | +T |
| 1410 Ligation of inferior vena cava: Abdominal ● Afbinding van vena cava inferior: Abdominaal | 180 | 3 135.60 | 144 | 2 508.48 | 8 | 651.36 | +T |
| 1412 Umbrella operation on inferior vena cava: Abdominal ● Sambreeloperasie op vena cava inferior: Abdominaal | 100 | 1 742.00 | 100 | 1 742.00 | 8 | 651.36 | +T |
| 1413 Combined procedure for varicose veins: Ligation of saphenous vein stripping, multiple ligation including of perforating veins as indicated: Unilateral ● Gekombineerde prosedure vir spatate: Afbinding van vena saphenous stroping, veelvuldige afbinding van perforerende venas soos aangedui: Afbinding van vena cava inferior: Unilateraal | 141 | 2 456.22 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 1415 Combined procedure for varicose veins: Ligation of saphenous vein stripping, multiple ligation including of perforating veins as indicated: Bilateral ● Gekombineerde prosedure vir spatate: Afbinding van vena saphenous stroping, veelvuldige afbinding van perforerende venas soos aangedui: Afbinding van vena cava inferior: Bilateraal | 247 | 4 302.74 | 197.6 | 3 442.19 | 3 | 244.26 | +T |
| 1417 Extensive sub-fascial ligation of perforating veins ● Uitgebreide sub-fasiële afbinding van perforerende venas | 125 | 2 177.50 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 1419 Lesser varicose vein procedure ● Klein spataar prosedures | 31 | 540.02 | 31 | 540.02 | 3 | 244.26 | +T |
| 1421 Compression sclerotherapy of varicose veins: Per injection to a maximum of nine injections per leg (excluding cost of material) ● Skleroserende inspuiting met kompressie vir spatate: Per inspuiting tot 'n maksimum van nege inspuitings per been (koste van materiaal uitgesluit) | 9 | 156.78 | 9 | 156.78 | | | |
| 1425 Thrombectomy: Inferior vena cava (Trans-abdominal) ● Trombektomie: Vena cava inferior (Transabdominaal) | 240 | 4 180.80 | 192 | 3 344.64 | 11 | 895.62 | +T |
| 1427 Thrombectomy: Ilio-femoral ● Trombektomie: Ilio-femoraal | 175 | 3 048.50 | 140 | 2 438.80 | 6 | 488.52 | +T |
| 7. LYMPHO RETICULAR SYSTEM ● LIMFO RETIKULÊRE STELSEL | | | | | | | |
| 7.1 Spleen ● Milt | | | | | | | |
| 1435 Splenectomy (trauma) ● Splenektomie (trauma) | 221.3 | 3 855.05 | 177.04 | 3 084.04 | 9 | 732.78 | +T |
| 1457 Bone marrow biopsy: By trephine ● Beenmurg biopsie: Deur middel van trefien | 13 | 226.46 | 13 | 226.46 | 3 | 244.26 | +T |
| 1458 Bone marrow biopsy: Simple aspiration of marrow by means of trocar or cannula ● Beenmurg biopsie: Eenvoudige aspirasie van murg trokar of kannula | 8 | 139.36 | 8 | 139.36 | | | |
| 8. DIGESTIVE SYSTEM ● LSPYSVERTERINGSTELSEL | | | | | | | |
| 8.1 Oral cavity ● Mondholte | | | | | | | |
| 1467 Drainage of intra-oral abscess ● Dreinerings van abses in die mondholte | 31 | 540.02 | 31 | 540.02 | 4 | 325.68 | +T |
| 1483 Alveolar periosteal or other flaps for arch closure I Alveolêre periosteale of ander flappe vir boog sluiting | 138 | 2 403.96 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 8.2 Lips ● Lippe | | | | | | | |
| 1485 Local excision of benign lesion of lip ● Lokale uitsnyding van goedaardige letsels van lip | 27 | 470.34 | 27 | 470.34 | 4 | 325.68 | +T |
| 1499 Lip reconstruction following an injury: Directed repair ● Liprekonstruksie na besering: Direkte herstel | 105.6 | 1 839.55 | 105.6 | 1 839.55 | 4 | 325.68 | +T |
| 1501 Lip reconstruction following an injury only: Flap repair ● Liprekonstruksie slegs na besering: Flap herstel | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T |
| 1503 Lip reconstruction following an injury only: Total reconstruction (first stage) ● Liprekonstruksie slegs na besering: Totale rekonstruksie (eerste stadium) | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | 325.68 | +T |
| 1504 Lip reconstruction following an injury only: Subsequent stages (see item 0297) ● Liprekonstruksie slegs na besering: Daaropvolgende stadiums (Sien item 0297) | 104 | 1 811.68 | 104 | 1 811.68 | 4 | 325.68 | +T |

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|-------------|---|-------------------------|-----------------|--|-----------------|------------------------|------------------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 8.3 | Tongue ● Tong | | | | | | | |
| 1505 | Partial glossectomy ● Gedeeltelike glossektomie | 225 | 3 919.50 | 180 | 3 135.60 | 6 | 488.52 +T | |
| 1507 | Local excision of lesion of tongue ● Lokale uitsnyding van letsel van tong | 27 | 470.34 | 27 | 470.34 | 4 | 325.68 +T | |
| 8.4 | Palate, uvula and salivary gland ● Verhemelte, uvula en speekselklier | | | | | | | |
| 1526 | Total parotidectomy with preservation of facial nerve ● Totale verwydering van parotis met behoud van fasialis senuwee | 358.5 | 6 245.07 | 286.8 | 4 996.06 | 5 | 407.10 +T | |
| 1531 | Drainage of parotid abscess ● Dreinerings van parotissabes | 25 | 435.50 | 25 | 435.50 | 4 | 325.68 +T | |
| 8.5 | Oesophagus ● Oesofagus | | | | | | | |
| 1545 | Oesophagoscopy with rigid instrument: First and subsequent ● Oesofagoskopie met onbuigbare instrument: Eerste en herhaal | 47 | 818.74 | 47 | 818.74 | 4 | 325.68 +T | |
| 1550 | Oesophagoscopy with removal of foreign body ● Oesofagoskopie met verwydering van vreemde voorwerp | 70 | 1 219.40 | 70 | 1 219.40 | 4 | 325.68 +T | |
| 1563 | Hiatus hernia and diaphragmatic hernia repair: With anti-reflux procedure ● Hiatusbreuk en diafragmatiese breukherstel: Met anti-refluksprosedure | 300 | 5 226.00 | 240 | 4 180.80 | 11 | 895.62 +T | |
| 1565 | Hiatus hernia and diaphragmatic hernia repair: With Collins Nissen oesophageal lengthening procedure ● Hiatusbreuk en diafragmatiese breukherstel: Met Collins Nissen esofagusverlenging | 350 | 6 097.00 | 280 | 4 877.60 | 11 | 895.62 +T | |
| 8.6 | Stomach ● Maag | | | | | | | |
| 1587 | Upper gastro-intestinal endoscopy: Using hospital equipment ● Boonste gastro-intestinale endoskopie: Hospitaaltoerusting | 48.75 | 849.23 | 48.75 | 849.23 | 4 | 325.68 +T | |
| 1589 | Endoscopic control of gastrointestinal haemorrhage from upper gastrointestinal tract, intestines or large bowel by injection of vasoconstrictor and/or sclerosis (endoscopic haemostasis) to be added to gastroscopy (item 1587) or colonoscopy (item 1653) ● Endoskopiese beheer van gastro-intestinale bloeding van boonste gastro-intestinale weg, derms, of dikderm d.m.v. inspuiting van vatvernouers en/of sklerose (endoskopiese hemostase): voeg by gastrokopie (item 1587) of kolonoskopie (item 1653) | + 34 | 592.28 | 34 | 592.28 | 6 | 488.52 +T | |
| 1591 | Plus removal of foreign bodies (stomach): ADD to gastro-intestinal endoscopy (item 1587) ● Plus verwydering van vreemde voorwerpe (maag): VOEG BY gastro-intestinale endoskopie (item 1587) | + +25 | 435.50 | +25 | 435.50 | 4 | 325.68 +T | |
| 1597 | Gastrostomy or Gastrotomy ● Gastrostomie of Gastrotomie | 147.5 | 2 569.45 | 120 | 2 090.40 | 6 | 488.52 +T | |
| 1615 | Suture of perforated gastric or duodenal ulcer or wound or injury ● Hegting van gepeperforeerde maag- of duodenale ulkus of van wond of besering | 200 | 3 484.00 | 160 | 2 787.20 | 7 | 569.94 +T | |
| 1617 | Partial gastrectomy ● Gedeeltelike gastrektomie | 328.3 | 5 718.99 | 262.64 | 4 575.19 | 7 | 569.94 +T | |
| 1619 | Total gastrectomy ● Totale gastrektomie | 384.43 | 6 696.77 | 307.54 | 5 357.35 | 7 | 569.94 +T | |
| 8.7 | Duodenum ● Duodenum | | | | | | | |
| 1626 | Endoscopic examination of the small bowel beyond the duodenojejunal flexure with biopsy with or without polypectomy with or without arrest of haemorrhage (enteroscopy) ● Endoskopiese ondersoek van die dunderm verder as die duodenojejennale fleksuur met biopsie met of sonder stopsetting van bloeding (enteroskopie) | 120 | 2 090.40 | 120 | 2 090.40 | 6 | 488.52 +T | |
| 1627 | Duodenal intubation (under X-ray screening) ● Duodenale intubasie (met X-straal deurligting) | 8 | 139.36 | | | | | |

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|---|-------------------------|----------|--|----------|------------------------|-----------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 8.8 Intestines ● Dermkanaal | | | | | | | |
| 1634 Enterotomy or Enterostomy ● Enterotomie of Enterostomie | 202.6 | 3 529.29 | 162.08 | 2 823.43 | 6 | 488.52 +T | |
| 1637 Operation for relief of intestinal obstruction ● Operasie vir verligting van intestinale obstruksie | 240 | 4 180.80 | 192 | 3 344.64 | 7 | 569.94 +T | |
| 1639 Resection of small bowel with enterostomy or anastomosis ● Reseksie van dunderm met enterostomie of anastomose | 244.9 | 4 266.16 | 195.92 | 3 412.93 | 6 | 488.52 +T | |
| 1642 Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy): Hire fee (item 0201 applicable for video capsule - disposable single patient use) - (Please note: All patients should have had a normal gastroscopy and colonoscopy) ● Spysverteringskanaal beelding, intraluminaal (bv. video kapsule endoskopie): verhuur van apparaat (item 0201 vir videokapsule wegdoenbaar) - (Neem asb kennis dat die pasiënt moet presenteer met 'n normale gastroskopiese en kolonoskopiese ondersoek | 150 | 2 613.00 | 120 | 2 090.40 | | | |
| 1643 Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy), oesophagus through ileum: Doctor interpretation and report ● Spysverteringstelsel beelding, intraluminaal (bv. video kapsule endoskopie), oesofagus deur tot ileum: Interpretasie en verslag deur die geneesheer wat die prosedure uitgevoer het. | 90 | 1 567.80 | 90 | 1 567.80 | | | |
| 1645 Suture of intestine (small or large): Wound or injury ● Hegting van derm (dun of dik): Wond of besering | 185.2 | 3 226.18 | 148.16 | 2 580.95 | 6 | 488.52 +T | |
| 1647 Closure of intestinal fistula ● Sluiting van intestinale fistel | 258 | 4 494.36 | 206.4 | 3 595.49 | 6 | 488.52 +T | |
| 1657 Right or left hemicolectomy or segmental colectomy ● Regter of linker-hemi-kolektomie of segmentele kolektomie | 325 | 5 661.50 | 260 | 4 529.20 | 6 | 488.52 +T | |
| 1661 Colotomy: Including removal of foreign body ● Kolotomie: Verwydering van vreemde voorwerp ingeslote | 205.7 | 3 583.29 | 164.56 | 2 866.64 | 6 | 488.52 +T | |
| 1663 Total colectomy ● Totale kolektomie | 390 | 6 793.80 | 312 | 5 435.04 | 6 | 488.52 +T | |
| 1665 Colostomy or ileostomy isolated procedure ● Kolostomie of ileostomie losstaande prosedure | 233.8 | 4 072.80 | 187.04 | 3 258.24 | 6 | 488.52 +T | |
| 1667 Colostomy: Closure ● Kolostomie: Sluiting | 179.1 | 3 119.92 | 143.28 | 2 495.94 | 5 | 407.10 +T | |
| 1668 Revision of ileostomy pouch ● Hersiening van ileostomie sak | 375 | 6 532.50 | 300 | 5 226.00 | 6 | 488.52 +T | |
| 8.10 Rectum and anus ● Rektum en anus | | | | | | | |
| 1677 Sigmoidoscopy: First and subsequent, with or without biopsy ● Sigmoidoskopies: Eerste en daaropvolgende met of sonder biopsie | 13 | 226.46 | 13 | 226.46 | 3 | 244.26 +T | |
| 1688 Total mesorectal excision with colo-anal anastomosis and defunctioning enterostomy or colostomy ● Totale mesorektale uitsnyding met kolo-anale anastomose en enterostomie of kolostomie. | 445 | 7 751.90 | 356 | 6 201.52 | 8 | 651.36 +T | |
| 1705 Incision and drainage of submucous abscess I Insnyding en dreinerig van perianale abses | 40 | 696.80 | 40 | 696.80 | 3 | 244.26 +T | |
| 1707 Drainage of submucous abscess ● Dreinerig van sub-mukusale abses | 40 | 696.80 | 40 | 696.80 | 3 | 244.26 +T | |
| 1737 Dilatation of ano-rectal structure ● Dilatasie van ano-rektale struktuur | 12.5 | 217.75 | 12.5 | 217.75 | 3 | 244.26 +T | |
| 1742 Bio-feedback training for faecal incontinence during anorectal manometry performed by doctor ● Bio-terugvoeropleiding vir fekale inkontinensie gedurende anorektale manometrie uitgevoer deur dokter | 27 | 470.34 | | | | | |
| 8.11 Liver ● Lewer | | | | | | | |
| 1743 Needle biopsy of liver ● Naaldbiopsie van lewer | 30.3 | 527.83 | 30.3 | 527.83 | 3 | 244.26 +T | |
| 1745 Biopsy of liver by laparotomy ● Biopsie van lewer deur laparotomie | 125 | 2 177.50 | 120 | 2 090.40 | 4 | 325.68 +T | |
| 1747 Drainage of liver abscess ● Dreinerig van lewerabses | 179.1 | 3 119.92 | 143.28 | 2 495.94 | 7 | 569.94 +T | |
| 1748 Body composition measured by bio-electrical impedance ● Liggaamsamestelling gemeet deur middel van bio-elektriese impedansie | 3 | 52.26 | 3 | 52.26 | | | |
| 1749 Hemi-hepatectomy: Right ● Hemi-hepatektomie: Regs | 564 | 9 824.88 | 451.2 | 7 859.90 | 9 | 732.78 +T | |
| 1751 Hemi-hepatectomy: Left ● Hemi-hepatektomie: Links | 521.1 | 9 077.56 | 416.88 | 7 262.05 | 9 | 732.78 +T | |
| 1752 Extended right or left hepatectomy ● Uitgebreide linker of regter hepatektomie | 570.9 | 9 945.08 | 456.72 | 7 956.06 | 9 | 732.78 +T | |

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|------|--|-------------------------|----------|--|----------|------------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 1753 | Partial or segmental hepatectomy ● Gedeeltelike of segmentale hepatektomie | 378 | 6 584.76 | 302.4 | 5 267.81 | 9 | 732.78 | +T |
| 1757 | Suture of liver wound or injury ● Hegting van lewerwond of besering | 214.2 | 3 731.36 | 171.36 | 2 985.09 | 9 | 732.78 | +T |
| 8.12 | Biliary tract ● Galweë | | | | | | | |
| 1763 | With exploration of common bile duct ● Met eksplorاسie van choledochus | 264.5 | 4 607.59 | 211.6 | 3 686.07 | 6 | 488.52 | +T |
| 1765 | Exploration of common bile duct: Secondary operation ● Eksplorاسie van cholodochus: Sekondêre operاسie | 327.7 | 5 708.53 | 262.16 | 4 566.83 | 6 | 488.52 | +T |
| 1767 | Reconstruction of common bile duct ● Rekonstruksie van choledochus | 371.7 | 6 475.01 | 297.36 | 5 180.01 | 6 | 488.52 | +T |
| 8.13 | Pancreas ● Pankreas | | | | | | | |
| 1778 | Endoscopic Retrograde Cholangiopancreatography (ERCP): Endoscopy + Catheterisation of pancreas duct or choledochus ● Endoskopiese Retrograde Cholangiopankreatografie (ERCP): Endoskopiese + kateterisasie van pankreasbuis of choledochus | 105.9 | 1 844.78 | 105.9 | 1 844.78 | 4 | 325.68 | +T |
| 1779 | Endoscopic retrograde removal of stone(s) as for biliary and/or pancreatic duct. ADD to ERCP (item 1778) ● Endoskopiese retrograde verwydering van stene soos vir galbuis en/of pankreatiese buis. Voeg by ERCP (item 1778) | + 15.82 | 275.58 | 15.82 | 275.58 | 4 | 325.68 | +T |
| 1791 | Local, partial or subtotal pancreatectomy ● Lokale, gedeeltelike of subtotale pankreatektomie | 351.3 | 6 119.65 | 281.04 | 4 895.72 | 8 | 651.36 | +T |
| 1793 | Distal pancreatectomy with internal drainage ● Distale pankreatektomie met interne dreinasie | 377.4 | 6 574.31 | 301.92 | 5 259.45 | 8 | 651.36 | +T |
| 8.14 | Peritoneal cavity ● Peritoniale holte | | | | | | | |
| 1797 | Pneumo-peritoneum: First ● Pneumoperitoneum: Eerste | 13 | 226.46 | 13 | 226.46 | 4 | 325.68 | +T |
| 1799 | Pneumo-peritoneum: Repeat ● Pneumoperitoneum: Daaropvolgende | 6 | 104.52 | 6 | 104.52 | 4 | 325.68 | +T |
| 1800 | Peritoneal lavage ● Peritoneale uitspoeling | 20 | 348.40 | 20 | 348.40 | | | |
| 1801 | Diagnostic paracentesis: Abdomen ● Diagnostiese parasentese: Buik | 8 | 139.36 | 8 | 139.36 | | | |
| 1803 | Therapeutic paracentesis: Abdomen ● Terapeutiese parasentese: Buik | 13 | 226.46 | 13 | 226.46 | | | |
| 1807 | Add to open procedure where procedure was performed through a laparoscope (for anaesthetic refer to modifier 0027) ● Voeg by oop prosedure wanneer 'n prosedure deur 'n laparoskoop uitgevoer word (vir narkose verwys na wysiger 0027) | + 45 | 783.90 | 45 | 783.90 | 5 | 407.10 | +T |
| 1809 | Laparotomy ● Laparotomie | 196 | 3 414.32 | 156.8 | 2 731.46 | 4 | 325.68 | +T |
| 1811 | Suture of burst abdomen ● Hegting van gebarste abdomen | 188.3 | 3 280.19 | 150.64 | 2 624.15 | 7 | 569.94 | +T |
| 1812 | Laparotomy for control of surgical haemorrhage ● Laparotomie vir beheer van chirurgiese bloeding | 105 | 1 829.10 | 105 | 1 829.10 | 9 | 732.78 | +T |
| 1813 | Drainage of sub-phrenic abscess ● Dreinerings van sub-freniese abses | 180 | 3 135.60 | 144 | 2 508.48 | 7 | 569.94 | +T |
| 1815 | Drainage of other intraperitoneal abscess (excluding appendix abscess): Transabdominal ● Dreinerings van ander intraperitoneale abses (appendiksabses uitgesluit): Transabdominaal | 248.4 | 4 327.13 | 198.72 | 3 461.70 | 5 | 407.10 | +T |
| 1817 | Transrectal drainage of pelvic abscess ● Transrektale dreinerings van bekkenabses | 75 | 1 306.50 | 75 | 1 306.50 | 4 | 325.68 | +T |
| 9. | HERNIAE ● BREUKE | | | | | | | |
| 1819 | Inguinal or femoral hernia ● Inguinale of femorale breuk (trauma) | 125 | 2 177.50 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 1825 | Recurrent inguinal or femoral hernia ● Herhalende inguinale of femorale breuk | 155 | 2 700.10 | 124 | 2 160.08 | 4 | 325.68 | +T |
| 1827 | Strangulated hernia or femoral hernia ● Gestranguleerde breuk of femorale breuk | 238 | 4 145.96 | 190.4 | 3 316.77 | 7 | 569.94 | +T |
| 1831 | Umbilical hernia ● Naelbreuk | 140 | 2 438.80 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 1835 | Incisional hernia ● Snitbreuk | 166.8 | 2 905.66 | 133.44 | 2 324.52 | 4 | 325.68 | +T |

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|--------------------------------------|--|-------------------------|------|--|-------|------------------------|---|--------|----|
| | | U/E | R | U/E | R | U/E | R | T/M | |
| 1836 | Implantation of mesh or other prosthesis for incisional or ventral hernia repair (List separately in addition to code for the incisional or ventral hernia repair) ● Inplaas van wondgaas (mesh) of ander protese vir snit- of ventrale breuk herstel (Hef saam met die toepaslike prosedure kode vir snit- of ventrale breuk herstel) | + | 77 | 1 341.34 | 77 | 1 341.34 | 4 | 325.68 | +T |
| 10. URINARY SYSTEM ● URINEWEË | | | | | | | | | |
| 10.1 Kidney ● Nier | | | | | | | | | |
| 1839 | Renal biopsy, per kidney, open ● Nierbiopsie, per nier, oop | | 71 | 1 236.82 | 71 | 1 236.82 | 5 | 407.10 | +T |
| 1841 | Renal biopsy (needle) ● Nierbiopsie (naald) | | 30 | 522.60 | 30 | 522.60 | 3 | 244.26 | +T |
| 1843 | Peritoneal dialysis: First day ● Peritoneale dialise: Eerste dag | | 33 | 574.86 | 33 | 574.86 | | | |
| 1845 | Peritoneal dialysis: Every subsequent day ● Peritoneale dialise: Elke daaropvolgende dag | | 33 | 574.86 | 33 | 574.86 | | | |
| 1847 | Haemodialysis: Per hour or part thereof ● Hemodialise: Per uur of gedeelte daarvan | | 21 | 365.82 | 21 | 365.82 | | | |
| 1849 | Haemodialysis: Maximum: Eight hours ● Hemodialise: Maksimum: Agt uur | | 168 | 2 926.56 | 134.4 | 2 341.25 | | | |
| 1851 | Haemodialysis: Thereafter per week ● Hemodialise: Daarna per week | | 55 | 958.10 | 55 | 958.10 | | | |
| 1852 | Continuous haemodiafiltration per day in intensive or high care unit ● Volgehoue haemodiafiltrasie per dag in intensiewe of hoë sorgteenheid | | 33 | 574.86 | 33 | 574.86 | | | |
| 1853 | Primary nephrectomy ● Primêre nefrektomie | | 225 | 3 919.50 | 180 | 3 135.60 | 5 | 407.10 | +T |
| 1855 | Secondary nephrectomy ● Sekondêre nefrektomie | | 267 | 4 651.14 | 213.6 | 3 720.91 | 5 | 407.10 | +T |
| 1863 | Nephro-ureterectomy ● Nefro-ureterektomie | | 305 | 5 313.10 | 244 | 4 250.48 | 5 | 407.10 | +T |
| 1865 | Nephrotomy with drainage nephrostomy ● Nefrotomie met dreineringsnefrostomie | | 189 | 3 292.38 | 151.2 | 2 633.90 | 6 | 488.52 | +T |
| 1873 | Suture renal laceration (renorrhaphy) ● Hegting renalelaserasie (renorrafie) | | 193 | 3 362.06 | 154.4 | 2 689.65 | 6 | 488.52 | +T |
| 1879 | Closure of renal fistula ● Sluiting van nierfistel | | 189 | 3 292.38 | 151.2 | 2 633.90 | 5 | 407.10 | +T |
| 1881 | Pyeloplasty ● Piëloplastie | | 252 | 4 389.84 | 201.6 | 3 511.87 | 5 | 407.10 | +T |
| 1885 | Pyelolithotomy ● Piëlolitotomie | | 189 | 3 292.38 | 151.2 | 2 633.90 | 5 | 407.10 | +T |
| 1891 | Perinephric abscess or renal abscess: Drainage ● Perinefriesie abses of nierabses: Drainasie | | 200 | 3 484.00 | 160 | 2 787.20 | 7 | 569.94 | +T |
| 10.2 Ureter ● Ureter | | | | | | | | | |
| 1897 | Ureterorrhaphy: Suture of ureter ● Uretorrrafie: Hegting van ureter | | 147 | 2 560.74 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 1898 | Ureterorrhaphy: Lumbar approach ● Uretorrrafie: Deur middel van lendesnit | | 189 | 3 292.38 | 151.2 | 2 633.90 | 5 | 407.10 | +T |
| 1899 | Ureteroplasty ● Ureteroplastie | | 181 | 3 153.02 | 144.8 | 2 522.42 | 5 | 407.10 | +T |
| 1903 | Ureterectomy only ● Ureterektomie alleenlik | | 137 | 2 386.54 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 1919 | Closure of ureteric fistula ● Sluiting van fistula van ureter | | 147 | 2 560.74 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 1921 | Immediate deligation of ureter ● Onmiddellike losmaak van afbinding om ureter (deligasie) | | 147 | 2 560.74 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 10.3 Bladder ● Blaas | | | | | | | | | |
| 1945 | Installation of radio-opaque material for cystography or urethrocytography ● Installering van radio-opaak materiaal vir sistograe of uretrasistografie | | 5 | 87.10 | 5 | 87.10 | 3 | 244.26 | +T |
| 1949 | Cystoscopy: Hospital equipment ● Sistoskopie: Hospitaal toerusting | | 44 | 766.48 | 44 | 766.48 | 3 | 244.26 | +T |
| 1951 | And retrograde pyelography or retrograde ureteral catheterisation: Unilateral or bilateral ● En retrograde pielograe of retrograde kateterisering van ureter: Unilateraal of bilateraal | + | 10 | 174.20 | 10 | 174.20 | 3 | 244.26 | +T |
| 1952 | J J Stent catheter ● J J Stent kateter | + | 44 | 766.48 | 44 | 766.48 | 3 | 244.26 | +T |
| 1954 | Ureteroscopy ● Uretroskopie | + | 35 | 609.70 | | | 3 | 244.26 | +T |
| 1959 | With manipulation of ureteral calculus ● Met manipulasie van uretersteen | + | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 1961 | With removal of foreign body or calculus from urethra or bladder ● Met verwydering van vreemde voorwerp of kalkulus van uretra of blaas | + | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 1964 | And control of haemorrhage and blood clot evacuation ● En kontroliering van bloeding en bloedklont evakuasie | + | 15 | 261.30 | 15 | 261.30 | 3 | 244.26 | +T |
| 1976 | Optic urethrotomy ● Optiese uretrotomie | | 80 | 1 393.60 | 80 | 1 393.60 | 3 | 244.26 | +T |
| 1979 | Internal urethrotomy: Female ● Interne uretrotomie: Vroulik | | 50 | 871.00 | 50 | 871.00 | 3 | 244.26 | +T |
| 1981 | Internal urethrotomy: Male ● Interne uretrotomie: Manlik | | 76.2 | 1 327.40 | 76.2 | 1 327.40 | 3 | 244.26 | +T |
| 1985 | Transurethral resection of bladder neck: Female ● Transureterale reseksie van blaasnek: Vroulik | | 105 | 1 829.10 | 105 | 1 829.10 | 5 | 407.10 | +T |
| 1986 | Transurethral resection of bladder neck: Male ● Transureterale reseksie van blaasnek: Manlik | | 125 | 2 177.50 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 1987 | Litholapaxy ● Litolapaksie | | 80 | 1 393.60 | 80 | 1 393.60 | 3 | 244.26 | +T |
| 1989 | Cystometrogram ● Sistometrogram | | 25 | 435.50 | 25 | 435.50 | 3 | 244.26 | +T |

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|------|--|-------------------------|----------|--|----------|------------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 1991 | Flometric bladder studies with videocystography ● Vloei-metriese blaasstudies met videosistografie | 40 | 696.80 | 40 | 696.80 | 3 | 244.26 | +T |
| 1992 | Without videocystography ● Sonder videosistografie | 25 | 435.50 | 25 | 435.50 | 3 | 244.26 | +T |
| 1993 | Voiding cysto-urethrogram ● Urinerings sisto-urethrogram | 21 | 365.82 | 21 | 365.82 | 3 | 244.26 | +T |
| 1995 | Percutaneous aspiration of bladder ● Perkutane aspirasie van blaas | 10 | 174.20 | 10 | 174.20 | 3 | 244.26 | +T |
| 1996 | Bladder catheterisation - male (not at operation) ● Blaas kateterisasie - manlik (nie tydens operasie) | 6 | 104.52 | 6 | 104.52 | 3 | 244.26 | +T |
| 1997 | Bladder catheterisation - female (not at operation) ● Blaas kateterisasie - vroulik (nie tydens operasie) | 3 | 52.26 | 3 | 52.26 | | | |
| 1999 | Percutaneous cystostomy ● Perkutane sistostomie | 24 | 418.08 | 24 | 418.08 | 3 | 244.26 | +T |
| 2013 | Diverticulectomy (independent procedure): Multiple or single ● Divertikulektomie (onafhanklike prosedure): Veelvuldig of enkelvoudig | 137 | 2 386.54 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 2015 | Suprapubic cystostomy ● Suprapubiese sistostomie | 67 | 1 167.14 | 67 | 1 167.14 | 5 | 407.10 | +T |
| 2035 | Cutaneous vesicostomy ● Kutane vesikostomie | 118 | 2 055.56 | 118 | 2 055.56 | 5 | 407.10 | +T |
| 2039 | Operation for ruptured bladder ● Operasie vir ruptuur van blaas | 137 | 2 386.54 | 120 | 2 090.40 | 6 | 488.52 | +T |
| 2047 | Drainage of perivesical or prevesical abscess ● Dreinerings van peri-vesikale of prevesikale abses | 105 | 1 829.10 | 105 | 1 829.10 | 5 | 407.10 | +T |
| 2049 | Evacuation of clots from bladder: Other than post-operative ● | 132.10 | 2 301.18 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 2050 | Evacuation of clots from bladder: Post-operative ● Verwydering van bloedklonte uit blaas: Post-operatief | | | | | 4 | 325.68 | +T |
| 2051 | Simple bladder lavage: Including catheterisation ● Eenvoudige blaasspoeling: Kateterisasie ingesluit | 12 | 209.04 | 12 | 209.04 | 3 | 244.26 | +T |
| 2058 | (code moved to consultation section/kode geskuif na konsultasie afdeling) | | | | | | | |
| 10.4 | Urethra ● Uretra | | | | | | | |
| 2063 | Dilatation of urethra stricture: By passage sound: Initial (male) ● Dilatasie van striktuur van uretra: Eerste (manlik) | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 2065 | Dilatation of urethra stricture: By passage sound: Subsequent (male) ● Dilatasie van striktuur van uretra: Opvolg (manlik) | 10 | 174.20 | 10 | 174.20 | 3 | 244.26 | +T |
| 2067 | Dilatation of urethra stricture: By passage sound: By passage of filiform and follower (male) ● Dilatasie van striktuur van uretra: D.m.v. 'n filiform en opvolger (manlik) | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 2071 | Urethrorrhaphy: Suture of urethral wound or injury ● Urethrorrae: Hegting van wond of besering van uretra | 139 | 2 421.38 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 2075 | Urethraplasty: Pendulous urethra: First stage ● Uretraplastie: Penduleuse uretra: Eerste stadium | 71 | 1 236.82 | 71 | 1 236.82 | 4 | 325.68 | +T |
| 2077 | Urethraplasty: Pendulous urethra: Second stage ● Uretraplastie: Penduleuse uretra: Tweede stadium | 145 | 2 525.90 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 2081 | Reconstruction or repair of male anterior urethra (one stage) ● Rekonstruksie of herstel van anterior manlike uretra (een stadium) | 261.6 | 4 557.07 | 209.28 | 3 645.66 | 4 | 325.68 | +T |
| 2083 | Reconstruction or repair of prostatic or membranous urethra: First stage ● Rekonstruksie of herstel van prostatiese of membraneuse uretra: Eerste stadium | 168 | 2 926.56 | 134.4 | 2 341.25 | 6 | 488.52 | +T |
| 2085 | Reconstruction or repair of prostatic or membranous urethra: Second stage ● Rekonstruksie of herstel van prostatiese of membraneuse uretra: Tweede stadium | 168 | 2 926.56 | 134.4 | 2 341.25 | 6 | 488.52 | +T |
| 2086 | Reconstruction or repair of prostatic or membranous urethra: If done in one stage ● Rekonstruksie of herstel van prostatiese of membraneuse uretra: Indien dit 'n een stadium operasie is | 294 | 5 121.48 | 235.2 | 4 097.18 | 6 | 488.52 | +T |
| 2095 | Drainage of simple localised perineal urinary extravasation ● Dreinerings van eenvoudige gelokaliseerde perineale urinêre ekstrasvasie | 128.8 | 2 243.70 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 2097 | Drainage of extensive perineal and/or abdominal urinary extravasation ● Dreinerings van uitgebreide perineale en/of abdominale urinêre ekstrasvasie | 137 | 2 386.54 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 2103 | Simple urethral meatotomy ● Eenvoudige uretrale meatotomie | 26.3 | 458.15 | 26.3 | 458.15 | 3 | 244.26 | +T |
| 2105 | Incision of deep peri-urethral abscess: Female ● Insnyding van diep peri-uretrale abses: Vroulik | 123.1 | 2 144.40 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 2107 | Incision of deep peri-urethral abscess: Male ● Insnyding van diep peri-uretrale abses: Manlik | 123.1 | 2 144.40 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 2109 | Badenoch pull-through for intractable stricture or incontinence ● Badenoch deurtrek operasie vir moeilike striktuur of inkontinensie | 181 | 3 153.02 | 144.8 | 2 522.42 | 5 | 407.10 | +T |
| 2111 | External sphincterotomy ● Eksterne sfinkterotomie | 108 | 1 881.36 | 108 | 1 881.36 | 5 | 407.10 | +T |
| 2115 | Operation for correction of male urinary incontinence with or without introduction of prosthesis (excluding cost of prosthesis) ● Operasie vir regstel van manlike urinêre inkontinensie met of sonder die aanbring van prostese (sonder koste van prostese) | 168 | 2 926.56 | 134.4 | 2 341.25 | 5 | 407.10 | +T |
| 2116 | Urethral meatoplasty ● Uretrale meatoplastiek | 101.5 | 1 768.13 | 101.50 | 1 768.13 | 3 | 244.26 | +T |

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|-------------|---|-------------------------|----------|--|----------|------------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 2117 | Closure of urethrostomy or urethrocutaneous fistula (independent procedure) ● Sluiting van uretrotomie of uretrokutane fistel (onafhanklike prosedure) | 150.3 | 2 618.23 | 120.24 | 2 094.58 | 3 | 244.26 | +T |
| 11. | MALE GENITAL SYSTEM ● MANLIKE GESLAGSTELSEL | | | | | | | |
| 11.1 | Penis ● Penis | | | | | | | |
| 2141 | Reconstructive operation for insertion of prosthesis ● Rekonstruktiewe operasie vir inplaas van prostese | 101 | 1 759.42 | 101 | 1 759.42 | 3 | 244.26 | +T |
| 2147 | Reconstructive operation of penis: for injury: Including fracture of penis and skin graft if required ● Rekonstruktiewe operasie op penis: vir 'n besering: Insluitende fraktuur van penis en veloorplanting indien nodig | 168 | 2 926.56 | 134.4 | 2 341.25 | 3 | 244.26 | +T |
| 11.2 | Testis and epididymis ● Testis en epididimis | | | | | | | |
| 2191 | Orchidectomy (total or subcapsular): Unilateral ● Orgidektomie (totaal of subkapsulêr): Unilateraal | 98 | 1 707.16 | 98 | 1 707.16 | 3 | 244.26 | +T |
| 2193 | Orchidectomy (total or subcapsular): Bilateral ● Orgidektomie (totaal of subkapsulêr): Bilateraal | 147 | 2 560.74 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 2213 | Suture or repair of testicular injury ● Hegting of herstel van besering van testis | 110.3 | 1 921.43 | 110.3 | 1 921.43 | 4 | 325.68 | +T |
| 2215 | Incision and Drainage of testis or epididymis e.g. abscess or haematoma ● Insnyding en dreinerings van testis of epididimis bv. abses of hematoom | 90 | 1 567.80 | 90 | 1 567.80 | 4 | 325.68 | +T |
| 2227 | Incision and drainage of scrotal wall abscess ● Insnyding en dreinerings en skrotumwandabses | 42.7 | 743.83 | 42.7 | 743.83 | 3 | 244.26 | +T |
| 11.3 | Prostate ● Prostaat | | | | | | | |
| 2245 | Trans-urethral resection of prostate ● Trans-uretrale reseksie van prostaat | 252 | 4 389.84 | 201.6 | 3 511.87 | 6 | 488.52 | +T |
| 14. | NERVOUS SYSTEM ● SENUWEESTELSEL | | | | | | | |
| 14.1 | Diagnostic procedures ● Diagnostiese prosedures | | | | | | | |
| 2709 | Full spinogram including bilateral median and posterior-tibial studies ● Volledige spinogram wat bilaterale medianus en tibialis posterior studies insluit | 140 | 2 438.80 | | | | | |
| 2711 | Electro-encephalography: Taking of record ● Elektro-enkefalografie: Neem van rekord | 36.10 | 628.86 | 36.10 | 628.86 | | | |
| 2712 | Electro-encephalography - Interpretation ● Elektro-enkefalografie - interpretasie | 24 | 418.08 | 24 | 418.08 | | | |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|--------|---|-------------------------|----------|--|----------|------------------------|---|-----------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 2713 | Spinal (lumbar) puncture. For diagnosis, for drainage of spinal fluid or for therapeutic indications ● Spinale (lumbale) punksie. Vir diagnose, of dreinasie van spinale vloeistof of vir terapeutiese indikasies | 18.4 | 320.53 | 18.4 | 320.53 | | | |
| 2714 | Cisternal puncture and/or intrathecal injections ● Sisternale punksie en/of intratekale inspuitings | 15 | 261.30 | 15 | 261.30 | | | |
| 2717 | Electromyography: First ● Elektromiografie: Eerste | 75 | 1 306.50 | 75 | 1 306.50 | | | |
| 2718 | Electromyography: Subsequent ● Elektromiografie: Opvolg | 75 | 1 306.50 | 75 | 1 306.50 | | | |
| 2725 | Angiography carotis: Unilateral ● Angiografie karotis: Unilateraal | 25 | 435.50 | 25 | 435.50 | 4 | | 325.68 +T |
| 2726 | Angiography carotis: Bilateral ● Angiografie karotis: Bilateraal | 44 | 766.48 | 44 | 766.48 | 4 | | 325.68 +T |
| 2727 | Vertebral artery: Direct needling ● Vertebrale arterie: Direkte benaalding | 50 | 871.00 | 50 | 871.00 | 4 | | 325.68 +T |
| 2729 | Vertebral catheterisation ● Vertebrale kateterisasie | 50 | 871.00 | 50 | 871.00 | 4 | | 325.68 +T |
| 2731 | Air encephalography and posterior fossa tomography: Injection of air (independent procedure) ● Lugensefalografie en posterior fossa tomografie: Inspuit van lug (alleenstaande prosedure) | 14.5 | 252.59 | | | 4 | | 325.68 +T |
| 2737 | Air encephalography and posterior fossa tomography: Visual field charting on Bjerrum Screen ● Lugensefalografie en posterior fossa tomografie: Gesigsveldbepaling d.m.v. Bjerrum se skerm | 7 | 121.94 | 7 | 121.94 | | | |
| 2739 | Ventricular needling without burring: Tapping only ● Ventrikelpunksie, sonder boorgate: Slegs aftapping | 16 | 278.72 | 16 | 278.72 | 4 | | 325.68 +T |
| 2741 | Ventricular needling without burring: Plus introduction of air and/or contrast dye for ventriculography ● Ventrikelpunksie, sonder boorgate: Plus inspuiting van lug en/of kontrasmiddel vir ventrikulografie | 43 | 749.06 | 43 | 749.06 | 4 | | 325.68 +T |
| 2743 | Subdural tapping: First sitting ● Subdurale aftapping: Eerste keer | 15 | 261.30 | 15 | 261.30 | 4 | | 325.68 +T |
| 2745 | Subdural tapping: Subsequent ● Subdurale aftapping: Daaropvolgende keer | 10 | 174.20 | 10 | 174.20 | 4 | | 325.68 +T |
| 14.2 | Introduction of burr holes for ● Boorgate vir | | | | | | | |
| 2747 | Ventriculography ● Ventrikulografie | 150 | 2 613.00 | 120 | 2 090.40 | 8 | | 651.36 +T |
| 2749 | Catheterisation for ventriculography and/or drainage ● Kateterisering vir ventrikulografie en/of dreinerings | 150 | 2 613.00 | 120 | 2 090.40 | 8 | | 651.36 +T |
| 2753 | Subdural haematoma ● Subdurale hematoom | 150 | 2 613.00 | 120 | 2 090.40 | 8 | | 651.36 +T |
| 2755 | Subdural empyema ● Subdurale empieëm | 150 | 2 613.00 | 120 | 2 090.40 | 8 | | 651.36 +T |
| 2757 | Brain abscess ● Breinabses | 150 | 2 613.00 | 120 | 2 090.40 | 8 | | 651.36 +T |
| 14.3 | Nerve procedures ● Senuwee prosedures | | | | | | | |
| 2765 | Nerve conduction studies (see items 0733 and 3285) ● Senuweegeleidingstudies (sien items 0733 en 3285) | 26 | 452.92 | 26 | 452.92 | 4 | | 325.68 +T |
| 14.3.1 | Nerve repair of suture ● Senuwee herstel van hegting | | | | | | | |
| 2767 | Suture Brachial Plexus (see also items 2837 and 2839) ● Hegting Brachiale Plexus (sien items 2837 en 2839) | 300 | 5 226.00 | 240 | 4 180.80 | 6 | | 488.52 +T |
| 2769 | Suture: Large nerve: Primary ● Hegting: Groot senuwee: Primêr | 134 | 2 334.28 | 120 | 2 090.40 | 5 | | 407.10 +T |
| 2771 | Suture: Large nerve: Secondary ● Hegting: Groot senuwee: Sekondêr | 202 | 3 518.84 | 161.60 | 2 815.07 | 5 | | 407.10 +T |
| 2773 | Suture: Digital nerve: Primary ● Hegting: Digitale senuwee: Primêr | 65 | 1 132.30 | 65 | 1 132.30 | 3 | | 244.26 +T |
| 2775 | Suture: Digital nerve: Secondary ● Hegting: Digitale senuwee: Sekondêr | 96 | 1 672.32 | 96 | 1 672.32 | 3 | | 244.26 +T |
| 2777 | Nerve graft: Simple ● Senuwee-transplantaat: Eenvoudig | 202 | 3 518.84 | 161.6 | 2 815.07 | 4 | | 325.68 +T |
| 2779 | Fascicular: First fasciculus ● Fassikulêr: Eerste fassikululus | 202 | 3 518.84 | 161.6 | 2 815.07 | 4 | | 325.68 +T |
| 2781 | Fascicular: Each additional fasciculus ● Fassikulêr: Elke bykomende fassikululus | 50 | 871.00 | 50 | 871.00 | 4 | | 325.68 +T |
| 2783 | Fascicular: Nerve flap: To include all stages ● Fassikulêr: Senuweeflap: Alle stadia ingesluit. | 224 | 3 902.08 | 179.2 | 3 121.66 | 4 | | 325.68 +T |
| 2787 | Fascicular: Grafting of facial nerve ● Fassikulêr: Oorplanting van nervus facialis | 215 | 3 745.30 | 172 | 2 996.24 | 5 | | 407.10 +T |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---|-------------------------|-----------|--|-----------|------------------------|--------|---|
| | U/E | R | U/E | R | U/E | R | T/M |
| 14.3.2 Neurectomy ● Neurektomie | | | | | | | |
| 2799 Intrathecal injections for pain ● Intratekale inspuitings vir pyn | 36 | 627.12 | 36 | 627.12 | 4 | 325.68 | +T |
| 2800 Plexus nerve block - as part of treatment refer to annexure c on the back of this gazette (motivation to be supplied by treating doctor) ● Pleksus senuweeblok - as deel van behandeling (motivering moet verskaf word deur verwysende dokter) | 36 | 627.12 | 36 | 627.12 | | | Fees as for specialist/Gelde soos vir spesialis |
| 2801 Epidural injection, plexus nerve block or peripheral nerve block for pain refer to annexure c on the back of this gazette, motivation to be supplied by treating doctor (see modifier 0045 for post-operative pain relief) (refer to modifier 0021 for epidural anaesthetic) ● Epidurale inspuiting, pleksus senuweeblok of perifere senuweeblok vir pyn (sien wysiger 0045 vir post-operatiewe pynverligting) (verwys na wysiger 0021 vir epidurale narkose) | 36 | 627.12 | 36 | 627.12 | | | |
| 2802 Peripheral nerve block - as part of treatment (motivation to be supplied) ● Perifere senuweeblok - as deel van behandeling (motivering moet verskaf word) | 25 | 435.50 | 25 | 435.50 | | | Fees as for specialist/Gelde soos vir spesialis |
| 2803 Alcohol injection in peripheral nerves for pain: Unilateral ● Alkohol inspuiting in perifere senuwees vir pyn: Unilateraal | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 2804 Inserting an indwelling nerve catheter (includes removal of catheter) (not for bolus technique) To be used only with items 2799, 2800, 2801 or 2802 ● Implasing van inblywende senuwee kateter (sluit verwydering van kateter in) (nie vir bolus tegniek) Slegs vir gebruik saam met items 2799, 2800, 2801 of 2802 | + 10 | 174.20 | 10 | 174.20 | | | Fees as for specialist/Gelde soos vir spesialis |
| 2805 Alcohol injection in peripheral nerves for pain: Bilateral ● Alkohol inspuiting in perifere senuwees vir pyn: Bilateraal | 35 | 609.70 | 35 | 609.70 | 3 | 244.26 | +T |
| 2809 Peripheral nerve section for pain ● Perifere senuwee-deursnyding vir pyn | 45 | 783.90 | 45 | 783.90 | 3 | 244.26 | +T |
| 2815 Excision interdigital neuroma - Morton ● Eksisie interdigitale neuroom - Morton | 82.3 | 1 433.67 | 82.3 | 1 433.67 | 3 | 244.26 | +T |
| 2825 Excision: Neuroma: Peripheral ● Eksisie: Neuroom: Perifeer | 109.5 | 1 907.49 | 109.5 | 1 907.49 | 3 | 244.26 | +T |
| 14.3.3 Other nerve procedures ● Ander senuwee prosedures | | | | | | | |
| 2827 Transposition of ulnar nerve ● Transposisionering van nervus ulnaris | 100 | 1 742.00 | 100 | 1 742.00 | 3 | 244.26 | +T |
| 2829 Neurolysis: Minor ● Neurolise: Klein | 51 | 888.42 | 51 | 888.42 | 3 | 244.26 | +T |
| 2831 Neurolysis: Major ● Neurolise: Groot | 132 | 2 299.44 | 120 | 2 090.40 | 3 | 244.26 | +T |
| 2833 Neurolysis: Digital ● Neurolise: Digitaal | 96 | 1 672.32 | 96 | 1 672.32 | 3 | 244.26 | +T |
| 2835 Scaleneotomy ● Skalenotomie | 132 | 2 299.44 | 120 | 2 090.40 | 6 | 488.52 | +T |
| 2837 Brachial plexus, suture or neurolysis (item 2767) ● Brachiaal pleksus, hegting of neurolise (item 2767) | 300 | 5 226.00 | 240 | 4 180.80 | 6 | 488.52 | +T |
| 2839 Total brachial plexus exposure with graft, neurolysis and transplantation ● Totale brachiaal pleksus blootlegging met oorplanting, neurolise en transplantaat | 895.2 | 15 594.38 | 716.16 | 12 475.51 | 6 | 488.52 | +T |
| 2841 Carpal Tunnel ● Karpaaltonnel | 64 | 1 114.88 | 64 | 1 114.88 | 3 | 244.26 | +T |
| 2843 Lumbar sympathectomy: Unilateral ● Lumbale simpatektomie: Unilateraal | 153 | 2 665.26 | 122.4 | 2 132.21 | 4 | 325.68 | +T |
| 2845 Lumbar sympathectomy: Bilateral ● Lumbale simpatektomie: Bilateraal | 268 | 4 668.56 | 214.4 | 3 734.85 | 6 | 488.52 | +T |
| 2849 Sympathetic block: Other levels: Unilateral ● Simpatiese senuweeblok: Ander vlakke: Unilateraal | 20 | 348.40 | 20 | 348.40 | 3 | 244.26 | +T |
| 2851 Sympathetic block: Other levels: Bilateral ● Simpatiese senuweeblok: Ander vlakke: Bilateraal | 35 | 609.70 | 35 | 609.70 | 3 | 244.26 | +T |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|--|-------------------------|-----------|--|----------|------------------------|---------|------|
| | U/E | R | U/E | R | U/E | R | T/M |
| 14.4 Skull procedures ● Skedelprosedures | | | | | | | |
| 2859 Repair of depressed fracture of skull: Without brain laceration: Major ● Herstel van ingedrewe skedelfraktuur: Sonder skeuring van harsings: Groot | 200 | 3 484.00 | 160 | 2 787.20 | 8 | 651.36 | +T |
| 2860 Repair of depressed fracture of skull: Without brain laceration: Small ● Herstel van ingedrewe skedelfraktuur: Sonder skeuring van harsings: Klein | 170 | 2 961.40 | 136 | 2 369.12 | 8 | 651.36 | +T |
| 2861 Repair of depressed fracture of skull: With brain lacerations: Small ● Herstel van ingedrewe skedelfraktuur: Met skeuring van harsings: Klein | 200 | 3 484.00 | 160 | 2 787.20 | 8 | 651.36 | +T |
| 2862 Repair of depressed fracture of skull: With brain lacerations: Major ● Herstel van ingedrewe skedelfraktuur: Met skeuring van harsings: Groot | 375 | 6 532.50 | 300 | 5 226.00 | 8 | 651.36 | +T |
| 2863 Cranioplasty ● Kranioplastie | 280 | 4 877.60 | 224 | 3 902.08 | 8 | 651.36 | +T |
| 2875 Theco-peritoneal C.S.F. shunt ● Teko-peritoneale S.S.V. kortsluiting | 280 | 4 877.60 | 224 | 3 902.08 | 8 | 651.36 | +T |
| 14.6 Aneurysm repair ● Aneurisme herstel | | | | | | | |
| 2876 Repair of aneurysm or arterio-venous anomalies (intracranial) ● Herstel van aneurisme of arterio-veneuse-anomalieë (intrakraniaal) | 700 | 12 194.00 | 560 | 9 755.20 | 15 | 1221.30 | +T |
| 14.7 Posterior fossa surgery ● Posterior fossa chirurgie | | | | | | | |
| 2879 Glosso-pharyngeal nerve ● Glosso-faringeale senuwee | 480 | 8 361.60 | 384 | 6 689.28 | 6 | 488.52 | +T |
| 2881 Eighth nerve: Intracranial ● Agtste kopsenuwee: Intrakraniaal | 480 | 8 361.60 | 384 | 6 689.28 | 8 | 651.36 | +T |
| 2887 Eighth nerve: Vestibular nerve ● Agtste kopsenuwee: Vestibulêre senuwee | 480 | 8 361.60 | 384 | 6 689.28 | 9 | 732.78 | +T |
| 14.7.1 Supratentorial procedures ● Supratentoriale prosedures | | | | | | | |
| 2899 Craniectomy for extra-dural haematoma or empyema ● Kraniëktomie weens ekstradurale hematoom of empieën | 375 | 6 532.50 | 300 | 5 226.00 | 11 | 895.62 | +T |
| 14.8 Craniotomy for ● Kraniotomie vir | | | | | | | |
| 2900 Extra-dural orbital decompression ● Ekstradurale orbitale dekompresie | 700 | 12 194.00 | 560 | 9 755.20 | 11 | 895.62 | +T |
| 2903 Abscess, glioma ● Abses, glioom | 450 | 7 839.00 | 360 | 6 271.20 | 11 | 895.62 | +T |
| 2904 Haematoma, foreign body: Cerebral or cerebellar ● Hematoom, vreemde voorwerpe: Serebraal of serebellêr | 450 | 7 839.00 | 360 | 6 271.20 | 11 | 895.62 | +T |
| 2905 Focal epilepsy: Excision of cortical scar ● Fokale epilepsie: Uitsnyding van kortikale litteken | 450 | 7 839.00 | 360 | 6 271.20 | 11 | 895.62 | +T |
| 2906 With anterior fossa meningocele and repair of bony skull defect ● Met herstel anterior fossa meningoseel en sluiting van benige skedeldefek | 375 | 6 532.50 | 300 | 5 226.00 | 11 | 895.62 | +T |
| 2909 CSF-leaks ● SSV-lekkasie | 450 | 7 839.00 | 360 | 6 271.20 | 11 | 895.62 | +T |
| 14.8.1 Stereo-tactic cerebral and spinal cord procedures ● Sterio-taktiese serebrale en rugmurg prosedures | | | | | | | |
| 2918 (code moved to consultation section/kode geskuif na konsultasie afdeling) | | | | | | | |
| 14.9 Spinal operations ● Spinale operasies | | | | | | | |
| 2923 Chordotomy: Unilateral ● Chordotomie: Unilateraal | 178 | 3 100.76 | 142.4 | 2 480.61 | 3 | 244.26 | +T+M |
| 2925 Chordotomy: Open ● Chordotomie: Oop | 350 | 6 097.00 | 280 | 4 877.60 | 3 | 244.26 | +T+M |
| 2927 Rhizotomy: Extradural, but intraspinal ● Risotomie: Extraduraal, rnaar intraspiniaal | 320 | 5 574.40 | 256 | 4 459.52 | 3 | 244.26 | +T+M |
| 2928 Rhizotomy: Intradural ● Risotomie: Intraduraal | 350 | 6 097.00 | 280 | 4 877.60 | 3 | 244.26 | +T+M |
| 2940 Lumbar osteophyte removal ● Lumbale osteofiet verwydering | 187 | 3 257.54 | 149.6 | 2 606.03 | 3 | 244.26 | +T+M |
| 2941 Cervical or thoracic osteophyte removal ● Servikale of torakale osteofiet verwydering | 285 | 4 964.70 | 228 | 3 971.76 | 3 | 244.26 | +T+M |
| 14.10 Arterial ligations ● Arteriële afbinding | | | | | | | |
| 2951 Carotis: Trauma ● Karotis: Trauma | 120 | 2 090.40 | 120 | 2 090.40 | 8 | 651.36 | +T |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|--|---------------------------|----------|--|--------|------------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| | Psychiatrist Psigiater | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
| | U/E | R | U/E | R | U/E | R | T/M |
| 14.11 Medical Psychotherapy ● Mediese Psigoterapie | | | | | | | |
| 2957 Individual psychotherapy (specific psychotherapy with approved evidence based method) - per short session (20 minutes) ● Individuele psigoterapie (spesifieke psigoterapie met goedgekeurde bewys metode) - per kort sessie (20 minute) | 20 | 348.40 | 16 | 278.72 | | | |
| 2974 Individual psychotherapy (specific psychotherapy with approved evidence based method) - per intermediate session (40 minutes) ● Individuele psigoterapie - (spesifieke psigoterapie met goedgekeurde bewys metode) per intermediêre sessie (40 minute) | 40 | 696.80 | 32 | 557.44 | | | |
| 2975 Individual psychotherapy (specific psychotherapy with approved evidence based method) - per extended session (60 minutes or longer) ● Individuele psigoterapie (spesifieke psigoterapie met goedgekeurde bewys metode) - per verlengde sessie (60 minute of langer) | 60 | 1 045.20 | 48 | 836.16 | | | |
| 2958 DELETED 2009: Psychoanalytic therapy - per 60-minute session ● GESKRAP 2009: Psigoanalitiese terapie - per 60-minute sessie | | | | | | | |
| 14.12 Physical treatment methods ● Fisiese behandelingsmetodes | | | | | | | |
| 2970 Electro-convulsive treatment (ECT) - each time (see rule Va) ● Elektro-konvulsiewe behandeling (EKB) - per keer (raadpleeg reël Va) | 17 | 296.14 | 17 | 296.14 | 3 | 244.26 | +T |
| 2971 Intravenous anti-depressive medication through infusion - per push in (maximum 1 push in per 24 hours) ● Binnearse anti-depressiewe medikasie deur infuus - per instoot (maksimum 1 instoot per 24 uur) | 6 | 104.52 | | | | | |
| 14.13 Psychiatric examination methods ● Psigiatriese ondersoekmetodes | | | | | | | |
| 2972 Narco-analysis (maximum of 3 sessions per treatment) - per session ● Narkoanalise (maksimum van 3 sessies per behandeling) - per sessie | 24 | 418.08 | | | | | |
| 2973 Psychometry by Psychiatrist (specify examination) - per session (maximum of 3 sessions per examination) ● Psigometrie deur Psigiater (spesifiseer ondersoek) - per sessie (maksimum van 3 sessies per ondersoek) | 24 | 418.08 | | | | | |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---------------|--|-------------------------|----------|--|----------|------------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
| | | U/E | R | U/E | R | U/E | R | T/M |
| 15. | GENERAL ● ALGEMEEN | | | | | | | |
| 3001 | Implantation of pellets (excluding cost of material) (excluding aftercare) ● Implantasie van pellets (koste van materiaal uitgesluit) (nasorg uitgesluit) | 3 | 52.26 | 3 | 52.26 | | | |
| 16. | EYE ● OOG | | | | | | | |
| 16.1 | Procedures performed in rooms ● Spreekkamerprosedures | | | | | | | |
| 16.1.1 | Eye investigations ● Oogondersoeke | | | | | | | |
| | Note: Not more than three (3) items in this section may be charged during one visit ● Opmerking: 'n Maksimum van drie (3) items uit hierdie afdeling mag gedurende een besoek gehef word. | | | | | | | |
| | Eye investigations and photography refer to one or both eyes except where otherwise indicated ● Oogondersoeke en fotografie verwys na een of albei oë, behalwe waar anders aangetoon | | | | | | | |
| | Material used is excluded ● Materiaal gebruik word uitgesluit The tariff for photography is not related to the number of photographs taken ● Die tarief vir fotografie het nie betrekking op die aantal foto's wat geneem word nie | | | | | | | |
| 3002 | Gonioscopy ● Gonioskopie | 7 | 121.94 | 7 | 121.94 | | | |
| 3003 | Fundus contact lens or 90D lens examination(not to be charged with item 3004 and/or item 3012) ● Fundus kontaklens of 90D lens ondersoek (mag nie gehef word saam met item 3004 en/of item 3012 nie) | 7 | 121.94 | 7 | 121.94 | | | |
| 3004 | Peripheral fundus examination with indirect ophthalmoscope (not to be charged with item 3003 and/or item 3012) ● Perifere fundus ondersoek met indirekte oftalmoskoop (mag nie gehef word saam met item 3003 en/of item 3012 nie. | 7 | 121.94 | 7 | 121.94 | | | |
| 3009 | Basic capital equipment used in own rooms by Ophthalmologists. Only to be charged at first and follow-up consultations. Not to be charged for post-operative follow-up consultations ● Basiese kapitaal apparaat gebruik in eie kamers deur oftalmoloë. Mag slegs tydens eerste en opvolgkonsultasies gehef word. Nie vir gebruik tydens na-operatiewe besoeke nie | + 11.68 | 203.47 | - | #VALUE! | | | |
| 3013 | Ocular motility assessment: Comprehensive examination ● Okulêre motiliteitsbepalings: Omvattende ondersoek | 12 | 209.04 | 12 | 209.04 | | | |
| 3014 | Tonometry per test with maximum of 2 tests for provocative tonometry (one or both eyes) ● Tonometrie per toets met maksimum van 2 toetse vir uitloktionometrie (een of albei oë) | 7 | 121.94 | 7 | 121.94 | | | |
| 3021 | Retinal function assessment including refraction after ocular surgery (within four months), maximum two examinations ● Retinafunksie-bepaling insluitend refraksie na okulêre chirurgie (binne vier maande), maksimum twee ondersoeke | 9 | 156.78 | 9 | 156.78 | | | - |
| 16.1.2 | Special eye investigations ● Spesiale oogondersoeke | | | | | | | |
| 3015 | Charting of visual field with manual perimeter ● Kartering van gesigsveld met manuele perimeter | 28 | 487.76 | 28 | 487.76 | | | |
| 3016 | Retinal threshold test without storage facilities ● Retina drempeltoets sonder bergingsfasiliteite | 30 | 522.60 | 30 | 522.60 | | | |
| 3017 | Retinal threshold test inclusive of computer disc storage for Delta or Statpak programs ● Retina drempeltoets insluitende rekenaarskyfberging vir Delta of Statpak programme | 74 | 1 289.08 | 74 | 1 289.08 | | | |
| 3018 | Retinal threshold trend evaluation (additional to 3017) ● Retina drempelverloop evaluasie (addisioneel tot 3017) | 16 | 278.72 | 16 | 278.72 | | | - |
| 3020 | Pachymetry: Only when own instrument is used, per eye. Only in addition to corneal surgery ● Pagimetrie: Alleenlik wanneer eie instrument gebruik word per oog. Alleenlik as toevoeging tot kornea chirurgie | 46 | 801.32 | 46 | 801.32 | | | - |
| 3025 | Electronic tonography ● Elektroniese tonografie | 19 | 330.98 | 19 | 330.98 | | | - |
| 3027 | Fundus photography ● Fundusfotografie | 21 | 365.82 | 21 | 365.82 | | | - |
| 3029 | Anterior segment microphotography ● Anterior-segment mikrofotografie | 21 | 365.82 | 21 | 365.82 | | | - |
| 3031 | Fluorescein angiography: One or both eyes ● Fluoresien angiografie: Een of beide oë | 45 | 783.90 | 45 | 783.90 | 4 | 325.68 | +T |
| 3032 | Eyelid and orbit photography ● Ooglid en orbit fotografie | 9 | 156.78 | 9 | 156.78 | | | - |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|---------------------------------|-------------------------|----------|--|----------|------------------------|---|---|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3033 | 15 | 261.30 | 15 | 261.30 | | | - |
| 3034 | 15 | 261.30 | 15 | 261.30 | | | - |
| 3035 | 22 | 383.24 | 22 | 383.24 | | | As per procedure/Soos per prosedure |
| 3036 | 36 | 627.12 | 36 | 627.12 | | | |
| 16.2 Retina ● Retina | | | | | | | |
| 3037 | 306.9 | 5 346.20 | 245.52 | 4 276.96 | 6 | | 488.52 +T |
| 3039 | 105 | 1 829.10 | 105 | 1 829.10 | 6 | | 488.52 +T |
| 3041 | 150 | 2 613.00 | 120 | 2 090.40 | 6 | | 488.52 +T |
| 3044 | 105 | 1 829.10 | 105 | 1 829.10 | 6 | | 488.52 +T |
| 16.3 Cataract ● Katarak | | | | | | | |
| 3045 | 210 | 3 658.20 | 168 | 2 926.56 | 7 | | 569.94 +T |
| 3047 | 210 | 3 658.20 | 168 | 2 926.56 | 7 | | 569.94 +T |
| 3049 | 57 | 992.94 | 57 | 992.94 | 7 | | 569.94 +T |
| 3050 | 171.10 | 2 980.56 | 136.88 | 2 384.45 | 7 | | 569.94 +T |
| 3051 | 130 | 2 264.60 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 3052 | 105 | 1 829.10 | 105 | 1 829.10 | 4 | | 325.68 +T |
| 3057 | 210 | 3 658.20 | 168 | 2 926.56 | 7 | | 569.94 +T |
| 3058 | 236 | 4 111.12 | 188.8 | 3 288.90 | 7 | | 569.94 +T |
| 3059 | 210 | 3 658.20 | 168 | 2 926.56 | 7 | | 569.94 +T |
| 3060 | 4 | 69.68 | | | | | |
| 16.4 Glaucoma ● Glaukoom | | | | | | | |
| 3061 | 247.6 | 4 313.19 | 198.08 | 3 450.55 | 6 | | 488.52 +T |
| 3062 | 60 | 1 045.20 | 60 | 1 045.20 | 6 | | 488.52 +T |
| 3063 | 105 | 1 829.10 | 105 | 1 829.10 | 6 | | 488.52 +T |
| 3064 | 105 | 1 829.10 | 105 | 1 829.10 | 6 | | 488.52 +T |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|------|---|-------------------------|----------|--|----------|------------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 3065 | Removal of blood anterior chamber ● Verwydering van bloed van voorste kamer | 105 | 1 829.10 | 105 | 1 829.10 | 4 | 325.68 | +T |
| 3067 | Goniotomy ● Goniotomie | 210 | 3 658.20 | 168 | 2 926.56 | 7 | 569.94 | +T |
| 16.5 | Intra-ocular foreign body ● Vreemde voorwerp in oog | | | | | | | |
| 3071 | Intra-ocular foreign body: Anterior to Iris ● Vreemde voorwerp in oog: Anterior tot die Iris | 127 | 2 212.34 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 3073 | Intra-ocular foreign body: Posterior to Iris (including prophylactic thermal treatment to retina) ● Vreemde voorwerp in oog: Posterior tot die Iris (profilaktiese hittebehandeling van retina ingesluit) | 210 | 3 658.20 | 168 | 2 926.56 | 6 | 488.52 | +T |
| 16.6 | Strabismus ● Strabismus | | | | | | | |
| 3075 | Strabismus (whether operation performed on one eye or both): Operation on one or two muscles ● Strabismus (hetsy operasie uitgevoer op een of albei oë): Operasie op een of twee spiere | 175.6 | 3 058.95 | 140.48 | 2 447.16 | 5 | 407.10 | +T |
| 3076 | Strabismus (whether operation performed on one eye or both): Operation on three or four muscles ● Strabismus (hetsy operasie uitgevoer op een of albei oë): Operasie op drie of vier spiere | 200 | 3 484.00 | 160 | 2 787.20 | 5 | 407.10 | +T |
| 3077 | Strabismus (whether operation performed on one eye or both): Subsequent operation one or two muscles ● Strabismus (hetsy operasie uitgevoer op een of albei oë): Daaropvolgende operasie een of twee spiere | 120 | 2 090.40 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 3078 | Strabismus (whether operation performed on one eye or both): Subsequent operation on three or four muscles ● Strabismus (hetsy operasie uitgevoer op een of albei oë): Daaropvolgende operasie op drie of vier spiere | 150 | 2 613.00 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 16.7 | Globe ● Oogbol | | | | | | | |
| 3080 | Examination of eyes under general anaesthetic where no surgery is done ● Ondersoek van oë onder algemene narkose waar 'n operasie nie gedoen word nie | 80 | 1 393.60 | 80 | 1 393.60 | 4 | 325.68 | +T |
| 3081 | Treatment of minor perforating injury ● Behandeling van minor perforasie besering. | 161.6 | 2 815.07 | 129.28 | 2 252.06 | 6 | 488.52 | +T |
| 3083 | Treatment of major perforating injury ● Behandeling van major perforasie besering. | 267.5 | 4 659.85 | 214 | 3 727.88 | 6 | 488.52 | +T |
| 3085 | Enucleation or Evisceration ● Enukleasie of Eviserasie | 105 | 1 829.10 | 105 | 1 829.10 | 5 | 407.10 | +T |
| 3087 | Enucleation or Evisceration with mobile implant: Excluding cost of implant and prosthesis ● Enukleasie of Eviserasie met beweeglike inplantstuk: Koste van inplantstuk en protese uitgesluit | 160 | 2 787.20 | 128 | 2 229.76 | 5 | 407.10 | +T |
| 3088 | Hydroxyapatite insertion (Additional to item 3087) ● Hidroksiapetite inplasing (Addisionele tot item 3087) | + 40 | 696.80 | 40 | 696.80 | 5 | 407.10 | +T |
| 3089 | Subconjunctival injection if not done at time of operation ● Subkonjunktivale inspuiting indien nie tydens operasie gedoen nie | 10 | 174.20 | 10 | 174.20 | 5 | 407.10 | +T |
| 3091 | Retrolbulbar injection (if not done at time of operation) ● Retrolbulbêre inspuiting (indien nie gedoen tydens operasie) | 16 | 278.72 | 16 | 278.72 | 4 | 325.68 | +T |
| 3092 | External laser treatment for superficial lesions ● Eksterne laser behandeling vir oppervlakkige letsels | 53 | 923.26 | 53 | 923.26 | | | |
| 3096 | Adding of air or gas in vitreous as a post-operative procedure or pneumoretinopexy ● Byvoeging van lug of gas in vitreous as 'n na-operatiewe prosedure of pneumoretinopeksie | 130 | 2 264.60 | 120 | 2 090.40 | 7 | 569.94 | +T |
| 3097 | Anterior vitrectomy ● Anterior vitrektomie | 280 | 4 877.60 | 224 | 3 902.08 | 6 | 488.52 | +T |
| 3098 | Removal of silicon from globe ● Verwydering van silikon uit oogbol | 280 | 4 877.60 | 224 | 3 902.08 | 6 | 488.52 | +T |
| 3099 | Posterior vitrectomy including anterior vitrectomy, encircling of globe and vitreous replacement ● Posteriorvitrektomie insluitende anterior vitrektomie omsirkeling van oogbol en vervanging van vitreus | 419 | 7 298.98 | 335.2 | 5 839.18 | 6 | 488.52 | +T |
| 3100 | Lensectomy done at time of posterior vitrectomy ● Lensektomie gedoen saam met posterior vitrektomie | 30 | 522.60 | 30 | 522.60 | 7 | 569.94 | +T |

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|--------------|--|-------------------------|----------|--|----------|------------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 16.8 | Orbit ● Oogkas | | | | | | | |
| 3101 | Drainage of orbital abscess ● Dreinerings van orbitale abses | 105 | 1 829.10 | 105 | 1 829.10 | 5 | 407.10 | +T |
| 3104 | Removal orbital prosthesis ● Verwydering orbitale prostese | 212.7 | 3 705.23 | 170.16 | 2 964.19 | 5 | 407.10 | +T |
| 3105 | Exenteration ● Eksenterasie | 275 | 4 790.50 | 220 | 3 832.40 | 5 | 407.10 | +T |
| 3107 | Orbitotomy requiring bone flap ● Orbitotomie wat beenflap vereis | 393 | 6 846.06 | 314.40 | 5 476.85 | 5 | 407.10 | +T |
| 3108 | Eye socket reconstruction ● Oogkasrekonstruksie | 206 | 3 588.52 | 164.8 | 2 870.82 | 5 | 407.10 | +T |
| 3109 | Hydroxyapatite implantation in eye cavity when evisceration or enucleation was done previously ● Hidroksiapatite inplanting wanneer ewisserasie of enukleasie reeds voorheen gedoen is | 300 | 5 226.00 | 240 | 4 180.80 | 5 | 407.10 | +T |
| 3110 | Second stage hydroxyapatite implantation ● Tweede stadium hidroksiapatite inplanting | 110 | 1 916.20 | 110 | 1 916.20 | 5 | 407.10 | +T |
| 16.9 | Cornea ● Kornea | | | | | | | |
| 3111 | Contact lenses: Assessment involving preliminary fittings and tolerance ● Kontaklensberaming: Aanvanklike passings en toleransie | * | #VALUE! | * | * | | | |
| 3113 | Fitting of contact lenses and instructions to patient: Includes eye examination, first fittings of the contact lenses and further post-fitting visits for one year ● Passing van kontaklense en instruksie aan die pasient: Oog-ondersoek, eerste aanpas van kontaklense en opvolgbesoeke vir een jaar ingeslote | 200 | 3 484.00 | 160 | 2 787.20 | | | |
| 3115 | 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 ● Passing van slegs een kontaklens en instruksies aan die pasient: Oog-ondersoek, eerste pas van kontaklens en opvolgbesoeke vir een jaar ingeslote | 166 | 2 891.72 | 132.8 | 2 313.38 | | | |
| 3116 | Astigmatic correction with T cuts or wedge resection in pathological corneal astigmatism following trauma, intra ocular surgery or penetrating keratoplasty ● Astigmatiese korreksie met T snitte of wig reseksie in patologiese korneale astigmatisme na trauma, intraokulêre chirurgie of korneale oorplanting. | 135.2 | 2 355.18 | 120 | 2 090.40 | 6 | 488.52 | +T |
| 3117 | Removal of foreign body: On the basis of fee per consultation ● Verwydering van vreemde voorwerp op die basis van gelde per konsultasie | | | | * | 4 | 325.68 | +T |
| 3118 | Curettage of cornea after removal of foreign body(aftercare excluded) ● Kurettasie van kornea na verwydering van vreemde voorwerp (nasorg uitgesluit) | 10 | 174.20 | 10 | 174.20 | | | |
| 3119 | Tattooing ● Tattoeëring | 26 | 452.92 | 26 | 452.92 | 4 | 325.68 | +T |
| 3121 | Corneal graft (Lamellar or full thickness) ● Korneale oorplanting (Lamellêrof volle dikte) | 289 | 5 034.38 | 231.2 | 4 027.50 | 6 | 488.52 | +T |
| 3123 | Insertion of intra-corneal or intrascleral prosthesis for refractive surgery ● Inplaas van intra/korneale of intrasklerale prostese vir refraktiewe chirurgie | 254 | 4 424.68 | 203.2 | 3 539.74 | 6 | 488.52 | +T |
| 3125 | Keratomy ● Keratektomie | 127 | 2 212.34 | 120 | 2 090.40 | 6 | 488.52 | +T |
| 3127 | Cauterization of Cornea (by chemical, thermal or cryotherapy methods) ● Kouterisasie van Kornea (deur chemiese, termale of krioterapie metodes) | 10 | 174.20 | 10 | 174.20 | 4 | 325.68 | +T |
| 3130 | Pterygium or conjunctival cyst. No conjunctival flap or graft used ● Pterigium of konjunktivale kiste. Geen konjunktivale flap of oorplanting. | 96.9 | 1 688.00 | 96.9 | 1 688.00 | 4 | 325.68 | +T |
| 3131 | Paracentesis ● Parasentese | 53 | 923.26 | 53 | 923.26 | 4 | 325.68 | +T |
| 3136 | Conjunctival flap or graft. Not for use with pterygium surgery I Konjunktivale flap of oorplanting. Nie vir gebruik tydens pterigium chirurgie nie. | 95.7 | 1 667.09 | 95.7 | 1 667.09 | 6 | 488.52 | +T |
| 16.10 | Ducts ● Buise | | | | | | | |
| 3133 | Probing and/or syringing, per duct ● Sondering en/of deurspoeling per buis | 10 | 174.20 | 10 | 174.20 | 4 | 325.68 | +T |
| 3135 | Insert polythene tubes/stent: Unilateral: Additional ● Inplasing van politeenbuis of stent: Unilateraal: Addisioneel | 51.8 | 902.36 | 51.8 | 902.36 | 4 | 325.68 | +T |
| 3137 | Excision of lacrimal sac: Unilateral ● Uitsnyding van traansak: Unilateraal | 132 | 2 299.44 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 3139 | Dacryocystorhinostomy (single) with or without polythene tube ● Dakriosistorinostomie (enkel) met of sonder politeenbuis | 210 | 3 658.20 | 168 | 2 926.56 | 5 | 407.10 | +T |
| 3141 | Sealing Punctum surgical/cautery per eye ● Toemaak van punktum chirurgies of met kouterisasie. Per oog. | 24.9 | 433.76 | 24.9 | 433.76 | 4 | 325.68 | +T |
| 3142 | Sealing Punctum with plugs.Per eye. ● Toemaak van punktum met proppie. Per oog | 20 | 348.40 | 20 | 348.40 | 4 | 325.68 | +T |
| 3143 | Three-snip operation ● Driesnit-operasie | 10 | 174.20 | 10 | 174.20 | 4 | 325.68 | +T |
| 3145 | Repair of caniculus: Primary procedure ● Herstel van kanalikulus: Primêre prosedure | 132 | 2 299.44 | 120 | 2 090.40 | 4 | 325.68 | +T |

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| | | U/E | R | U/E | R | U/E | R | T/M |
| 3147 | Repair of caniculus: Secondary procedure ● Herstel van kanalikulus: Sekondêre prosedure | 175 | 3 048.50 | 140 | 2 438.80 | 4 | | 325.68 +T |
| 16.11 | Iris ● Iris | | | | | | | |
| 3149 | Iridectomy or iridotomy by open operation as isolated procedure ● Iridektomie of iridotomie met oop operasie as geïsoleerde prosedure | 132 | 2 299.44 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 3153 | Iridectomy or iridotomy by laser or photocoagulation as isolated procedure (maximum one procedure) ● Iridektomie of iridotomie met laser of fotokoagulasie as geïsoleerde prosedur (maksimum een prosedure) | 105 | 1 829.10 | 105 | 1 829.10 | 4 | | 325.68 +T |
| 3157 | Division of anterior synechiae as isolated procedure ● Verdeling van anterior sinegieë as geïsoleerde prosedure | 132 | 2 299.44 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 3158 | Repair iris as in dialysis. Anterior chamber reconstruction. I Herstel van iris soos in dialise. Anterior segment rekonstruksie | 142.4 | 2 480.61 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 16.12 | Lids ● Ooglede | | | | | | | |
| 3161 | Tarsorrhaphy ● Tarsorrafie | 47 | 818.74 | 47 | 818.74 | 4 | | 325.68 +T |
| 3165 | Repair of skin laceration of the lid. Simple ● Herstel van vellaserasie van die ooglid. Eenvoudig. | 27.3 | 475.57 | 27.3 | 475.57 | 4 | | 325.68 +T |
| 3176 | Lid operation for facial nerve paralysis including tarsorrhaphy but excluding cost of material ● Ooglidoperasie vir fasiale senuwêverlamming, tarsorrafie ingesluit maar koste van materiaal uitgesluit | 187 | 3 257.54 | 149.6 | 2 606.03 | 4 | | 325.68 +T |
| 16.12.1 | Entropion or ectropion by ● Entropion of ektropion d.m.v. | | | | | | | |
| 3177 | Entropion or ectropion by cautery ● Entropion of ektropion d.m.v. kouterisasie | 10 | 174.20 | 10 | 174.20 | 4 | | 325.68 +T |
| 3179 | Entropion or ectropion by suture ● Entropion of ektropion d.m.v. hegting | 49.4 | 860.55 | 49.4 | 860.55 | 4 | | 325.68 +T |
| 3181 | Entropion or ectropion by open operation ● Entropion of ektropion d.m.v. oop operasie | 111.5 | 1 942.33 | 111.5 | 1 942.33 | 4 | | 325.68 +T |
| 3183 | Entropion or ectropion by free skin, mucosal grafting or flap ● Entropion of ektropion d.m.v. vry vel, slymvlies oorplanting of flap | 122.6 | 2 135.69 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 16.12.2 | Reconstruction of eyelid ● Rekonstruksie van ooglid | | | | | | | |
| 3185 | Staged procedure for partial or total loss of eyelid: First stage ● Prosedures vir gedeeltelike of volledige verlies van ooglid: Eerste stadium | 259 | 4 511.78 | 207.2 | 3 609.42 | 4 | | 325.68 +T |
| 3187 | Staged procedure for partial or total loss of eyelid: Subsequent stage ● Prosedures vir gedeeltelike of volledige verlies van ooglid: Daaropvolgende stadium | 206 | 3 588.52 | 164.8 | 2 870.82 | 4 | | 325.68 +T |
| 3189 | Full thickness eyelid laceration for injury: Direct repair ● Volle dikte ooglid laserasie as gevolg van besering: Direkte herstel | 136.5 | 2 377.83 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 3172 | Blepharoplasty lower eyelid plus fat pad. I Blefaroplastie onderste ooglid met vet kussinkie. | 125.80 | 2 191.44 | 120 | 2 090.40 | 4 | | 325.68 +T |
| 3191 | Blepharoplasty: Upper lid for improvement in function (unilateral) ● Blefaroplastie: Boonste ooglid om funksie te verbeter. (unilateraal) | 150.2 | 2 616.48 | 120.16 | 2 093.19 | 4 | | 325.68 +T |

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|---|-------------------------|----------|--|----------|------------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 16.12.3 Ptois ● Ptose | | | | | | | |
| 3193 Repair by superior rectus, levator or frontalis muscle operation I Herstel deur middel van superior rektus, ligspier of frontalespier operasie | 190 | 3 309.80 | 152 | 2 647.84 | 4 | 325.68 | +T |
| 3195 Ptois: By lesser procedure, e.g. sling operation: Unilateral ● Ptose d.m.v. enige kleiner operasies, bv. draagbandoperasie: Unilateraal | 137.6 | 2 396.99 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 3197 Ptois: By lesser procedure, e.g. sling operation: Bilateral ● Ptose d.m.v. enige kleiner operasies, bv. draagbandoperasie: Bilateraal | 166 | 2 891.72 | 132.8 | 2 313.38 | 4 | 325.68 | +T |
| 16.13 Conjunctiva ● Konjunktiva | | | | | | | |
| 3199 Repair of conjunctiva by grafting ● Herstel van konjunktiva deur oorplanting | 132 | 2 299.44 | 120 | 2 090.40 | 4 | 325.68 | +T |
| 3200 Repair of lacerated conjunctiva ● Herstel van laserasie van konjunktiva | 47 | 818.74 | 47 | 818.74 | 4 | 325.68 | +T |
| 16.14 General ● Algemeen | | | | | | | |
| 3196 Diamond knife: Use of own diamond knife during intraocular surgery ● Diamantmes: Gebruik van eie diamantmes gedurende intraokulêre chirurgie | 12 | 209.04 | | | | | |
| 3198 Eximer laser: Hire fee ● Eksimer laser: Verhuringsgelde | 284.13 | 4 949.54 | | | | | |
| 3201 Laser apparatus (ophthalmic): hire fee for one or both eyes treated in one sitting (not to be used with IOL master) ● Laser apparaat (optalmies): verhuringsgelde vir een of beide oë in een sitting behandel (Nie vir gebruik met IOL Master) | 109 | 1 898.78 | | | | | |
| 3202 PHAKO emulsification apparatus (hire fee) ● FAKO emulsifiseringsapparaat (verhuringsgelde) | 109 | 1 898.78 | | | | | |
| 3203 Vitrectomy apparatus (hire fee) ● Vitrektomie apparaat (verhuringsgelde) | 120 | 2 090.40 | | | | | - |
| 17. EAR ● OOR | | | | | | | |
| 17.1 External Ear (Pinna) ● Eksterne Oor (Oorskulp) | | | | | | | |
| 3271 Partial or total reconstruction for traumatic absence or following tumour excision of external ear (fee according to arrangement) ● Gedeeltelike of algehele rekonstruksie van uitwendige oor vir traumatiese afwesigheid (fooi volgens ooreenkoms) | | #VALUE! | | | | | - |
| 17.2 External ear canal ● Uitwendige gehoorgang | | | | | | | |
| 3204 Removal of foreign body at rooms with the use of a microscope (excludes loupe) - not to be used combined with item 3206 ● Verwydering van vreemde voorwerp in spreekkamer met die gebruik van 'n mikroskoop (ver grootglas uitgesluit) - moet nie saam met item 3206 gebruik word nie | 21.58 | 375.92 | | | | | |
| 3205 External ear canal: Removal of foreign body: Under general anaesthetic ● Uitwendige gehoorkanaal: Verwydering van vreemde voorwerp: Onder algemene narkose | 21 | 365.82 | 21 | 365.82 | 4 | 325.68 | +T |
| 3215 Meatus atresia: Repair of stenosis of cartilaginous portion ● Meatus-atresie: Herstel van stenose van kraakbenige deel | 164 | 2 856.88 | 131.2 | 2 285.50 | 4 | 325.68 | +T |
| 3219 Meatus atresia: Removal of osteoma from meatus: Solitary ● Meatus-atresie: Verwyder van enkele meatale osteoom | 77 | 1 341.34 | 77 | 1 341.34 | 4 | 325.68 | +T |
| 3220 Debridement mastoidectomy cavity with the use of a microscope (excludes loupe) - not to be used combined with item 3206 ● Debridement van mastoidektomie holte met die gebruik van 'n mikroskoop (ver grootglas uitgesluit) - moet nie saam met item 3206 gebruik word nie | 23.14 | 403.10 | 23.14 | 403.10 | | | |
| 3221 Removal of osteoma from meatus: Multiple ● Verwydering van veelvuldige meatale osteome | 215 | 3 745.30 | 172 | 2 996.24 | 4 | 325.68 | +T |
| 17.3 Middle ear ● Middeloor | | | | | | | |
| 3209 Bilateral myringotomy ● Bilaterale miringotomie | 46 | 801.32 | 46 | 801.32 | 4 | 325.68 | +T |
| 3211 Unilateral myringotomy with insertion ventilation tube ● Unilaterale miringotomie met inplaas van ventilasie buis | 38 | 661.96 | 38 | 661.96 | 4 | 325.68 | +T |
| 3212 Bilateral myringotomy with insertion ventilation tube ● Bilaterale miringotomie met inplaas van ventilasiebuis | 57 | 992.94 | 57 | 992.94 | 4 | 325.68 | +T |

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|--|-------------------------|----------|--|----------|------------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 3214 Reconstruction of middle ear ossicles (ossiculoplasty) I Rekonstruksie van middeloor ossikels (ossikulêre rekonstruksie) | 255 | 4 442.10 | 204 | 3 553.68 | 5 | 407.10 | +T |
| 3237 Exploratory tympanotomy ● Eksploratiewe timpanotomie | 158.9 | 2 768.04 | 127.12 | 2 214.43 | 5 | 407.10 | +T |
| 3243 Myringoplasty ● Miringoplastie | 138 | 2 403.96 | 120 | 2 090.40 | 5 | 407.10 | +T |
| 3245 Functional reconstruction of tympanic membrane ● Funksionele rekonstruksie van timpaniese membraan | 277 | 4 825.34 | 221.6 | 3 860.27 | 5 | 407.10 | +T |
| 3264 Tympanomastoidectomy ● Timpanomastoïdektomie | 375 | 6 532.50 | 300 | 5 226.00 | 5 | 407.10 | +T |
| 3265 Reconstruction of posterior canal wall, following radical mastoidectomy ● Rekonstruksie van posterior wand van die kanaal, na radikale mastoïdektomie | 320 | 5 574.40 | 256 | 4 459.52 | 5 | 407.10 | +T |
| 17.4 Facial nerve ● Fasiaalissenuwee | | | | | | | |
| 17.4.1 Facial nerve tests ● Fasiaalissenuweetoetse | | | | | | | |
| 3223 Percutaneous stimulation of the facial nerve ● Perkutane stimulasie van die fasiaalissenuwee | 9 | 156.78 | 9 | 156.78 | 4 | 325.68 | +T |
| 3224 Electroneurography (ENOG) ● Elektroneurografie (ENOG) | 75 | 1 306.50 | 75 | 1 306.50 | 4 | 325.68 | +T |
| 17.4.2 Facial nerve surgery ● Fasiaalissenuwee chirurgie | | | | | | | |
| 3227 Exploration of facial nerve: Exploration of tympano mastoid segment ● Blootlegging van nervus facialis: Blootlegging van die timpanomastoïd segment | 297 | 5 173.74 | 237.6 | 4 138.99 | 5 | 407.10 | +T |
| 3228 Exploration of facial nerve: Grafting of the tympano mastoid segment (including item 3227) ● Blootlegging van nervus facialis: Oorplanting van die timpanomastoïd segment (insluitende item 3227) | 436 | 7 595.12 | 348.8 | 6 076.10 | 5 | 407.10 | +T |
| 3230 Exploration of facial nerve: Extratemporal grafting of the facial nerve ● Blootlegging van nervus facialis: Ekstratemporale oorplanting van die fasiaalissenuwee | 436 | 7 595.12 | 348.8 | 6 076.10 | 5 | 407.10 | +T |
| 3232 Exploration of facial nerve: Facio-assessory or facio-hypoglossal anastomosis ● Blootlegging van nervus facialis: Fasio-akessortese of fasio-hipoglossale anastomose | 124 | 2 160.08 | 120 | 2 090.40 | 6 | 488.52 | +T |
| 17.5 Inner ear ● Binne-oor | | | | | | | |
| 17.5.1 Audiometry ● Oudiometrie | | | | | | | |
| 3273 Pure tone audiometry (air conduction) ● Suiwer toon oudiometrie (luggeleiding) | 6.5 | 113.23 | 6.5 | 113.23 | | | |
| 3274 Pure tone audiometry (bone conduction with masking) ● Suiwer toon oudiometrie (beengeleiding met maskering) | 6.5 | 113.23 | 6.5 | 113.23 | | | |
| 3275 Impedance audiometry (tympanometry) ● Impedansie oudiometrie (timpanometrie) | 6.5 | 113.23 | 6.5 | 113.23 | | | |
| 3277 Speech audiometry: Fee includes speech audiogram, speech reception threshold, discrimination score I Spraak oudiometrie: Gelde sluit in spraak audiogram, spraak ontvangsdrempel, diskrimineringsstelling | 10 | 174.20 | 10 | 174.20 | | | |
| 17.5.2 Balance tests ● Balanstoetse | | | | | | | |
| 3260 Computerized static posturography consists of standing a patient on a Piezo-electric platform which tests the vestibular and proprioceptive systems I Gerekenariseerde statiese bewegingsondersoeke met 'n pasiënt in 'n staande posisie op 'n Piezo-elektriese platform wat die vestibulêre en proprioseptiewe stelsels toets | 71.48 | 1 245.18 | 71.48 | 1 245.18 | | | |
| 3251 Minimal calorie test (excluding consultation fee) ● Minimale kalorietoets (konsultasie uitgesluit) | 10 | 174.20 | 10 | 174.20 | | | |
| 3253 Electro-nystagmography for spontaneous and positional nystagmus ● Elektro-nistagmografiese ondersoeke vir spontane en posisie nistagmus | 25 | 435.50 | 25 | 435.50 | | | |
| 3255 Calorie test done with electro-nystagmography ● Kaloriese toets met elektro-nistagmografie | 70 | 1 219.40 | 70 | 1 219.40 | | | |
| 3256 Video nystagmoscopy (binocular) ● Videonistagmoskopie (binokulêr) | 50 | 871.00 | 50 | 871.00 | | | |
| 3258 Otolith repositioning manoeuvre ● Otoliet herposisionering maneuver | 14 | 243.88 | 14 | 243.88 | 4 | 325.68 | +T |

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|---|-------------------------|-----------|--|--|------------------------|----------------------------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 17.6 Microsurgery of the skull base ● Mikrochirurgie van die skedelbasis | | | | | | | |
| 17.6.1 Middle fossa approach (i.e. transtemporal or supralabyrinthine) ● Middelfossatoegang (d.i. transtemporaaal of supralabirintien) | | | | | | | |
| 3229 Facial nerve: Exploration of the labyrinthine segment ● Fasiälissenuwee: Eksplorasié van die labirintiene segment | 420 | 7 316.40 | 336 | 5 853.12 | 5 | 407.10 | +T |
| 5221 Facial nerve: Grafting of labyrinthine segment (graft removal and exploration of labyrinthine segment are included) ● Fasiälissenuwee: Oorplanting van die labirintiene segment (verwydering van oorplantingsweefsel en eksplorasié van die labirintiene segment ingesluit) | 510 | 8 884.20 | 408 | 7 107.36 | 11 | 895.62 | +T |
| 5222 Facial nerve surgery inside the internal auditory canal (if grafting is required, the grafting and harvesting of graft are included) ● Fasiälissenuwee-chirurgie binne die inwendige gehoorgang (indien oorplanting benodig word, is die oorplanting en weefselverwydering ingesluit) | 620 | 10 800.40 | 496 | 8 640.32 | 11 | 895.62 | +T |
| 17.6.2 Translabirintine approach ● Translabirintiene toegang | | | | | | | |
| 5229 Facial nerve surgery in the internal auditory canal, translabirintine (if grafting is required, the grafting and harvesting are included) ● Chirurgie van die fasiälissenuwee in die inwendige gehoorgang, translabirintiene toegang (indien oorplanting benodig word is die weefselverwydering en oorplanting ingesluit) | 660 | 11 497.20 | 528 | 9 197.76 | 11 | 895.62 | +T |
| 17.6.7 Subtotal petrosectomy ● Subtotale petrosektomie | | | | | | | |
| 5247 Subtotal petrosectomy for CSF leak and/or for total obliteration of the mastoid cavity Subtotale petrosektomie vir SSV-lek en/of obliterasié van die mastoidholte | 480 | 8 361.60 | 384 | 6 689.28 | 11 | 895.62 | +T |
| | | | Confined to specialist in Physical Medicine Beperk tot spesialiste in Fisiese Geneeskunde | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | |
| | | | | | | | |
| | | | | | | | |
| 18. PHYSICAL TREATMENT ● FISIESE BEHANDELING | | | | | | | |
| 3279 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) ● Domisilêre of Verpleeginrigtings behandeling (alleenlik van toepassing waar dit vir die pasient fisies onmoontlik is om na die spreekkamer te kom, en die apparaat na die pasient vervoer moet word) | + | 0.75 | 13.07 | | | | |
| 3280 Consultation units for specialists in physical medicine when treatment is given (per treatment) ● Konsultasie-eenhede vir spesialiste in fisiese geneeskunde wanneer behandelings gegee word (per behandeling) | | 13.5 | 235.17 | | | | |
| 3281 Ultrasonic therapy ● Ultrasoniese terapie | | 10 | 174.20 | | | | |
| 3282 Shortwave diathermy ● Kortgolf diatermie | | 10 | 174.20 | | | | |
| 3284 Sensory nerve conduction studies ● Bestudering van geleiding deur sensoriese senuwee | | 31 | 540.02 | | | | |
| 3285 Motor nerve conduction studies ● Motoriese senuwee studies | | 26 | 452.92 | | | | |
| 3287 Spinal joint and ligament injection ● Spinale gewrigs- en ligament inspuiting. | | 20 | 348.40 | 20 | 348.40 | | |
| 3288 Epidural injection ● Epidurale inspuiting | | 36 | 627.12 | | | | |
| 3289 Multiple injections - First joint ● Veelvuldige inspuitings - eerste gewrig | | 7.5 | 130.65 | | | | |
| 3290 Each additional joint ● Elke daaropvolgende gewrig | | 4.5 | 78.39 | | | | |
| 3291 Tendon or ligament injection ● Pees of ligament inspuiting | | 9 | 156.78 | | | | |
| 3292 Aspiration of joint or interarticular injection ● Aspirasié van gewrig of intra artikulêre inspuiting | | 9 | 156.78 | | | | |
| 3293 Aspiration or injection of bursa or ganglion ● Aspirasié of inspuiting in die bursa of ganglion | | 9 | 156.78 | | | | |
| 3294 Paracervical (neck) nerve block ● Paraservikale (nek) senuweeblok | | 20 | 348.40 | 20 | 348.40 | | |
| 3295 Paravertebral root block - unilateral ● Paravertebrale wortelblok - unilateraal | | 20 | 348.40 | | - | | |
| 3296 Paravertebral root block - bilateral ● Paravertebrale wortelblok - bilateraal | | 30 | 522.60 | | | | |

| | | Specialist Spesialis | | General practitioner Algemene Praktisyn | | Anaesthetic Narkose | | |
|------|---|-------------------------|----------|--|--------|------------------------|---|---|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 3297 | Manipulation of spine performed by a specialist in Physical Medicine ● Manipulasie van die spinale kolom deur spesialis in Fisiese Medisyne | 14 | 243.88 | | | | | |
| 3298 | Spinal traction ● Traksie van die spinale kolom | 6 | 104.52 | | | | | |
| 3299 | Manipulation large joint under general anaesthetic (not subject to rule G) (Modifier 0005 not applicable) ● Manipulasie van groot gewrig onder algemene narkose (nie onderhewig aan reël G nie) (Wysiger 0005 nie van toepassing) | 14 | 243.88 | 14 | 243.88 | 4 3 | | 325.68 Hip+T 244.26 Knee / Shoulder + T |
| 3300 | Manipulation of large joints without anaesthetic ● Manipulasie van die groot gewrigte sonder narkose | * | #VALUE! | * | * | | | |
| 3301 | Muscle fatigue studies ● Spier uitputting studies | 20 | 348.40 | | | | | |
| 3302 | Strength duration curve per session ● Kragduur-kromme per sessie | 10.5 | 182.91 | | | | | |
| 3303 | Electromyography ● Elektromiografie | 75 | 1 306.50 | | | | | |
| 3304 | 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 rules L and M) ● Alle ander fisiese behandeling uitgevoer: Bedrag vir behandeling in sy geheel: Spesifiseer behandeling (Vir opvolgbehandelings deur 'n algemene praktisyn vir dieselfde toestand binne 4 maande na inisiële behandeling: Slegs gelde vir die behandeling is van toepassing: Sien reëls L en M) | 10 | 174.20 | 10 | 174.20 | | | |

| | Specialist Radiologist Spesialis Radioloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|---|---|----------|--|--------|---------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 19. RADIOLOGY ● RADIOLOGIE The amounts in this section are calculated according to the Radiology unit values (unless otherwise specified) ● Die bedrae in hierdie afdeling word volgens die Radiologie eenheidswaardes bereken (tensy anders gespesifiseer) | | | | | | | |
| 19.1 Skeleton ● Skelet | | | | | | | |
| 19.1.1 Limbs ● Ledemate | | | | | | | |
| 3305 Finger, toe ● Vinger, toon | 9.5 | 173.09 | 6.3 | 114.79 | | | |
| 6500 Hand ● Hand | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6501 Wrist (specify region) ● Polsgewrig (spesifiseer streek) | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6503 Scaphoid ● Skafoied | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6504 Radius and Ulna ● Radius en ulna | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6505 Elbow ● Elmboog | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6506 Humerus ● Humerus | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6507 Shoulder ● Skouer | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6508 Acromio-Clavicular joint ● Akromio-klavikulêre gewrig | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6509 Clavicle ● Clavikel | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6510 Scapula ● Skapula | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6511 Foot ● Voet | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6512 Ankle ● Enkel | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6513 Calcaneus ● Kalkaneus | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6514 Tibia and fibula ● Tibia en fibula | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6515 Knee ● Knie | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6516 Patella ● Patella | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6517 Femur ● Femur | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6518 Hip ● Heup | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 6519 Sesamoid Bone ● Sesamoiedbeen | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 3309 Smith-Petersen or equivalent controle, in theatre ● Smith Petersen of ekwivalente kontrole, in teater | 58 | 1 056.76 | 38.7 | 705.11 | | | |
| 3311 Stress studies, e.g. joint ● Spanningsopnames, bv. gewrig | 11.6 | 211.35 | 7.7 | 140.29 | | | |
| 3313 Full length study, both legs ● Volle lengte opnames, beide bene | 23.2 | 422.70 | 15.5 | 282.41 | | | |
| 3317 Skeletal survey ● Skeletopname | 42 | 765.24 | 28 | 510.16 | | | |
| 3319 Arthrography per joint ● Artografie per gewrig | 23.1 | 420.88 | 15.4 | 280.59 | | | |
| 3320 Introduction of contrast medium or air: Add ● Insit van kontrasmedium of lug: Voeg by | 20.7 | 377.15 | 13.8 | 251.44 | | | |
| 19.1.2 Spinal column ● Werwelkolom | | | | | | | |
| 3321 Per region, cervical, sacral, coccygeal, one region thoracic ● Per streek, bv. nek, sakrum, koksiks, een streek torakaal | 16.6 | 302.45 | 11 | 200.42 | | | |
| 3325 Stress studies ● Spanningsopname | 16.6 | 302.45 | 11 | 200.42 | | | |
| 3331 Pelvis (Sacro-iliac or hip joints to be added where an extra set of views is required) ● Bekken (ilio-sakrale gewrigte of heupe word slegs bygetel wanneer 'n aparte stel opnames van die addisionele gebied vereis word) | 16.6 | 302.45 | 11 | 200.42 | | | |
| 3333 Myelography: Lumbar ● Miëlografie: Lumbaal | 43.3 | 788.93 | 28.9 | 526.56 | 4 | 325.68 | +T |
| 3334 Myelography: Thoracic ● Miëlografie: Torakaal | 33.3 | 606.73 | 22.2 | 404.48 | 4 | 325.68 | +T |
| 3335 Myelography: Servical ● Miëlografie: Servikaal | 53.3 | 971.13 | 35.5 | 646.81 | 4 | 325.68 | +T |
| 3336 Multiple (lumbar, thoracic, cervical): Same fee as for first segment (no additional introduction of contrast medium) ● Veelvuldig (lumbaal, torakaal en servikaal): Dieselfde gelde as vir eerste segment (geen bykomende insit van kontrasmedium) | | | | | 4 | 325.68 | +T |
| 3344 Introduction of contrast medium ● Insit van kontrasmedium | 28.1 | 511.98 | 18.7 | 340.71 | | | |
| 3345 Discography ● Diskografie | 51.9 | 945.62 | 34.6 | 630.41 | 4 | 325.68 | +T |
| 3347 Introduction of contrast medium per disc level: Add ● Insit van kontrasmedium per diskus vlak: Voeg by | 42.3 | 770.71 | 28.2 | 513.80 | | | - |

| | | Specialist Radiologist Spesialis Radioloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyne | | Anaesthetic Narkose | | |
|---------------|---|---|--------|--|--------|---------------------|---|-----------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 19.1.3 | Skull ● Skedel | | | | | | | |
| 3349 | Skull studies ● Skedelstudies | 23.5 | 428.17 | 15.7 | 286.05 | | | |
| 3351 | Paranasal sinuses ● Paranasale sinusse | 16.5 | 300.63 | 11 | 200.42 | | | |
| 3353 | Facial bones and/or orbits ● Aangesigsbene en/of oogholtes | 18.9 | 344.36 | 12.6 | 229.57 | | | |
| 3355 | Mandible ● Mandibula | 14.1 | 256.90 | 9.4 | 171.27 | | | |
| 3357 | Nasal bone ● Nasale been | 11.7 | 213.17 | 7.8 | 142.12 | | | |
| 3359 | Mastoid: Bilateral ● Mastroïed: Bilateraal | 27 | 491.94 | 18 | 327.96 | | | |
| 3361 | Teeth: One quadrant ● Tande: Een kwadrant | 5.5 | 100.21 | 3.7 | 67.41 | | | |
| 3363 | Teeth: Two quadrants ● Tande: Twee kwadrante | 9.5 | 173.09 | 6.3 | 114.79 | | | |
| 3365 | Teeth: Full mouth ● Tande: Volle mond | 16.5 | 300.63 | 11 | 200.42 | | | |
| 3366 | Teeth: Rotation tomography of the teeth and jaws ● Tande: Rotasietomografie van die kaak en tande | 20 | 364.40 | 13.3 | 242.33 | | | |
| 3367 | Teeth:Temporo-mandibular joints: Per side ● Tande:Temporo-mandibulêre gewrigte: Per kant | 16.5 | 300.63 | 11 | 200.42 | | | |
| 3369 | Teeth:Tomography: Per side ● Tande: Tomografie: Per kant | 16.5 | 300.63 | 11 | 200.42 | | | |
| 3371 | Localisation of foreign body in the eye ● Lokalisering van vreemde voorwerp in die oog | 23.5 | 428.17 | 15.7 | 286.05 | | | |
| 3381 | Ventriculography ● Ventrikulografie | 40.9 | 745.20 | 27.3 | 497.41 | 4 | | 325.68 +T |
| 3385 | Post-nasal studies: Lateral neck ● Post-nasale studies: Laterale nek | 9.5 | 173.09 | 6.3 | 114.79 | | | |
| 3387 | Maxillo-facial cephalometry ● Maksillofasiale kefalometrie | 13.2 | 240.50 | 8.8 | 160.34 | | | |
| 3389 | Dacrocystography ● Dakrosistografie | 16.55 | 301.54 | 11 | 200.42 | 4 | | 325.68 +T |
| 3391 | For introduction of contrast medium add ● Vir insit van kontrasmedium voeg by | + 16.55 | 301.54 | 11 | 200.42 | | | |
| 19.2 | Alimentary tract ● Spysverteringskanaal | | | | | | | |
| 3393 | Bowel washout: Add ● Dermspoeling:Voeg by | + 7.2 | 131.18 | 4.8 | 87.46 | | | |
| 3395 | Sialography (plus 80% for each additional gland) ● Sialografie (plus 80% vir elke bykomende klier) | 19 | 346.18 | 12.7 | 231.39 | 4 | | 325.68 +T |
| 3397 | Introduction of contrast medium (plus 80% for each additional gland - add) ● Insit van kontrasmedium (plus 80% vir elke bykomende klier - voeg by) | + 16.6 | 302.45 | 11 | 200.42 | | | |
| 3399 | Pharynx and oesophagus ● Farinks en oesofagus | 19 | 346.18 | 12.7 | 231.39 | | | |
| 3403 | Oesophagus, stomach and duodenum (control film of abdomen included) and limited follow through ● Oesofagus, maag en duodenum (Oorsigfoto van die buik ingesluit) en beperkte deurvolging | 30 | 546.60 | 20 | 364.40 | | | |
| 3405 | Double contrast: Add ● Dubbel kontras: Voeg by | + 11 | 200.42 | 7.3 | 133.01 | | | |
| 3406 | Small bowel meal (control film of abdomen included except when part of item 3408) ● Dundermmaal (Oorsigfoto van die buik ingesluit tensy deel van item 3408) | 30 | 546.60 | 20 | 364.40 | | | |
| 3408 | Barium meal and dedicated gastro-intestinal tract follow through (including control film of the abdomen, oesophagus, duodenum, small bowel and colon) ● Barium maal en toegewyde gastroïntestinale kanaal deurvolging (insluitend kontrole film van die buik, oesofagus, maag, duodenum en kolon) | 43.3 | 788.93 | 28.9 | 526.56 | | | |
| 3409 | Barium enema (control film of abdomen included) ● Barium kliesma (oorsigfoto van die buik ingesluit) | 27.5 | 501.05 | 18.3 | 333.43 | | | |
| 3411 | Air contrast study (add) ● Lug-kontrasstudie (voeg by) | + 29 | 528.38 | 19.3 | 351.65 | | | |
| 3416 | Pancreas: ERCP hospital equipment: Choledogram and/ or pancreatography screening included ● Pankreas: ERCP hospitaal toerusting: Choledogram en/of pancreatografie deurligting ingesluit | 23.3 | 424.53 | 15.5 | 282.41 | 4 | | 325.68 +T |
| | Note: For items 3415 and 3416: Endoscopy (See item 1778) | | | | | | | |
| | Opmerking: Vir items 3415 en 3416: Endoskopie (sien item 1778) | | | | | | | |
| 3417 | Gastric/oesophageal/duodenal intubation control ● Gastriese/esofageale/duodenale intubasie-kontrole | 8.8 | 160.34 | 5.9 | 107.50 | | | |
| 3419 | Gastric/oesophageal intubation insertion of tube (add) ● Gastriese/esofageale intubasie insit van buis (voeg by) | + 8.4 | 153.05 | 5.6 | 102.03 | | | |

| | | Specialist Radiologist Spesialis Radioloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|------|---|---|------|--|------|---------------------|---|-----------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 3421 | Duodenal intubation: Insertion of tube (add) ● Duodenale intubasie: Insit van buis (voeg by) | + | 16.5 | 300.63 | 11 | 200.42 | | |
| 3423 | Hypotonic duodenography (3403 and 3405 included) (add) ● Hipotoniese duodenografie (3403 en 3405 ingesluit) (voeg by) | + | 44 | 801.68 | 29.3 | 533.85 | | |
| 19.3 | Biliary tract ● Galweë | | | | | | | |
| 3427 | Cholangiography: Intravenous ● Cholangiografie: Intraveneus | | 33 | 601.26 | 22 | 400.84 | | |
| 3431 | Operative Cholangiography: First series: Add item 3607 only when the Radiologist attends personally in the theatre ● Operatief Cholangiografie: Eerste reeks: Voeg item 3607 slegs by as die Radioloog self in die teater teenwoordig is | | 31.6 | 575.75 | 21 | 382.62 | | |
| 3433 | Post-operative: T-Tube ● Post-operatief: T-Buis | | 25 | 455.50 | 16.7 | 304.27 | | |
| 3435 | Introduction of contrast medium (add) ● Insit van kontrasmedium (voeg by) | + | 8.4 | 153.05 | 5.6 | 102.03 | | |
| 3437 | Trans hepatic, percutaneous ● Transhepaties, perkutaan | | 27.5 | 501.05 | 18.3 | 333.43 | | |
| 3439 | Introduction of contrast medium (add) ● Insit van kontrasmedium (voeg by) | + | 49.7 | 905.53 | 33.1 | 603.08 | | |
| 3441 | Tomography of biliary tract (add) ● Tomografie van galweë (voeg by) | + | 14.1 | 256.90 | 9.4 | 171.27 | | |
| 19.4 | Chest ● Borskas | | | | | | | |
| 3443 | Larynx (Tomography included) ● Larinks (Tomografie ingesluit) | | 18.8 | 342.54 | 12.5 | 227.75 | | |
| 3445 | Chest (item 3601 included) ● Borskas (item 3601 ingesluit) | | 14.1 | 256.90 | 9.4 | 171.27 | | |
| 3447 | Chest and cardiac studies (item 3601 included) ● Borskas en hartstudies (item 3601 ingesluit) | | 18.9 | 344.36 | 12.6 | 229.57 | | |
| 3449 | Ribs ● Ribbes | | 18.5 | 337.07 | 12.3 | 224.11 | | |
| 3451 | Sternum or sternoclavicular joints ● Sternum of sternoklavikulêre gewigte | | 18.9 | 344.36 | 12.6 | 229.57 | | |
| 3453 | Bronchography: Unilateral ● Brongografie: Unilateraal | | 18.9 | 344.36 | 12.6 | 229.57 | 8 | 651.36 +T |
| 3455 | Bronchography: Bilateral ● Brongografie: Bilateraal | | 33.1 | 603.08 | 22.1 | 402.66 | 8 | 651.36 +T |
| 3457 | Introduction of contrast medium included ● Insit van kontrasmedium ingesluit | | 53.6 | 976.59 | 35.7 | 650.45 | | |
| 3461 | Pleurography ● Pleurografie | | 18.9 | 344.36 | 12.6 | 229.57 | 3 | 244.26 +T |
| 3463 | For introduction of contrast medium: Add ● Vir insit van kontrasmedium: Voeg by | + | 4.2 | 76.52 | 2.8 | 51.02 | | |
| 3465 | Laryngography ● Laringografie | | 16.5 | 300.63 | 11 | 200.42 | | |
| 3467 | For introduction of contrast medium: Add ● Vir insit van kontrasmedium: Voeg by | + | 15 | 273.30 | 10 | 182.20 | | |
| 3468 | Thoracic Inlet ● Toraksinlaat | | 9.5 | 173.09 | 6.3 | 114.79 | | |
| 19.5 | Abdomen ● Buik | | | | | | | |
| 3477 | Control films of the abdomen (not being part of examination for barium meal, barium enema, pyelogram, cholecystogram, cholangiogram etc.) ● Oorsigfoto van die Buik (wat nie deel vorm van bv bariummaal, bariumkliesma, piëlogram, cholesistogram of cholangiogram ensovoorts nie) | | 14.1 | 256.90 | 9.4 | 171.27 | | |
| 3479 | Acute abdomen or equivalent studies ● Akute buikstudies of ekwivalente opnames | | 23.5 | 428.17 | 15.7 | 286.05 | | |
| 19.6 | Urinary tract ● Urinewëë | | | | | | | |
| 3487 | Escretory urogram: Control film included and bladder views before and after micturition (intravenous pyelogram) (item 0206 not applicable) ● Uitskeidingsurogram: Oorsigfoto ingesluit, asook blaasopnames voor en na lediging (binnearse piëlogram) (item 0206 nie van toepassing nie) | | 37.6 | 685.07 | 25.1 | 457.32 | | |
| 3493 | Waterload test: Add ● Hidrasie-toets: Voeg by | + | 18.3 | 333.43 | 12.2 | 222.28 | | |
| 3497 | Cystography only or urethrography only (retrograde) ● Sistografie alleen of uretrografie alleen (retrograad) | | 29 | 528.38 | 19.3 | 351.65 | | |
| 3499 | Cysto-urethrography: Retrograde ● Sisto-uretrografie: Retrograad | | 47.8 | 870.92 | 31.9 | 581.22 | | |

| | | Specialist Radiologist Spesialis Radioloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | | |
|--------|---|---|------|--|-------|---------------------|---|--------|----|
| | | U/E | R | U/E | R | U/E | R | T/M | |
| 3503 | Cysto-urethrography: Introduction of contrast medium: Add ● Sisto-uretrografie: Insit van kontrasmedium: Voeg by | + | 5.5 | 100.21 | 3.7 | 67.41 | | | |
| 3505 | Retrograde-prograde pyelography ● Piëlografie retrograad-prograad | | 27.5 | 501.05 | 18.3 | 333.43 | 3 | 244.26 | +T |
| 3511 | Aspiration renal cyst ● Aspirasie nier sist | | 27.6 | 502.87 | 18.4 | 335.25 | | | |
| 3513 | Tomography of renal tract: Add ● Tomografie van nierweë: Voeg by | + | 14.1 | 256.90 | 9.4 | 171.27 | | | |
| 19.8.1 | Vascular Studies ● Vaskulêre Studies | | | | | | | | |
| 3536 | Dedicated angiography suite: Analogue monoplane unit. Once off charge per patiën by owner of equipment ● Toegewyde angiografie suite: Analoë enkelvlak eenheid: Eenmalige heffing per pasiënt deur eienaar van toerusting | | 315 | 5 739.30 | | | | | |
| 3537 | Dedicated angiography suite: Digital monoplane unit: Once off charge per patient by owner of equipment ● Toegewyde angiografie suite: Digitale enkelvlak eenheid: Eenmalige heffing per pasiënt deur eienaar van toerusting | | 617 | 11 241.74 | | | | | |
| 3538 | Dedicated angiography suite: Analogue bi-plane unit: Once off charge per patient by owner of equipment ● Toegewyde angiografie suite: Analoë dubbelvlak eenheid: Eenmalige heffing per pasiënt deur eienaar van toerusting | | 693 | 12 626.46 | | | | | |
| 3539 | Dedicated angiography suite: Digital bi-plane unit: Once off charge per patient by owner of equipment ● Toegewyde angiografie suite: Digitale dubbelvlak eenheid: Eenmalige heffing per pasiënt deur eienaar van toerusting | | 829 | 15 104.38 | | | | | |
| 3545 | Venography: Per limb ● Venografie: Per ledemaat | | 27.5 | 501.05 | 16.5 | 300.63 | | | |
| 3548 | Analogue monoplane screening table ● Analoë enkelvlak deurligtingstafel | | 272 | 4 955.84 | | | | | |
| 3550 | Digital monoplane screening table ● Digitale enkelvlak deurligtingstafel | | 530 | 9 656.60 | | | | | |
| 3557 | Catheterisation aorta or vena cava, any level, any route, with aortogram/cavogram ● Kateterisasie aorta of vena cava, enige vlak, enige roete, met aortogram/cavogram | | 81 | 1 475.82 | 48.6 | 885.49 | 4 | 325.68 | +T |
| 3558 | Translumbar aortic puncture, with full study ● Translumbale aortiese punksie, met volle studie | | 116 | 2 113.52 | 69.6 | 1 268.11 | 5 | 407.10 | +T |
| 3559 | Selective first order catheterisation, arterial or venous, with angiogram/venogram ● Selektiewe eerste orde kateterisasie, arterieel of veneus, met angiogram/venogram | | 95 | 1 730.90 | 57 | 1 038.54 | 4 | 325.68 | +T |
| 3560 | Selective second order catheterisation, arterial or venous, with angiogram/venogram ● Selektiewe tweede orde kateterisasie, arterieel of veneus, met angiogram/venogram | | 109 | 1 985.98 | 65.4 | 1 191.59 | 4 | 325.68 | +T |
| 3562 | Selective third order catheterisation, arterial or venous, with angiogram/venogram ● Selektiewe derde orde kateterisasie, arterieel of veneus, met angiogram/venogram | | 122 | 2 222.84 | 73.2 | 1 333.70 | 4 | 325.68 | +T |
| 3566 | Guiding catheter placement, any site arterial or venous, for any intracranial procedure or arteriovenous malformation (AVM) ● Gids kateter plasing, enige plek arterieel of veneus, vir enige intrakraniale prosedure of arteriovenouse malformasie (AVM) | | 143 | 2 605.46 | 85.8 | 1 563.28 | 5 | 407.10 | +T |
| 3570 | Microcatheter insertion, any cranial vessel and/or pulmonary vessel, arterial or venous (including guiding catheter placement) ● Mikrokateter inplasing, enige kranale vat en/of pulmonêre vat, arterieel of veneus (insluitende gids kateter plasing) | | 218 | 3 971.96 | 130.8 | 2 383.18 | 5 | 407.10 | +T |
| 3572 | Transcatheter selective blood sampling, arterial or venous ● Transkateter selektiewe bloedmonstername, arterieel of veneus | | 54 | 983.88 | 32.4 | 590.33 | | | |
| 3574 | Spinal angiogram (global fee) including all selective catheterisations ● Spinale angiogram (globale gelde) alle selektiewe kateterisasies ingesluit | | 800 | 14 576.00 | 480 | 8 745.60 | 5 | 407.10 | +T |

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|---|---|----------|--|--------|---------------------|--------|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 19.8.2 Introduction of contrast medium ● Inplasing van kontrasmedium | | | | | | | |
| 3563 Direct intravenous for limb: Add ● Direkte intraveneuse inplasing in ledemaat: Voeg by | 11.1 | 202.24 | 7.4 | 134.83 | | | |
| 3564 Direct femoral arterial or venous or jugular venous puncture ● Direkte femorale arteriële of veneuse of jugulêre veneuse punksie | 62 | 1 129.64 | 37.2 | 677.78 | | | |
| 3575 "Cut-downs" for venography: Add ● Insnyding vir venografie: Voeg by | 16.55 | 301.54 | 11 | 200.42 | | | |
| 19.9 Tomography and Cinematography ● Tomografie en Sinematografie | | | | | | | |
| 3577 Tomography (conventional except where otherwise specified): Add 100% of the fee provided that if it is more than one dimension, fee shall be charged for the additional investigation at 50% of the tariff with a maximum of two additional investigations ● Tomografie (konvensioneel behalwe waar anders vermeld): Voeg 100% van die tarief by, met dien verstande dat indien tomografie in meer as een vlak gedoen word gelde vir die addisionele ondersoek teen 50% van die tarief bereken sal word met 'n maksimum van twee addisionele ondersoek. | | | | | | | |
| 3579 Tomography (multi-dimensional in motion): Add 150% of the fee ● Tomografie (met beweging in meer as een dimensie): Voeg 150% van die tarief by | | #VALUE! | | | | | |
| 3581 Cinematography: For first series: Add 100% of the fee ● Kinematografie: Vir eerste reeks: Voeg 100% van die tarief by | | | | | | | |
| 3583 Cinematography: For each series after the first: Add 80% of the primary fee ● Kinematografie: Vir tweede en elke volgende reeks: Voeg by 80% | | | | | | | |
| 19.9.1 Computed Tomography ● Rekenaartomografie The amounts in this section are calculated according to the Computed Tomography unit values (unless otherwise specified) ● Die bedrae in hierdie afdeling word volgens die Rekenaartomografie eenheidswaardes bereken (tensy anders gespesifiseer) | | | | | | | |
| 6400 Plus Spiral CT ● Plus Spirale RT | 50 | 875.50 | | | | | |
| 6401 Plus 3D reconstruction ● Plus 3D rekonstruksie | 50 | 875.50 | | | | | |
| 6402 Plus high resolution study ● Plus hoë resoluë studie | 50 | 875.50 | | | | | |
| 6403 CT limb without contrast ● RT ledemaat ongekontrasteerd | 200 | 3 502.00 | | | 5 | 407.10 | +T |
| 6404 CT limb with contrast only ● RT ledemaat met kontras alleenlik | 200 | 3 502.00 | | | 5 | 407.10 | +T |
| 6405 CT Limb pre AND post contrast ● RT ledemaat voor EN na kontras | 250 | 4 377.50 | | | 5 | 407.10 | +T |
| 6406 CT joint without contrast ● RT gewrig ongekontrasteerd | 200 | 3 502.00 | | | 5 | 407.10 | +T |
| 6407 CT joint with contrast only ● RT gewrig met kontras alleenlik | 200 | 3 502.00 | | | 5 | 407.10 | +T |
| 6408 CT joint pre AND post contrast ● RT gewrig voor EN na kontras | 250 | 4 377.50 | | | 5 | 407.10 | +T |
| 6409 CT brain without contrast (including posterior fossa) ● RT brein ongekontrasteerd (insluitend posterior fossa) | 210 | 3 677.10 | | | 5 | 407.10 | +T |
| 6410 CT brain with contrast only (including posterior fossa) ● RT brein met kontras alleenlik (insluitend posterior fossa) | 210 | 3 677.10 | | | 5 | 407.10 | +T |
| 6411 CT brain pre AND post contrast (including posterior fossa) ● RT brein voor EN na kontras (insluitend posterior fossa) | 265 | 4 640.15 | | | 5 | 407.10 | +T |
| 6412 CT orbits complete study, axial OR coronal, without contrast ● RT oogkaste volledige studie, aksiaal OF koronaal, ongekontrasteerd | 160 | 2 801.60 | | | 5 | 407.10 | +T |
| 6413 CT orbits complete study, axial AND coronal, without contrast ● RT oogkaste volledige studie, aksiaal EN koronaal, ongekontrasteerd | 210 | 3 677.10 | | | 5 | 407.10 | +T |

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| | | U/E | R | U/E | R | U/E | R | T/M |
| 6414 | CT orbits complete study, axial OR coronal pre AND post contrast ● RT oogkaste volledige studie, aksiaal OF koronaal voor EN na kontras | 215 | 3 764.65 | | | 5 | 407.10 | +T |
| 6415 | CT orbits complete study, axial AND coronal pre AND post contrast ● RT oogkaste volledige studie, aksiaal EN koronaal voor EN na kontras | 265 | 4 640.15 | | | 5 | 407.10 | +T |
| 6416 | CT paranasal sinuses limited study axial OR coronal ● RT paranasale sinusse beperkte studie, aksiaal OF koronaal | 50 | 875.50 | | | 5 | 407.10 | +T |
| 6417 | CT paranasal sinuses limited study axial AND coronal ● RT paranasale sinusse beperkte studie aksiaal EN koronaal | 100 | 1 751.00 | | | 5 | 407.10 | +T |
| 6418 | CT paranasal sinuses complete study, axial OR coronal, without contrast ● RT paranasale sinuses volledige studie, aksiaal OF koronaal, ongekontrasteerd | 160 | 2 801.60 | | | 5 | 407.10 | +T |
| 6419 | CT paranasal sinuses complete study, axial AND coronal, without contrast ● RT paranasale sinuses volledige studie, aksiaal EN koronaal, ongekontrasteerd | 210 | 3 677.10 | | | 5 | 407.10 | +T |
| 6420 | CT paranasal sinuses complete study, axial OR coronal, pre AND post contrast ● RT paranasale sinuses volledige studie, aksiaal OF koronaal, voor EN na kontras | 215 | 3 764.65 | | | 5 | 407.10 | +T |
| 6421 | CT paranasal sinuses complete study, axial AND coronal, pre AND post contrast ● RT paranasale sinuses volledige studie, aksiaal EN koronaal, voor EN na kontras | 260 | 4 552.60 | | | 5 | 407.10 | +T |
| 6422 | CT pituitary fossa, without contrast ● RT pituitêre fossa, ongekontrasteerd | 160 | 2 801.60 | | | 5 | 407.10 | +T |
| 6423 | CT pituitary fossa, pre AND post contrast ● RT pituitêre fossa, voor EN na kontras | 210 | 3 677.10 | | | 5 | 407.10 | +T |
| 6424 | CT internal auditory meati, without contrast ● RT binneorkanale, ongekontrasteerd | 100 | 1 751.00 | | | 5 | 407.10 | +T |
| 6425 | CT internal auditory meati, pre AND post contrast ● RT binneorkanale, voor EN na kontras | 150 | 2 626.50 | | | 5 | 407.10 | +T |
| 6426 | CT mastoids ● RT mastoïede | 100 | 1 751.00 | | | 5 | 407.10 | +T |
| 6427 | CT ear structures, limited study ● RT oor struktuur, beperkte studie | 100 | 1 751.00 | | | 5 | 407.10 | +T |
| 6428 | CT middle AND inner ear, complete study including reconstructions ● RT middel- EN binne-oor, volledige studie insluitend rekonstruksies | 310 | 5 428.10 | | | 5 | 407.10 | +T |
| 6429 | CT facial bones ● RT gesigsbene | 210 | 3 677.10 | | | 5 | 407.10 | +T |
| 6430 | CT neck soft tissue, without contrast ● RT nek sagteweefsel, ongekontrasteerd | 185 | 3 239.35 | | | 5 | 407.10 | +T |
| 6431 | CT neck soft tissue with contrast only ● RT nek sagteweefsel met kontras alleenlik | 185 | 3 239.35 | | | 5 | 407.10 | +T |
| 6432 | CT neck pre AND post contrast ● RT nek voor EN na kontras | 235 | 4 114.85 | | | 5 | 407.10 | +T |
| 6433 | CT cervical spine without contrast ● RT servikale werwels ongekontrasteerd | 300 | 5 253.00 | | | 5 | 407.10 | +T |
| 6434 | CT cervical spine pre AND post contrast ● RT servikale werwels voor EN na kontras | 350 | 6 128.50 | | | 5 | 407.10 | +T |
| 6435 | CT cervical spine post myelogram ● RT servikale werwels post-miëlogram | 150 | 2 626.50 | | | 5 | 407.10 | +T |
| 6436 | CT dorsal spine without contrast ● RT torakale werwels ongekontrasteerd | 300 | 5 253.00 | | | 5 | 407.10 | +T |
| 6437 | CT dorsal spine pre AND post contrast ● RT torakale werwels voor EN na kontras | 350 | 6 128.50 | | | 5 | 407.10 | +T |
| 6438 | CT dorsal spine post myelogram ● RT torakale werwels post-miëlogram | 150 | 2 626.50 | | | 5 | 407.10 | +T |
| 6439 | CT lumbar spine without contrast ● RT lumbale werwels ongekontrasteerd | 300 | 5 253.00 | | | 5 | 407.10 | +T |
| 6440 | CT lumbar spine pre AND post contrast ● RT lumbale werwels voor EN na kontras | 350 | 6 128.50 | | | 5 | 407.10 | +T |
| 6441 | CT lumbar spine post myelogram ● RT lumbale werwels post-miëlogram | 150 | 2 626.50 | | | 5 | 407.10 | +T |
| 6442 | CT pelvimetry (topogram only) ● RT pelvimetrie (topogram alleenlik) | 50 | 875.50 | | | 5 | 407.10 | +T |

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|------|--|---|-----------|--|---|---------------------|-----------|
| | | U/E | R | U/E | R | U/E | R T/M |
| 6443 | CT chest without contrast ● RT borskas ongekontrasteerd | 235 | 4 114.85 | | | 5 | 407.10 +T |
| 6444 | CT chest with contrast ● RT borskas met kontras | 235 | 4 114.85 | | | 5 | 407.10 +T |
| 6445 | CT chest pre AND post contrast ● RT borskas voor EN na kontras | 285 | 4 990.35 | | | 5 | 407.10 +T |
| 6446 | CT chest high resolution lungs, limited study ● RT borskas hoë resoluție lange, beperkte studie | 100 | 1 751.00 | | | 5 | 407.10 +T |
| 6447 | CT high resolution lungs, complete study ● RT hoë resoluție lange, volledige studie | 235 | 4 114.85 | | | 5 | 407.10 +T |
| 6448 | CT abdomen without contrast ● RT buik ongekontrasteerd | 215 | 3 764.65 | | | 5 | 407.10 +T |
| 6449 | CT abdomen with contrast ● RT buik met kontras | 215 | 3 764.65 | | | 5 | 407.10 +T |
| 6450 | CT abdomen pre AND post contrast ● RT buik voor EN na kontras | 265 | 4 640.15 | | | 5 | 407.10 +T |
| 6451 | CT abdomen triphasic study ● RT buik trifasiese studie | 315 | 5 515.65 | | | 5 | 407.10 +T |
| 6452 | CT pelvis without contrast ● RT bekken ongekontrasteerd | 215 | 3 764.65 | | | 5 | 407.10 +T |
| 6453 | CT pelvis with contrast ● RT bekken met kontras | 215 | 3 764.65 | | | 5 | 407.10 +T |
| 6454 | CT pelvis pre AND post contrast ● RT bekken voor EN na kontras | 265 | 4 640.15 | | | 5 | 407.10 +T |
| 6455 | CT abdomen AND pelvis without contrast ● RT buik EN bekken ongekontrasteerd | 315 | 5 515.65 | | | 5 | 407.10 +T |
| 6456 | CT abdomen AND pelvis with contrast ● RT buik EN bekken met kontras | 315 | 5 515.65 | | | 5 | 407.10 +T |
| 6457 | CT abdomen AND pelvis pre AND post contrast ● RT buik EN bekken voor EN na kontras | 365 | 6 391.15 | | | 5 | 407.10 +T |
| 6458 | CT chest, abdomen AND pelvis with contrast ● RT borskas, buik EN bekken met kontras | 545 | 9 542.95 | | | 5 | 407.10 +T |
| 6459 | CT base of skull to symphysis pubis with contrast ● RT skedelbasis tot simfise pubis met kontras | 735 | 12 869.85 | | | 5 | 407.10 +T |
| 6460 | CT for dental implants maxilla OR mandible ● RT vir tandinplantings maksilla OF mandible | 250 | 4 377.50 | | | 5 | 407.10 +T |
| 6461 | CT for dental implants maxilla AND mandible ● RT vir tandinplantings maksilla EN mandible | 500 | 8 755.00 | | | 5 | 407.10 +T |
| 6462 | CT angiography per limited region (including spiral, high resolution AND all reconstructions) ● RT angiografie per beperkte gebied (insluitend spiral, hoë resoluție EN alle rekonstruksies) | 515 | 9 017.65 | | | 5 | 407.10 +T |
| 6463 | CT angiography per extensive region (including spiral, high resolution, 3D AND all other reconstructions) ● RT angiografie per ekstensiewe gebied (insluitend spiral, hoë resoluție, 3D en alle rekonstruksies) | 615 | 10 768.65 | | | 5 | 407.10 +T |
| 6464 | CT limited study any region, Region to be identified on the account ● RT beperkte studie enige gebied, Gebied moet aangedui word op rekening. | 50 | 875.50 | | | 5 | 407.10 +T |
| 6465 | CT guidance for aspiration, biopsy or drainage ● RT begeleiding vir aspirasie, biopsie of dreinasie | 100 | 1 751.00 | | | 11 | 895.62 +T |
| 6466 | CT guidance for aspiration at time of CT diagnostic study ● RT begeleiding vir aspirasie, ten tye van RT diagnostiese studie | 50 | 875.50 | | | 5 | 407.10 +T |
| 6467 | CT stereotactic localisation for biopsy ● RT stereotaktiese lokalisasie vir biopsie | 150 | 2 626.50 | | | 11 | 895.62 +T |
| 6468 | CT for radiotherapy planning (not to be used as an add-on) ● RT vir radioterapie beplanning (mag nie as 'n byvoeging gebruik word nie) | 160 | 2 801.60 | | | | |
| 6469 | Quantitative CT for bone mineral density ● Kwantitatiewe RT vir beëndigtheid | 97 | 1 698.47 | | | | |
| 3592 | Where a fully digital C-arm portable x-ray unit, with angiography/interventional capability is used in hospital or theatre, per half hour ● Waar 'n volledige digitale C-arm mobiele x-straaleenheid, met angiografie/intervensieel kapasiteit soos gebruik in hospitaal of teater, per halfuur. | 47 | 856.34 | | | | |

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|-------|--|---|------|---|------|---------------------|---|-----------|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 3597 | Contrast media. ● Kontrasmiddels. | | | | | | | |
| 19.10 | Miscellaneous ● Diverse | | | | | | | |
| 3601 | Fluoroscopy: Per half hour: Add (not applicable for items 3445 and 3447) ● Fluoroskopie: Per halfuur: Voeg by (nie van toepassing op items 3445 en 3447) | + | 11.6 | 211.35 | 7.7 | 140.29 | | |
| 3602 | Where a C-arm portable X-ray unit is used in hospital or theatre: Per half hour: Add ● Waar 'n C-arm mobiele röntgeneenheid in die hospitaal of teater gebruik word: Per half-uur: Voeg by | + | 16 | 291.52 | 10.7 | 194.95 | | |
| 3603 | Sinography ● Sinografie | | 27.7 | 504.69 | 18.4 | 335.25 | | |
| 3600 | Peripheral bone densitometry utilizing ionizing radiation ● Perifere been digtheidstoeting met gebruik van ioniserende bestraling | | 13 | 236.86 | 13 | 236.86 | | |
| 3604 | Bone densitometry (to be charged once only for one or more levels done at the same session) ● Beëndigheidsmeting (word slegs eenmalig geëis vir een of meer vlakke gedoen tydens dieselfde sessie) | | 77 | 1 402.94 | 77 | 1 402.94 | | |
| 3607 | 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 (Only to be used by radiological technical staff) ● Teenwoordigheid by operasie in teater of by radiologiese prosedure uitgevoer deur 'n chirurg of internis in X-straal-afdeling (behalwe item 3309): Per halfuur: Plus gelde vir ondersoek gedoen (Mag slegs deur die radiologiese tegniese personeel gehef word) | | 8.4 | 153.05 | 5.6 | 102.03 | | |
| 3609 | Foreign body localisation: Fee for part examined plus two-thirds for every additional series and add fluoroscopy fee if this is done ● Bepaling van ligging van vreemde voorwerp: Tarief vir deel wat ondersoek is, plus twee derdes vir elke bykomstige reeks, voeg by tarief vir fluoroskopie indien dit uitgevoer word | | | | | | | |
| 3611 | Foreign body localisation: Introduction of sterile needle markers: Add ● Bepaling van ligging: Vreemde voorwerp, met inplasing van steriele naaldmerkers: Voeg by | + | 16.5 | 300.63 | 11 | 200.42 | | |
| 3613 | Setting of sterile trays ● Stel van steriele blaaië | | 3.3 | 60.13 | 3.3 | 60.13 | | |
| 5034 | Fine needle aspiration or biopsy ● Aspirasie of biopsie deur middel van 'n fyn naald | | 25 | 455.50 | 25 | 455.50 | 6 | 488.52 +T |
| 19.11 | Ultrasonic investigations ● Ultrasoniese ondersoeke The amounts in this section are calculated according to the Ultrasound unit values (unless otherwise specified) ● Die bedrae in hierdie afdeling word volgens die Ultraklank eenheidswaardes bereken (tensy anders gespesifiseer) | | | | | | | |
| 3612 | Ultrasonic bone densitometry ● Ultrasoniese beëndigheidsmeting | | 19 | 327.18 | 19 | 327.18 | | |
| 3619 | 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 ● Intravaskulêre ultrasoniese beelding evalueer die aterosklerotiese proses om die terapeutiese intervensies te lei. Hierdie item mag eenmaal toegepas word per vaat (linker voorafdalende tak verspreiding, sirkumfleks verspreiding en/of regter koronêre verspreiding) waarin 'n stent of veelvuldige stents geplaas word. | | 30 | 516.60 | 30 | 516.60 | 9 | 732.78 +T |
| 3596 | Intravascular ultrasound per case, arterial or venous, for intervention ● Intravaskulêre ultraklank per geval, arterieel of veneus, vir intervensie | | 30 | 516.60 | 30 | 516.60 | | |

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|------|---|---|-----------|--|----------|---------------------|-------|
| | | U/E | R | U/E | R | U/E | R T/M |
| 3621 | Cardiac examination (M. Mode) ● Eggo kardiografie (M. Mode) | 25 | 430.50 | 25 | 430.50 | | |
| 3622 | Cardiac examination: 2 Dimensional ● Eggo kardiografie: 2 Dimensioneel | 50 | 861.00 | 50 | 861.00 | | |
| 3623 | Cardiac examination+effort: Add ● Eggo kardiografie +inspanning:Voeg by | + | 10 172.20 | 10 | 172.20 | | |
| 3624 | Cardiac examination+contrast: Add ● Eggo kardiografie +kontras: Voeg by | + | 10 172.20 | 10 | 172.20 | | |
| 3625 | Cardiac examinations + doppler ● Eggo kardiografie + doppler | 50 | 861.00 | 50 | 861.00 | | |
| 3626 | Cardiac examinations + phonocardiography: Add ● Eggo kardiografie + fonokardiografie: Voeg by | + | 10 172.20 | 10 | 172.20 | | |
| 3627 | Ultrasound examination includes whole abdomen and pelvic organs, where pelvic organs are clinically indicated (including liver, gall bladder, spleen, pancreas, abdominal vascular anatomy, para-aortic area, renal tract, pelvic organs) ● Ultraklank ondersoek van hele buik en bekkenorgane, indien bekkenorgane klinies aangedui is (insluitende lewer, galblaas, milt, pankreas, abdominale vasculere anotomie, para-aortiese area, urienweë, bekkenorgane.) | 60 | 1 033.20 | 60 | 1 033.20 | | |
| 5102 | Ultrasound of joints (eg shoulder hip knee), per joint ● Ultraklank van gewrigte (bv. skouer, heup, knie) per gewrig | 50 | 861.00 | 50 | 861.00 | | |
| 5103 | Ultrasound soft tissue, any region ● Ultraklank sagteweefsel, enige gebied | 50 | 861.00 | 50 | 861.00 | | |
| 3628 | Renal tract ● Urienweë | 50 | 861.00 | 50 | 861.00 | | |
| 3631 | Ophthalmic examination ● Oogondersoek | 50 | 861.00 | 50 | 861.00 | | |
| 3632 | Axial length measurement and calculation of intra-ocular lens power. Per eye. Not to be used with item 3034 ● Meet van aksiale lengte en bepaling van sterkte van 'n intraokulêre lens. Per oog. Kan nie saam met item 3034 gebruik word nie. | 50 | 861.00 | 50 | 861.00 | | |
| 3634 | Peripheral vascular study, B mode only ● Perifere vasculêre studie, B mode alleenlik | 39 | 671.58 | 39 | 671.58 | | |
| 5110 | Carotid ultrasound vascular study; B mode, pulsed and colour doppler; bilateral study, internal, external and common carotid flow and anatomy ● Karotis ultraklank vasculêre studie: B mode en kleur Doppler; bilaterale studie, interne, eksterne en gemene karotisvloei en anatomie | 128 | 2 204.16 | 120 | 2 066.40 | | |
| 5111 | Full ultrasonic and colour Doppler evaluation of entire extracranial vascular tree; carotids, vertebral and subclavian vessels (not to be used together with items 5110, 5112, 5113, 5114) ● Vol ultraklank en Doppler evaluasie van totale ekstra-kraniale vasculêre strukture; karotisse, vertebrale en subklaviese vate. (Mag nie saam met items 5110, 5112, 5113, 5114 gehêf word nie) | 206 | 3 547.32 | 164.8 | 2 837.86 | | |
| 5112 | Peripheral arterial ultrasound vascular study; B mode, pulsed and colour doppler; per limb; to include waveforms at minimum of three levels, pressure studies at two levels and full interpretation of results ● Perifere arteriële ultraklank vasculêre studie; B mode "pulsed" en kleurdoppler; per ledemaat om golfvorms by 'n minimum van drie vlakke, drukking studies by twee vlakke en volle interpretasie van resultate, in te sluit. | 117 | 2 014.74 | 117 | 2 014.74 | | |
| 5113 | Peripheral venous ultrasound vascular study; B mode, pulsed and colour doppler; to evaluate deep vein thrombosis ● Perifere veneuse ultraklank vasculêre studie; B mode "pulsed" en kleurdoppler; om diep veen trombose te evalueer | 117 | 2 014.74 | 117 | 2 014.74 | | |

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| | | U/E | R | U/E | R | U/E | R | T/M |
| 5114 | Peripheral venous ultrasound vascular study; B mode, pulsed and colour Doppler in erect and supine position including compression manoeuvres and reflux in superficial and deep systems, bilaterally ● Perifere veneuse ultraklank vasculêre studie; B mode, "pulsed" en kleurdoppler in liggend en staande posisie insluitend kompressie maneuvres en refluxs in oppervlakkige en diep sisteme, bilateral | 178 | 3 065.16 | 142.4 | 2 452.13 | | | |
| 3635 | Plus (+) Doppler ● Plus (+) Doppler | 39 | 671.58 | 39 | 671.58 | | | |
| 3637 | Plus (+) Colour Doppler (may be added onto any other regional exam, but not to be added to items 5110, 5111, 5112, 5113 or 5114) ● Plus (+) Kleur Doppler (mag by enige ander streeksondersoek gevoeg word, maar mag nie by items 5110, 5111, 5112, 5113 of 5114 gevoeg word nie) | 78 | 1 343.16 | 78 | 1 343.16 | | | |
| 19.12 | Portable unit examinations ● Ondersoeke met mobiele eenheid | | | | | | | |
| 3639 | Where X-ray unit is kept and used in the hospital: Add ● Waar mobiele Röntgen-eenheid in die hospitaal gehou en gebruik word: Voeg by | + | 10 | 182.20 | 7 | 127.54 | | |
| 3640 | Theatre investigations (with fixed installation): Add ● Teaterondersoeke (met vaste installasie): Voeg by | + | 4.5 | 81.99 | 3 | 54.66 | | |
| 3641 | Tracer test ● Speurtoets | | 33.2 | 604.90 | 22.1 | 402.66 | | |
| 3642 | Repeat of further tracer tests for same investigation: half of tracer test (item 3641) fee ● Herhaling van verdere speurtoets vir dieselfde ondersoek: helfte van speurtoets (item 3641) | | 16.6 | 302.45 | 11.1 | 202.24 | | |
| 3643 | If both tracer and therapeutic procedures are done, half fee of tracer test to be charged plus therapeutic fee ● Indien beide speurtoets en terapeutiese prosedures uitgevoer word, moet die helfte van die bedrag vir die speurtoets plus die bedrag vir terapie gevra word | | | | | | | |
| 3645 | Other organ scanning with use of relevant radio isotopes ● Ander orgaanafasting met radio-isotope | | 82.2 | 1 497.68 | 54.8 | 998.46 | | |
| 19.14 | Interventional radiological procedures ● Intervensionele radiologiese prosedures | | | | | | | |
| 5014 | Atherectomy (per vessel) ● Aterektomie (per vat) | | 341 | 6 213.02 | 204.6 | 3 727.81 | | |
| 5016 | Aspiration thrombectomy (per vessel) ● Aspirasie trombektomie (per vat) | | 219 | 3 990.18 | 131.4 | 2 394.11 | | |
| 5018 | On-table thrombolysis/transcatheter infusion performed in angiography suite ● Op-tafel trombolise/transkateter infuus uitgevoer in angiografie suite | | 178 | 3 243.16 | 106.8 | 1 945.90 | 5 | 407.10 +T |
| 5022 | Embolisation non-intracranial. per vessel ● Embolisering nie-intrakraniaal, per vat | | 178 | 3 243.16 | 106.8 | 1 945.90 | 9 | 732.78 +T |
| 5031 | Antegrade ureteric stent insertion ● Antegraad ureteriese stent inplasing | | 116 | 2 113.52 | 69.6 | 1 268.11 | 6 | 488.52 +T |
| 5033 | Percutaneous cystostomy in radiology suite ● Perkutane sistostomie in radiologie suite | | 50 | 911.00 | 30 | 546.60 | | |
| 5035 | Urethral balloon dilatation in radiology suite ● Uretrale ballon dilatasie in radiologie suite | | 38 | 692.36 | 22.8 | 415.42 | | |
| 5036 | Percutaneous Abdominal / pelvic / other drain insertion, any modality ● Perkutane abdominale / pelviese / ander dreineringsbuis invoering, enige modaliteit | | 57 | 1 038.54 | 34.2 | 623.12 | | |
| 5037 | Urethral stenting in radiology suite ● Uretrale stent inplasing in radiologie suite | | 171 | 3 115.62 | 102.6 | 1 869.37 | | |
| 5041 | Balloon occlusion / Wada test ● Ballon afsluiting / Wada toets | | 178 | 3 243.16 | 106.8 | 1 945.90 | 9 | 732.78 +T |
| 5043 | Intracranial angioplasty ● Intrakraniale angioplastiek | | 341 | 6 213.02 | 204.6 | 3 727.81 | 13 | 1058.46 +T |
| 5045 | Hepatic arterial infusion catheter insertion ● Hepatiese arteriële infuus kateter inplasing | | 260 | 4 737.20 | 156 | 2 842.32 | 6 | 488.52 +T |
| 5047 | Combined internal/external biliary drainage ● Gekombineerde interne/eksterne gal dreinerings | | 171 | 3 115.62 | 102.6 | 1 869.37 | 9 | 732.78 +T |

| | | Specialist Radiologist Spesialis Radioloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|-------|--|---|-----------|--|----------|---------------------|---------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 5049 | Percutaneous gall bladder drainage ● Perkutane galblaas dreinerings | 116 | 2 113.52 | 69.6 | 1 268.11 | 9 | 732.78 | +T |
| 5072 | Tunnelled/Subcutaneous arteria/venous line performed in radiology suite ● Getonnel/subkutane arteriële/veneuse lyn uitgevoer in radiologie suite | 137 | 2 496.14 | 82.2 | 1 497.68 | 5 | 407.10 | +T |
| 5074 | IVC filter insertion jugular or femoral route ● IVC filter inplasing jugulêre of femorale roete | 260 | 4 737.20 | 156 | 2 842.32 | 9 | 732.78 | +T |
| 5076 | Intravascular foreign body removal, arterial or venous, any route ● Intravaskulêre vreemde voorwerp verwydering, arterieel of veneus, enige roete | 341 | 6 213.02 | 204.6 | 3 727.81 | 9 | 732.78 | +T |
| 5078 | Percutaneous sclerotherapy of an arteriovenous malformation (AVM) ● Perkutane skleroterapie van 'n arterioveneuse malformasie (AVM) | 117 | 2 131.74 | 70.2 | 1 279.04 | | | |
| 5080 | Transjugular intrahepatic portosystemic shunt ● Transjugulêre intrahepatiese portosistemiese omleiding | 559 | 10 184.98 | 335.4 | 6 110.99 | 13 | 1058.46 | +T |
| 5082 | Transjugular liver biopsy ● Transjugulêre lewer biopsie | 116 | 2 113.52 | 69.6 | 1 268.11 | 9 | 732.78 | +T |
| 5088 | Oesophageal stent insertion in radiology suite ● Esofageale stent inplasing in radiologie suite | 171 | 3 115.62 | 102.6 | 1 869.37 | 6 | 488.52 | +T |
| 5090 | Trachial stent insertion ● Tragiale stent inplasing | 171 | 3 115.62 | 102.6 | 1 869.37 | 6 | 488.52 | +T |
| 5091 | GIT Balloon dilatation under fluoroscopy ● GIT ballon dilatasie onder fluoroskopie | 111 | 2 022.42 | 66.6 | 1 213.45 | 6 | 488.52 | +T |
| 5092 | Other GIT stent insertion ● Ander GIT stent inplasing | 171 | 3 115.62 | 102.6 | 1 869.37 | 6 | 488.52 | +T |
| 5093 | Percutaneous gastrostomy in radiology suite ● Perkutane gastrostomie in radiologie suite | 143 | 2 605.46 | 85.8 | 1 563.28 | | | |
| 5094 | Cutting needle biopsy with image guidance ● Insnydende naalbiopsie onder beeldende begeleiding | 38 | 692.36 | 22.8 | 415.42 | | | |
| 5095 | Chest drain insertion in radiology suite ● Borskas dreineringsbuis inplasing in radiologie suite | 54 | 983.88 | 32.4 | 590.33 | | | |
| 19.15 | Magnetic Resonance Imaging Magnetic Resonance Imaging: Per anatomical Region Note: See modifier 6101 for limited examinations | | | | | | | |
| 6200 | Magnetic Resonance Imaging: Per anatomical Region: Brain | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6210 | Magnetic Resonance Imaging: Per anatomical Region: Cervical vertebrae | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6211 | Magnetic Resonance Imaging: Per anatomical Region: Thoracic vertebrae | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6212 | Magnetic Resonance Imaging: Per anatomical Region Lumbar vertebrae | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6213 | Magnetic Resonance Imaging: Per anatomical Region: Sacrum | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6220 | Magnetic Resonance Imaging: Per anatomical Region: Left shoulder | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6221 | Magnetic Resonance Imaging: Per anatomical Region: Right shoulder | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6222 | Magnetic Resonance Imaging: Per anatomical Region: Both hips | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6223 | Magnetic Resonance Imaging: Per anatomical Region: Left hip | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6224 | Magnetic Resonance Imaging: Per anatomical Region: Right hip | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6227 | Magnetic Resonance Imaging: Per anatomical Region: Left elbow | 600 | 10 932.00 | | | 5 | 407.10 | +T |

| | | Specialist Radiologist Spesialis Radioloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|------|--|---|-----------|--|----------|---------------------|--------|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 6228 | Magnetic Resonance Imaging: Per anatomical Region: Right elbow | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6231 | Magnetic Resonance Imaging: Per anatomical Region: Left wrist | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6232 | Magnetic Resonance Imaging: Per anatomical Region: Right wrist | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6235 | Magnetic Resonance Imaging: Per anatomical Region: Left knee | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6236 | Magnetic Resonance Imaging: Per anatomical Region: Right knee | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6239 | Magnetic Resonance Imaging: Per anatomical Region: Left ankle | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6240 | Magnetic Resonance Imaging: Per anatomical Region: Right ankle | 600 | 10 932.00 | | | 5 | 407.10 | +T |
| 6260 | Contrast Medium: Current price according to the regular price list published by the Radiological Society of SA | | | | | | | |
| 6270 | Low Field Strength peripheral joint magnetic resonance imaging: Low field strength peripheral joint examination (feet, knees, hands, and elbows). in dedicated limb units not able to perform body, spine or head examinations | 105 | 1 913.10 | 70 | 1 275.40 | 5 | 407.10 | +T |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|--|---|---------------|--|---------------|---------------------|---|-----|
| | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● The amounts in this section are calculated according to the Radiation Oncology unit values (unless otherwise specified) ● Die bedrae in hierdie afdeling word volgens die Stralingsonkologie eenheidswaardes bereken (tensy anders gespresifiseer) | | | | | | | |
| 20.10 Chemotherapy ● Chemoterapie Note: When patients are not treated in chemotherapy facilities, items 0213, 0214 and 0215 are used in stead of items 5790-5795 ● Let wel: Indien patiente nie in chemoterapie fasiliteite behandel word nie, word items 0213,0214 en 0215 gebruik in plaas van items 5790-5795. The amounts in this section are calculated according to the Clinical Procedure unit values ● Die bedrae in hierdie afdeling word volgens die Kliniese Prosedure eenheidswaardes bereken | | | | | | | |
| 5790 Non Infusional Chemotherapy: Global Fee for the management of and for related services delivered in the treatment of cancer with oral chemotherapy or hormonal therapy (per cycle), intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy or oncology related drug administration per treatment day - for exclusive use by doctors with appropriate oncology training (consultations to be charged separately) ● Nie Infusionele Chemoterapie: Globale Fooi vir die bestuur van en vir dienste gelewer in die behandeling van kanker met orale chemo- of hormonale terapie (per siklus), binnespiersie, subkutane, intratekale of bolus chemoterapie of onkologie verwante middel toedienings per behandelingsdag - vir eksklusiewe gebruik deur dokters met toepaslike onkologie opleiding (konsultasies moet afsonderlik gehef word) | 42.95 | 823.35 | 42.95 | 823.35 | | | |
| 5791 Non Infusional Chemotherapy Facility Fee: A facility where oncology medicines are procured or scripted for oral chemotherapy, intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy, per treatment day. This fee is chargeable by doctors with appropriate oncology training who owns or rents the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO (to be used in conjunction with item 5790) - only one of the parties are to charge this fee ● Nie Infusionele Chemoterapie fasiliteitsfooi: 'n Fasiliteit waar onkologie medisyne voorsien of voorgeskryf word vir orale chemoterapie, binnespiersie, subkutane, intratekale of bolus chemoterapie, per behandelingsdag. Vir gebruik deur dokters met toepaslike onkologie opleiding wat die fasiliteite besit of huur, en andere soos klinieke of hospitale wat die dienste verskaf waar chemoterapie toegedien word. Sodanige fasiliteite moet akkrediteer word onder die vaandel van SASMO en/of SASCRO (slegs vir gebruik saam met item 5790) - slegs een van die partye mag die fooi hef. | 24.49 | 469.47 | 24.49 | 469.47 | | | |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | | | |
|---|---|--|--------|---------------------|---|-----|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY● | | | | | | | | |
| 5792 Non Infusional Chemotherapy Facility Fee: A facility where oncology medicines are purchased, stored and dispensed during oral chemotherapy or hormonal therapy (per cycle), intramuscular (IM), subcutaneous, intrathecal or bolus chemotherapy per treatment day. This fee is chargeable by doctors with appropriate oncology training who owns or rents the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. These facilities are to be accredited under the auspices of SASMO and/or SASCRO (to be used in conjunction with item 5790) - only one of the parties are to charge this fee ● Nie Infusionele Chemoterapie fasiliteitsfooi: 'n Fasiliteit waar onkologie medisyne self aangekoop, verkoop en geresepteer word tydens orale chemo- of hormonale terapie (per siklus), binnespiers, subkutane, intratekale of bolus chemoterapie per behandelingsdag. Vir gebruik deur dokters met toepaslike onkologie opleiding wat die fasiliteite besit of huur, en andere soos klinieke of hospitale wat die dienste verskaf waar chemoterapie toegedien word. Sodanige fasiliteite moet akkrediteer word onder die vaandel van SASMO en/of SASCRO (slegs vir gebruik saam met item 5790) - slegs een van die partye mag die fooi hef | 30.61 | 586.79 | 30.61 | 586.79 | | | | |
| 5793 Infusional Chemotherapy: Global fee for the management of and for services delivered during infusional chemotherapy per treatment day - for exclusive use by doctors with appropriate oncology training using recognised chemotherapy facilities (consultations to be charged separately) ● Infusie Chemoterapie: Globale fooi vir dienste gelewer tydens chemoterapie per behandelingsdag - vir eksklusiewe gebruik deur dokters met toepaslike onkologie opleiding wat in erkende chemoterapie fasiliteite werksaam is (konsultasies moet afsonderlik gehef word) | 159.47 | 3 057.04 | 127.58 | 2 445.71 | | | | |
| 5794 Infusional Chemotherapy Facility Fee: A facility where oncology medicines are procured, stored, admixed and administered, and in which appropriately-trained medical, nursing and support staff are in attendance. This fee is chargeable by doctors with appropriate oncology training who owns or rents the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. Said facilities are to be accredited under the auspices of SASMO and/or SASCRO (to be used in conjunction with item 5793) - only one of the parties are to charge this fee ● Infusie Chemoterapie fasiliteitsfooi: 'n Fasiliteit waar onkologie medisyne verskaf, gestoor, vermeng en toegedien word en waar toepaslik opgeleide mediese, verpleging en ondersteunende personeel teenwoordig is. Vir gebruik deur dokters met toepaslike onkologie opleiding wat die fasiliteite besit of huur, en andere soos klinieke of hospitale wat die dienste verskaf waar chemoterapie toegedien word. Sodanige fasiliteite moet akkrediteer word onder die vaandel van SASMO en/of SASCRO (slegs vir gebruik saam met item 5793) - slegs een van die partye mag die fooi hef | 90.03 | 1 725.88 | 90.03 | 1 725.88 | | | | |

| | | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|----------------|--|---|----------|--|----------|---------------------|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. | RADIATION ONCOLOGY ● | | | | | | | |
| 5795 | <p>Infusional Chemotherapy Facility Fee: A facility where oncology medicines are purchased, stored, dispensed, admixed and administered and in which appropriately-trained medical, nursing and support staff are in attendance. This fee is chargeable by doctors with appropriate oncology training who owns or rents the facility, and by others e.g. hospitals or clinics that provide the services as per the appropriate billing structure. These facilities are to be accredited under the auspices of SASMO and/or SASCRO (to be used in conjunction with item 5793) - only one of the parties are to charge this fee</p> <p>● Infusie Chemoterapie fasiliteitsfooi: 'n Fasiliteit waar onkologie medisyne self aangekoop, gestoor, vermeng, geresepteer en toegedien word en waar toepaslik opgeleide mediese, verpleging en ondersteunende personeel teenwoordig is. Vir gebruik deur dokters met toepaslike onkologie opleiding wat die fasiliteite besit of huur, en andere soos klinieke of hospitale wat die dienste verskaf waar chemoterapie toegedien word. Sodanige fasiliteite moet akkrediteer word onder die vaandel van SASMO en/of SASCRO (slegs vir gebruik saam met item 5793) - slegs een van die partye mag die fooi hef.</p> | 112.54 | 2 157.39 | 112.54 | 2 157.39 | | | |
| 20.11 | Radiation Therapy ● Radioterapie | | | | | | | |
| 20.11.1 | Manual Radiotherapy Planning Procedures ● Manuele Bestralings Beplanningsprosedures | | | | | | | |
| 5801 | <p>Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Single Volume of Interest - PROFESSIONAL COMPONENT ● Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Enkel Volume van Belang - PROFESSIONELE KOMPONENT</p> | 42.56 | 815.88 | | | | | |
| 5601 | <p>Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Single Volume of Interest - TECHNICAL COMPONENT ● Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Enkel Volume van Belang - TEGNIESE KOMPONENT</p> | 99.32 | 1 903.96 | | | | | |
| 5802 | <p>Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Multiple Volumes of Interest - PROFESSIONAL COMPONENT ● Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT</p> | 56.18 | 1 076.97 | | | | | |
| 5602 | <p>Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Multiple Volumes of Interest - TECHNICAL COMPONENT ● Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT</p> | 131.10 | 2 513.19 | | | | | |
| 5803 | <p>Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Special Technique - PROFESSIONAL COMPONENT ● Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Spesiale Tegniek - PROFESSIONELE KOMPONENT</p> | 76.62 | 1 468.81 | | | | | |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | | | |
|---|---|---|---|------------------------|---|-----|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | | |
| 5603 Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Special Technique - TECHNICAL COMPONENT ● Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Spesiale Tegniek - TEGNIESE KOMPONENT | 178.77 | 3 427.02 | | | | | | |
| 20.11.2 Conventional Radiotherapy Planning Procedures ● Konvensionele Radioterapie Beplanningsprosedures | | | | | | | | |
| 5808 Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Single Volume of Interest - PROFESSIONAL COMPONENT ● Konvensionele Radioterapie Beplanningsprosedures: Simulasie, Beperkte Rekenaar Plan, Enkel Volume van Belang - PROFESSIONELE KOMPONENT | 170.26 | 3 263.88 | | | | | | |
| 5608 Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Single Volume of Interest - TECHNICAL COMPONENT ● Konvensionele Radioterapie Beplanningsprosedures: Simulasie, Beperkte Rekenaar Plan, Enkel Volume van Belang - TEGNIESE KOMPONENT | 397.27 | 7 615.67 | | | | | | |
| 5809 Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Multiple Volumes of Interest - PROFESSIONAL COMPONENT ● Konvensionele Radioterapie Beplanningsprosedures: Simulasie, Beperkte Rekenaar Plan, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT | 238.36 | 4 569.36 | | | | | | |
| 5609 Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Multiple Volumes of Interest - TECHNICAL COMPONENT ● Konvensionele Radioterapie Beplanningsprosedures: Simulasie, Beperkte Rekenaar Plan, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT | 556.18 | 10 661.97 | | | | | | |
| 5810 Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Special Technique - PROFESSIONAL COMPONENT ● Konvensionele Radioterapie Beplanningsprosedures: Simulasie, Beperkte Rekenaar Plan, Spesiale Tegniek - PROFESSIONELE KOMPONENT | 297.95 | 5 711.70 | | | | | | |
| 5610 Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Special Technique - TECHNICAL COMPONENT ● Konvensionele Radioterapie Beplanningsprosedures: Simulasie, Beperkte Rekenaar Plan, Spesiale Tegniek - TEGNIESE KOMPONENT | 695.22 | 13 327.37 | | | | | | |
| 20.11.3 Three Dimensional Radiotherapy Planning Procedures ● Drie Dimensionele Radioterapie Beplanningsprosedures | | | | | | | | |
| 5820 Three Dimensional Radiotherapy Planning Procedures: 3-Dimensional Simulation and Graphic Planning, Single Volume of Interest - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI) ● Drie Dimensionele Radioterapie Beplanningsprosedures: Drie Dimensionele Simulasie en Grafiese Plan, Enkel Volume van Belang - PROFESSIONELE KOMPONENT (sluit koste vir RT en MRB uit) | 240.23 | 4 605.21 | | | | | | |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | | | |
|---|---|---|---|------------------------|---|-----|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | | |
| 5620 Three dimensional radiotherapy planning procedures: 3-dimensional simulation and graphic planning, single volume of interest - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI) ● Drie Dimensionele Radioterapie Beplanningsprosedures: Drie Dimensionele Simulasie en Grafiese Plan, Enkel Volume van Belang - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 977.20 | 18 732.92 | | | | | | |
| 5821 Three Dimensional Radiotherapy Planning Procedures: 3-Dimensional Simulation and Graphic Planning, Multiple Volumes of Interest - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI) ● Drie Dimensionele Radioterapie Beplanningsprosedures: Drie Dimensionele Simulasie en Grafiese Plan, Enkel Volume van Belang - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 407.75 | 7 816.57 | | | | | | |
| 5621 Three dimensional radiotherapy planning procedures: 3-dimensional simulation and graphic planning, multiple volumes of interest - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI) ● Drie Dimensionele Radioterapie Beplanningsprosedures: Drie Dimensionele Simulasie en Grafiese Plan, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 1 368.07 | 26 225.90 | | | | | | |
| 5822 Three Dimensional Radiotherapy Planning Procedures: 3-Dimensional Simulation and Graphic Planning, Special Technique - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI) ● Drie Dimensionele Radioterapie Beplanningsprosedures: Drie Dimensionele Simulasie en Grafiese Plan, Spesiale Tegniek - PROFESSIONELE KOMPONENT (sluit koste vir RT en MRB uit) | 554.33 | 10 626.51 | | | | | | |
| 5622 Three dimensional radiotherapy planning procedures: 3-dimensional simulation and graphic planning, special technique - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI) ● Drie Dimensionele Radioterapie Beplanningsprosedures: Drie Dimensionele Simulasie en Grafiese Plan, Spesiale Tegniek - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 1 710.09 | 32 782.43 | | | | | | |
| 20.11.4 Intensity Modulated Radiotherapy Planning Procedures ● Intensiteits gemoduleerde bestraling | | | | | | | | |
| 5823 Intensity Modulated Radiotherapy Planning Procedures: Intensity Modulated Radiotherapy Simulation, Inverse Planning, Radical Course - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI) ● Intensiteits Gemoduleerde Bestraling Beplanningsprosedures: Intensiteits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Radikale Kursus - PROFESSIONELE KOMPONENT (sluit koste vir RT en MRB uit) | 642.92 | 12 324.78 | | | | | | |
| 5623 Intensity modulated radiotherapy (IMRT) planning procedures: Intensity modulated radiotherapy simulation, inverse planning, radical course - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI) ● Intensiteits Gemoduleerde Bestraling Beplanningsprosedures: Intensiteits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Radikale Kursus - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 1 916.81 | 36 745.25 | | | | | | |

| | | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|---|---|---|-----------|--|---|---------------------|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | | |
| 5825 | Intensity Modulated Radiotherapy Planning Procedures: Intensity Modulated Radiotherapy Simulation, Inverse Planning, Booster Volumes (not for use with other IMRT planning codes) - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI) ● Intenseits Gemoduleerde Bestralings Beplanningsprosedures: Intenseits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Alleenlik vir Skraag Volumes (nie vir gebruik saam met ander IMRT Beplanningskodes nie) - PROFESSIONELE KOMPONENT (sluit koste vir RT en MRB uit) | 232.18 | 4 450.89 | | | | | |
| 5625 | Intensity modulated radiotherapy (IMRT) planning procedures: Intensity modulated radiotherapy simulation, inverse planning, booster volumes (not for use with other IMRT planning codes) - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI) ● Intenseits Gemoduleerde Bestraling Beplanningsprosedures: Intenseits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Alleenlik vir Skraag Volumes (nie vir gebruik saam met ander IMRT Beplanningskodes nie) - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 958.40 | 18 372.53 | | | | | |
| 5826 | Intensity Modulated Radiotherapy Planning Procedures: Intensity Modulated Radiotherapy Simulation, Inverse Planning, CT Scan with Magnetic Resonance Imaging or other Similar Imaging Fusion Techniques - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI) ● Intenseits Gemoduleerde Bestraling Beplanningsprosedures: Intenseits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Alleenlik vir Skraag Volumes (nie vir gebruik saam met ander IMRT Beplanningskodes nie) - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 753.35 | 14 441.72 | | | | | |
| 5626 | Intensity modulated radiotherapy (IMRT) planning procedures: Intensity modulated radiotherapy simulation, inverse planning, CT scan with magnetic resonance imaging or other similar imaging fusion techniques - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI) ● Intenseits Gemoduleerde Bestraling Beplanningsprosedures: Intenseits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Rekenaar Skandering met Magnetiese Resonansie of ander gelyksoortige Beeldfusie Tegnieke - TEGNIESE KOMPONENT (sluit koste vir RT en MRB uit) | 2 174.48 | 41 684.78 | | | | | |
| 20.11.5 Kilovolt Radiation Treatment ● Kilovolt Bestralingsterapie | | | | | | | | |
| 5834 | Kilovoltage Radiation Treatment: Weekly Treatment, Kilovolt or Similar, per week or part thereof - PROFESSIONAL COMPONENT ● Kilovolt Bestralingsterapie: Weeklikse Bestraling, Kilovolt of soortgelyk, per week of deel daarvan - PROFESSIONELE KOMPONENT | 49.08 | 940.86 | | | | | |
| 5634 | Kilovoltage Radiation Treatment: Weekly Treatment, Kilovolt or Similar, per week or part thereof - TECHNICAL COMPONENT ● Kilovolt Bestralingsterapie: Weeklikse Bestraling, Kilovolt of soortgelyk, per week of deel daarvan - TEGNIESE KOMPONENT | 114.52 | 2 195.35 | | | | | |

| | | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|--|--------|---|---|--|---|---------------------|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | | |
| 20.11.6 Short course radiation treatment ● Kort kursus bestralingsterapie | | | | | | | | |
| 5835 Short Course Radiation Treatment: Short course treatment, Single Volume of Interest - PROFESSIONAL COMPONENT ● Kort Kursus Bestralingsterapie: Kort kursus bestraling, Enkel Volume van Belang - PROFESSIONELE KOMPONENT | 105.74 | 2 027.04 | | | | | | |
| 5635 Short Course Radiation Treatment: Short course treatment, Single Volume of Interest - TECHNICAL COMPONENT ● Kort Kursus Bestralingsterapie: Kort kursus bestraling, Enkel Volume van Belang - TEGNIESE KOMPONENT | 246.73 | 4 729.81 | | | | | | |
| 5836 Short Course Radiation Treatment: Short course treatment, Multiple Volumes of Interest - PROFESSIONAL COMPONENT ● Kort Kursus Bestralingsterapie: Kort kursus bestraling, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT | 148.04 | 2 837.93 | | | | | | |
| 5636 Short Course Radiation Treatment: Short course treatment, Multiple Volumes of Interest - TECHNICAL COMPONENT ● Kort Kursus Bestralingsterapie: Kort kursus bestraling, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT | 345.41 | 6 621.51 | | | | | | |
| 5837 Short Course Radiation Treatment: Short course Treatment, Special Technique - PROFESSIONAL COMPONENT ● Kort Kursus Bestralingsterapie: Kort kursus Bestraling, Spesiale Tegniek - PROFESSIONELE KOMPONENT | 190.33 | 3 648.63 | | | | | | |
| 5637 Short Course Radiation Treatment: Short course Treatment, Special Technique - TECHNICAL COMPONENT ● Kort Kursus Bestralingsterapie: Kort kursus Bestraling, Spesiale Tegniek - TEGNIESE KOMPONENT | 444.11 | 8 513.59 | | | | | | |
| 20.11.7 Weekly radiation treatment sessions ● Weeklikse Bestralingsbehandelingsessies | | | | | | | | |
| 20.11.7.1 Conventional Techniques ● Konvensionele tegnieke | | | | | | | | |
| 5839 Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Single Volume of Interest - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Konvensionele Tegnieke: Weeklikse Bestralings, Enkel Volume van Belang - PROFESSIONELE KOMPONENT | 193.86 | 3 716.30 | | | | | | |
| 5639 Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Single Volume of Interest - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Konvensionele Tegnieke: Weeklikse Bestralings, Enkel Volume van Belang - TEGNIESE KOMPONENT | 452.33 | 8 671.17 | | | | | | |
| 5840 Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Multiple Volumes of Interest - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Konvensionele Tegnieke: Weeklikse Bestralings, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT | 246.73 | 4 729.81 | | | | | | |
| 5640 Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Multiple Volumes of Interest - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Konvensionele Tegnieke: Weeklikse Bestralings, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT | 575.69 | 11 035.98 | | | | | | |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | | | |
|---|---|---|---|------------------------|---|-----|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | | |
| 5841 Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Special Technique - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Konvensionele Tegnieke: Weeklikse Bestralings, Spesiale Tegniek - PROFESSIONELE KOMPONENT | 317.22 | 6 081.11 | | | | | | |
| 5641 Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Special Technique - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Konvensionele Tegnieke: Weeklikse Bestralings, Spesiale Tegniek - TEGNIESE KOMPONENT | 740.18 | 14 189.25 | | | | | | |
| 20.11.7.2 Advanced Techniques ● Gevorderde tegnieke | | | | | | | | |
| 5849 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Single Volume of Interest - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Enkel Volume van Belang - PROFESSIONELE KOMPONENT | 236.24 | 4 528.72 | | | | | | |
| 5649 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Single Volume of Interest - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Enkel Volume van Belang - TEGNIESE KOMPONENT | 551.21 | 10 566.70 | | | | | | |
| 5850 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Multiple Volumes of Interest - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT | 330.73 | 6 340.09 | | | | | | |
| 5650 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Multiple Volumes of Interest - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestralingsessies - Veelvuldige Vin Kollimators, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT | 771.71 | 14 793.68 | | | | | | |
| 5851 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Special Technique - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Spesiale Tegniek - PROFESSIONELE KOMPONENT | 425.23 | 8 151.66 | | | | | | |
| 5651 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Special Technique - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Spesiale Tegniek - TEGNIESE KOMPONENT | 992.19 | 19 020.28 | | | | | | |
| 5854 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Intensity Modulated Radiotherapy - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Intensiteits Gemoduleerde Bestraling - TEGNIESE KOMPONENT | 348.87 | 6 687.84 | | | | | | |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | |
|--|---|--|---|---------------------|---|-----|
| | | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | |
| 5654 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Intensity Modulated Radiotherapy - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestraling, Intensiteits Gemoduleerde Bestraling - TEGNIESE KOMPONENT | 814.03 | 15 604.96 | | | | |
| 5855 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Total Body Radiotherapy or Similar - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestralings, Heelligaam Bestraling of Soortgelyk - PROFESSIONELE KOMPONENT | 826.83 | 15 850.33 | | | | |
| 5655 Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Total Body Radiotherapy or Similar - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapiesessies - Gevorderde Tegnieke: Weeklikse Bestralings, Heelligaam Bestraling of Soortgelyk - TEGNIESE KOMPONENT | 1 929.26 | 36 983.91 | | | | |
| 20.11.8 Stereotactic Radiation ● Stereotaktiese Bestraling | | | | | | |
| 5860 Stereotactic Radiation: Stereotactic Radiation, Single or up to 4 (four) Fractions, Global Fee - PROFESSIONAL COMPONENT ● Stereotaktiese Bestraling: Stereotaktiese Bestraling, Enkel of tot 4 (vier) Fraksies, Globale Fooi - PROFESSIONELE KOMPONENT | 3 719.34 | 71 299.75 | | | | |
| 5660 Stereotactic Radiation: Stereotactic Radiation, Single Fraction, Global Fee - TECHNICAL COMPONENT ● Stereotaktiese Bestraling: Stereotaktiese Bestraling, Enkel Fraksie Behandeling, Globale Fooi - TEGNIESE KOMPONENT | 8 678.46 | 166 366.08 | | | | |
| 5861 Stereotactic Radiation: Stereotactic Radiation, 5 (five) or more Fractions, Full course, Global Fee - PROFESSIONAL COMPONENT ● Stereotaktiese Bestraling: Stereotaktiese Bestraling, 5 (vyf) of meer Fraksies, Volle Kursus, Globale Fooi - PROFESSIONELE KOMPONENT | 4 277.24 | 81 994.69 | | | | |
| 5661 Stereotactic Radiation: Stereotactic Radiation, Fractionated, Full course, Global Fee - TECHNICAL COMPONENT ● Stereotaktiese Bestraling: Stereotaktiese Bestraling, Gefraksioneerd, Volle Kursus, Globale Fooi - TEGNIESE KOMPONENT | 9 980.23 | 191 321.01 | | | | |
| 20.12 Brachytherapy ● Bragiterapie | | | | | | |
| 20.12.1 Isotope/Applicator Therapy ● Isotope/ Toedienarterapie | | | | | | |
| 5870 Isotope/Applicator Therapy: Isotopes - Low Complexity, administration of low dose oral isotopes or use of surface applicators, up to five applications. Typically an out patient procedure. The cost of any isotopes and materials are not included ● Isotope-/Toedienarterapie: Isotope - Lae kompleksiteit, toediening van lae dosis orale isotope of gebruik van oppervlakte toedieners, per vyf toedienings. Tipies buite pasiënt prosedure. Die koste van isotope en materiale is uitgesluit. | 108.40 | 2 078.03 | | | | |

| | | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | |
|--|---|---|-----------|--|---|---------------------|-------|
| | | U/E | R | U/E | R | U/E | R T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | |
| 5872 | Isotope/Applicator Therapy: Isotopes - Intermediate Complexity, administration of isotopes requiring invasive techniques such as intravenous, intracavitary or intra-articular radioactive isotopes. Typical out patient procedure or admission and monitoring less than 48 hours. The cost of any isotopes and materials are not included ● Isotope- /Toedienenterapie: Isotope - Intermediêre kompleksiteit, toediening van isotope deur intervensionele tegnieke, soos intraveneuse, intrakavitêre of intra-artikulêre radio-aktiewe isotope. Tipies buite pasiënt prosedure of toelating en monitering <48 uur. Die koste van isotope en materiale is uitgesluit. | 216.80 | 4 156.06 | | | | |
| 5873 | Isotope/Applicator Therapy: Isotopes - High Complexity, surface application of seed arrays requiring dosimetric assessment and/or high dose radio-active isotopes requiring admission and monitoring. Typically requires in patient admission and monitoring for more than 48 hours. The cost of any isotopes and materials are not included ● Isotope- /Toedienenterapie: Isotope - Hoë kompleksiteit, oppervlakte toedienings met veelvuldige sade wat dosimetriese beoordeling benodig en/of hoë dosis radio-aktiewe isotope wat toelating en monitering benodig. Regverdig tipies toelating en monitering vir >48 uur. Die koste van isotope en materiale is uitgesluit | 601.16 | 11 524.24 | | | | |
| 20.12.2 Brachytherapy Implants ● Bragiterapie Implanterings | | | | | | | |
| 5882 | Brachytherapy Implants: Implants - Low Complexity, placement of a single guide tube for the administration of brachytherapy requiring <8 dwell points. The cost of materials are not included ● Bragiterapie Implanterings: Implanterings - Lae kompleksiteit, implasing van enkel gidsbuis vir bragiterapie met <8 bron posisies. Die koste van materiale is uitgesluit. | 216.80 | 4 156.06 | | | | |
| 5883 | Brachytherapy Implants: Implants - Intermediate Complexity, planar implants requiring >1 guide tube for the administration of brachytherapy, or the use of >8 dwell points in a single guide tube, or any procedure requiring <8 dwell points but which requires general anaesthesia for insertion. The cost of materials are not included ● Bragiterapie Implanterings: Implanterings - Intermediêre kompleksiteit, planare implanterings met > 1 gidsbuis vir bragiterapie, of die gebruik van >8 bron posisies in 'n enkel gidsbuis, of enige prosedure met < 8 bron posisies maar wat algemene narkose benodig. Die koste van materiale is uitgesluit. | 786.80 | 15 082.96 | | | | |
| 5885 | Brachytherapy Implants: Implants - High Complexity requiring complex volumetric studies. Inclusive fee for implant under local or general anaesthetic. The cost of materials are not included ● Bragiterapie Implanterings: Implanterings - Hoë Kompleksiteit implantering wat komplekse volumetriese studies benodig. Inklusiewe fooi vir implantering onder lokale of algemene narkose. Die koste van materiale is uitgesluit. | 1 049.07 | 20 110.67 | | | | |

| | Specialist Medical or Radiation Oncologist Spesialis Mediese of Stralings onkoloog | Other Specialists and General Practitioner Ander Spesialiste en Algemene Praktisyns | | Anaesthetic Narkose | | | | |
|---|---|--|---|---------------------|---|-----|---|-----|
| | | U/E | R | U/E | R | U/E | R | T/M |
| 20. RADIATION ONCOLOGY ● | | | | | | | | |
| 20.12.3 Brachytherapy Treatment ● Bragiterapie Behandeling | | | | | | | | |
| 5890 Brachytherapy Treatment: Global fee for manual afterloading - includes storage, handling, calibration, planning (manual or computerized), manual loading, daily treatment, monitoring, removal and disposal of the isotopes. The cost of any isotopes and materials are not included ● Bragiterapie Behandeling: Globale Fooi vir Manuele Nalading - fooi sluit in berging, hantering, kalibrasie, beplanning (manueel of gerekenariseerd), manuele nalading, daaglikse behandeling, monitering, verwydering en wegruiming van isotope. Die koste van isotope en materiale is uitgesluit. | 613.04 | 11 751.98 | | | | | | |
| 5892 Brachytherapy Treatment: Global fee for remote afterloading - includes input in calibration, graphic planning, daily treatment, monitoring, removal and disposal of implant materials on completion. The cost of materials are not included - PROFESSIONAL COMPONENT ● Bragiterapie Behandeling: Globale Fooi vir Afstandbeheerde Nalading - fooi sluit in insette in kalibrasie, grafiese beplanning, daaglikse behandeling, monitering, verwydering en wegruiming van implanterings materiale na afloop van behandeling. Die koste van isotope en materiale is uitgesluit - PROFESSIONELE KOMPONENT | 415.96 | 7 973.95 | | | | | | |
| 5893 Global Fee for remote afterloading - includes input in calibration, graphic planning, daily treatment, monitoring, removal and disposal of implant materials on completion. The cost of materials are not included - TECHNICAL COMPONENT ● Globale Fooi vir Afstandbeheerde Nalading - fooi sluit in insette in kalibrasie, grafiese beplanning, daaglikse behandeling, monitering, verwydering en wegruiming van implanterings materiale na afloop van behandeling. Die koste van isotope en materiale is uitgesluit - TEGNIESE KOMPONENT | 970.56 | 18 605.64 | | | | | | |
| 20.12.4 Brachytherapy Imaging ● Bragiterapie Beelding | | | | | | | | |
| 5895 Brachytherapy Imaging: Brachytherapy: Special imaging where needed and if used, unusual to be added to any code other than items 5883 or 5885 ● Bragiterapie Beelding: Bragiterapie: Spesiale Beelding waar benodig en indien gebruik, ongewoon om te gebruik saam met 'n kode ander dan items 5883 of 5885 | 156.77 | 3 005.30 | | | | | | |

| | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|---|-------------------------|-----------------|---|---------------|
| | U/E | R | U/E | R |
| 21. PATHOLOGY ● PATOLOGIE | | | | |
| Notes: For fees for Histology and Cytology refer to items 4561 to 4593 under section 22: Anatomical Pathology ● Opmerkings: Vir Histologiese en Sitologiese tariewe verwys na items 4561 tot 4593 onder Afdeling 22: Anatomiese Patologie | | | | |
| The amounts in this section are calculated according to the Clinical Pathology unit values ● Die bedrae in hierdie afdeling word volgens die Kliniese Patologie eenheidswaardes bereken | | | | |
| 21.1 Haematology ● Hematologie | | | | |
| 3705 Alkali resistant haemoglobin ● Alkaliebestande hemoglobien | 4.5 | 81.59 | 3 | 54.39 |
| 3709 Antiglobulin test (Coombs' or trypsinized red cells) ● Antiglobulientoets (Coombsmetode of getripsineerde rooiselle) | 3.65 | 66.17 | 2.45 | 44.42 |
| 3710 Antibody titration ● Antiliggzaam-titrasie | 7.2 | 130.54 | 4.8 | 87.02 |
| 3711 Arneth count ● Arneth-telling | 2.25 | 40.79 | 1.5 | 27.20 |
| 3712 Antibody identification ● Antiliggzaam identifkasië | 8.45 | 153.20 | 5.65 | 102.43 |
| 3713 Bleeding time (does not include the cost of the simplate device) ● Bloeytyd (sluit nie die koste van simplateapparaat in nie) | 6.94 | 125.82 | 4.63 | 83.94 |
| 3715 Buffy Layer examination ● "Buffy" laag ondersoek | 19.9 | 360.79 | 13.27 | 240.59 |
| 3716 Mean Cell Volume ● Gemiddelde Selvolume | 2.25 | 40.79 | 1.5 | 27.20 |
| 3717 Bone marrow cytological examination only ● Beenmurg sitologiese ondersoek alleen | 19.9 | 360.79 | 13.27 | 240.59 |
| 3719 Bone marrow: Aspiration ● Beenmurg: Aspirasie | 8.4 | 152.29 | 5.6 | 101.53 |
| 3720 Bone marrow trephine biopsy ● Beenmurg trefien biopsie | 32.6 | 591.04 | 21.7 | 393.42 |
| 3721 Bone marrow aspiration and trephine biopsy (excluding histological examination) ● Beenmurg aspirasie en trefien biopsie (sluit nie histologiese ondersoek in nie) | 36.8 | 667.18 | 24.5 | 444.19 |
| 3722 Capillary fragility: Hess ● Kapillêre breekbaarheid: Hess | 2.02 | 36.62 | 1.35 | 24.48 |
| 3723 Circulating anticoagulants ● Sirkulerende antistolmiddel | 5.85 | 106.06 | 3.9 | 70.71 |
| 3724 Coagulation factor inhibitor assay ● Koagulasiefaktor-inhibeerderessias | 57.56 | 1 043.56 | 38.37 | 695.65 |
| 3726 Activated protein C resistance ● Geaktiveerde proteïen C-weerstandigheid | 26 | 471.38 | 17.3 | 313.65 |
| 3727 Coagulation time ● Stollingstyd | 3.16 | 57.29 | 2.11 | 38.25 |
| 3728 Anti-factor Xa Activity ● Anti-faktor Xa aktiwiteit | 53.6 | 971.77 | 35.73 | 647.78 |
| 3729 Cold agglutinins ● Koue agglutiniene | 3.6 | 65.27 | 2.4 | 43.51 |
| 3730 Protein S: Functional ● Proteïen S: Funksioneel | 37.5 | 679.88 | 25 | 453.25 |
| 3731 Compatability for blood transfusion ● Verenigingbaarheid vir bloedtransfusie | 3.6 | 65.27 | 2.4 | 43.51 |
| 3734 Protein C (chromogenic) ● Proteïen C (chromogenies) | 30.29 | 549.16 | 20.19 | 366.04 |
| 3739 Erythrocyte count ● Eritrosietelling | 2.25 | 40.79 | 1.5 | 27.20 |
| 3740 Factors V and VII: Qualitative ● Faktore V en VII: Kwalitatief | 7.2 | 130.54 | 4.8 | 87.02 |
| 3741 Coagulation factor assay: functional ● stollingsfaktor-essai: funksioneel | 9.45 | 171.33 | 6.3 | 114.22 |
| 3742 Coagulation factor assay: Immunological ● Stollings faktor-essais: Immunologies | 4.5 | 81.59 | 3 | 54.39 |
| 3743 Erythrocyte sedimentation rate ● Eritrosiet-besinkingsnelheid | 2.5 | 45.33 | 1.67 | 30.28 |
| 3744 Fibrin stabilising factor (urea test) ● Fibrin-Stabiliserende faktor (ureum oplosbaarheidstoets) | 4.5 | 81.59 | 3 | 54.39 |
| 3746 Fibrin monomers ● Fibrin monomere | 2.7 | 48.95 | 1.8 | 32.63 |
| 3748 Plasminogen Activator Inhibitor (PAI-I) ● Plasminogeen aktiwator inhibitor (PAI-I) | 65.95 | 1 195.67 | 43.97 | 797.18 |
| 3750 Tissue Plasminogen Activator (tPA) ● Weefsel plasminogeen aktiwator (tPA) | 67.79 | 1 229.03 | 45.19 | 819.29 |
| 3751 Osmotic fragility (screen) ● Osmotiese breekbaarheid (sifting) | 2.25 | 40.79 | 1.5 | 27.20 |
| 3753 Osmotic fragility (before and after incubation) ● Osmotiese breekbaarheidstoets (voor en na inkubasie) | 18 | 326.34 | 12 | 217.56 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|------|---|-------------------------|----------|---|--------|
| | | U/E | R | U/E | R |
| 3754 | ABO Reverse Group ● ABO Terugwaartse groep | 5.5 | 99.72 | 3.67 | 66.54 |
| 3755 | Full blood count (including items 3739. 3762. 3783. 3785. 3791) ● Volbloedtellings (insluitende items 3739. 3762. 3783. 3785. 3791) | 10.5 | 190.37 | 7 | 126.91 |
| 3756 | Full cross match ● Volledige kruisverenigbaarheid | 7.2 | 130.54 | 4.8 | 87.02 |
| 3757 | Coagulation factors (quantitative) ● Stollingsfaktore (kwantitatief) | 32.2 | 583.79 | 21.47 | 389.25 |
| 3758 | Factor VIII related antigen ● Faktor VIII verwante antigeen | 60.46 | 1 096.14 | 40.31 | 730.82 |
| 3759 | Coagulation factor correction study ● Stollingsfaktor-korreksiestudies | 11.72 | 212.48 | 7.81 | 141.60 |
| 3761 | Factor XIII related antigen ● Faktor XIII verwante antigeen | 61.11 | 1 107.92 | 40.74 | 738.62 |
| 3762 | Haemoglobin estimation ● Hemoglobienbepaling | 1.8 | 32.63 | 1.2 | 21.76 |
| 3763 | Contact activated product essay ● Kontakgeaktiveerde produk-essai | 16.2 | 293.71 | 10.8 | 195.80 |
| 3764 | Grouping: A-, B- and O-antigens ● Groepering: A-, B- en O-antigene | 3.6 | 65.27 | 2.4 | 43.51 |
| 3765 | Grouping: Rh antigens ● Groepering: Rh antigene | 3.6 | 65.27 | 2.4 | 43.51 |
| 3766 | PIVKA ● PIVKA | 43.49 | 788.47 | 28.99 | 525.59 |
| 3767 | Euglobulin lysis time ● Euglobinliesetyd | 25.58 | 463.77 | 17.05 | 309.12 |
| 3768 | Haemoglobin A2 (column chromatography) ● Hemoglobien A2 (kolom chromatografie) | 15 | 271.95 | 10 | 181.30 |
| 3769 | HB Electrophoresis ● Hemoglobien elektroforese | 26.82 | 486.25 | 17.88 | 324.16 |
| 3770 | Haemoglobin-S (solubility test) ● Hemoglobien-S (oplosbaarheidstoets) | 3.6 | 65.27 | 2.4 | 43.51 |
| 3773 | Ham's acidified serum test ● Ham se aangesuurde serumtoets | 8 | 145.04 | 5.33 | 96.63 |
| 3775 | Heinz bodies ● Heinz-liggaampies | 2.25 | 40.79 | 1.5 | 27.20 |
| 3776 | Haemosiderin in urinary sediment ● Haemosiderien in uriensediment | 2.25 | 40.79 | 1.5 | 27.20 |
| 3777 | DELETED 2009: Heparin estimation ● GESKRAP 2009: Heparienbepaling | | | | |
| 3781 | Heparin tolerance ● Heparien toleransie | 7.2 | 130.54 | 4.8 | 87.02 |
| 3783 | Leucocyte differential count ● Leukosiet differensiële telling | 6.2 | 112.41 | 4.15 | 75.24 |
| 3785 | Leucocytes: total count ● Leukosiet: totale telling | 1.8 | 32.63 | 1.2 | 21.76 |
| 3786 | QBC malaria concentration and fluorescent staining ● QBC malaria konsentraat en fluoressensie kleuring | 25 | 453.25 | 16.7 | 302.77 |
| 3787 | LE-cells ● LE-selle | 8.3 | 150.48 | 5.55 | 100.62 |
| 3789 | Neutrophil alkaline phosphatase ● Neutrofiel alkaliese fosfatas | 28 | 507.64 | 18.7 | 339.03 |
| 3791 | Packed cell volume: Haematocrit ● Gepakte selvolume: Hematokrit | 1.8 | 32.63 | 1.2 | 21.76 |
| 3792 | Plasmodium falciparum: Monoclonal immunological identification ● Plasmodium flaciparum: Monoklonaal immunologiese identifikasie | 9 | 163.17 | 6 | 108.78 |
| 3793 | Plasma haemoglobin ● Plasma-hemoglobien | 6.75 | 122.38 | 4.5 | 81.59 |
| 3794 | Platelet Sensitivities ● Plaatjie sensitiviteit | 18.64 | 337.94 | 12.43 | 225.36 |
| 3795 | Platelet aggregation per aggregant ● Plaatjieklomping per klomp | 12.14 | 220.10 | 8.09 | 146.67 |
| 3796 | Platelet antibodies: agglutination ● Plaatjie-antiligggame: agglutinasie | 5.4 | 97.90 | 3.6 | 65.27 |
| 3797 | Platelet count ● Plaatjetelling | 2.25 | 40.79 | 1.5 | 27.20 |
| 3799 | Platelet adhesiveness ● Plaatjieklewerigheid | 4.5 | 81.59 | 3 | 54.39 |
| 3801 | Prothrombin consumption ● Protrombienverbruik | 5.85 | 106.06 | 3.9 | 70.71 |
| 3803 | Prothrombin determination (two stages) ● Protrombienbepaling (twee stadia) | 5.85 | 106.06 | 3.9 | 70.71 |
| 3805 | Prothrombin index ● Protrombienindeks | 6 | 108.78 | 4 | 72.52 |
| 3806 | Therapeutic drug level: Dosage ● Geneesmiddelvlak: Dosering | 4.5 | 81.59 | 3 | 54.39 |
| 3807 | Recalcification time ● Herkalsifiseringtyd | 2.25 | 40.79 | 1.5 | 27.20 |
| 3809 | Reticulocyte count ● Retikulosietelling | 3 | 54.39 | 2 | 36.26 |
| 3811 | Sickling test ● Sekelseltoets | 2.25 | 40.79 | 1.5 | 27.20 |
| 3814 | Sucrose lysis test for PNH ● Sukrose-lisetoets vir PNH | 3.6 | 65.27 | 2.4 | 43.51 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyns | |
|------|--|-------------------------|----------|---|----------|
| | | U/E | R | U/E | R |
| 3816 | T and B-cells EAC markers (limited to ONE marker only for CD4/8 counts) ● T en B-selle EAC-merkers (beperk tot EEN merker alleen vir CD4/8 tellings) | 21.1 | 382.54 | 14.07 | 255.09 |
| 3820 | Thrombo-Elastogram ● Trombo-Elastogram | 26 | 471.38 | 17.33 | 314.19 |
| 3825 | Fibrinogen titre ● Fibrinogeen-titer | 3.6 | 65.27 | 2.4 | 43.51 |
| 3829 | Glucose 6-phosphate-dehydrogenase: Qualitative ● Glukose 6-fosfaat-dehydrogenase: Kwalitatief | 8 | 145.04 | 5.33 | 96.63 |
| 3830 | Glucose 6-phosphate-dehydrogenase: quantitative ● Glukose 6-fosfaat-dehydrogenase: kwantitatief. | 16 | 290.08 | 10.7 | 193.99 |
| 3832 | Red cell pyruvate kinase: quantitative ● Rooisel piruvaat kinase: kwantitatief | 16 | 290.08 | 10.7 | 193.99 |
| 3834 | Red cell Rhesus phenotype ● Rooisel Rhesus fenotipe | 9.9 | 179.49 | 6.6 | 119.66 |
| 3835 | Haemoglobin F in blood smear ● Hemoglobien F in bloedsmeer | 5.85 | 106.06 | 3.9 | 70.71 |
| 3837 | Partial thromboplastin time ● Gedeeltelike tromboplastientyd | 5.85 | 106.06 | 3.9 | 70.71 |
| 3841 | Thrombin time (screen) ● Trombientyd (sifting) | 7.16 | 129.81 | 4.77 | 86.48 |
| 3843 | Thrombin time (serial) ● Trombientyd (reeks) | 7.65 | 138.69 | 5.1 | 92.46 |
| 3847 | Haemoglobin H ● Hemoglobien H | 2.25 | 40.79 | 1.5 | 27.20 |
| 3851 | Fibrin degeneration products (diffusion plate) ● Fibrien degenerasieprodukte (diffusieplaat) | 10.35 | 187.65 | 6.9 | 125.10 |
| 3853 | Fibrin degeneration products (latex slide) ● Fibrien degenerasie produkte (latex plaatjie) | 4.5 | 81.59 | 3 | 54.39 |
| 3854 | XDP (Dimer test or equivalent latex slide test) ● XDP (Dimer-toets of ekwivalente latex-plaatjetoets) | 8.5 | 154.11 | 5.67 | 102.80 |
| 3856 | D-Dimer | 27.52 | 498.94 | 18.35 | 332.69 |
| 3855 | Hemagglutination inhibition ● Hemagglutinasie inhibisie | 9.9 | 179.49 | 6.6 | 119.66 |
| 3858 | Heparin Removal ● Heparin verwydering | 28.88 | 523.59 | 19.25 | 349.00 |
| 21.2 | Microscopic examinations ● Mikroskopiese ondersoeke | | | | |
| 3863 | Autogenous vaccine ● Outogene vaksien | 12.6 | 228.44 | 8.4 | 152.29 |
| 3864 | Entomological examination ● Entomologiese ondersoek | 20.7 | 375.29 | 13.8 | 250.19 |
| 3865 | Parasites in blood smear ● Parasiete in bloedsmeer | 5.6 | 101.53 | 3.73 | 67.62 |
| 3867 | Miscellaneous (body fluids, urine, exudate, fungi, Pusscrapings, etc.) ● Diverse (liggaamsvog, urien, eksudaat, Skimmels, etterskrappings, ens) | 4.9 | 88.84 | 3.3 | 59.83 |
| 3868 | Fungus identification ● Fungus identifikasie | 8.3 | 150.48 | 5.5 | 99.72 |
| 3869 | Faeces (including parasites) ● Fekalieë (parasiete ingesluit) | 4.9 | 88.84 | 3.27 | 59.29 |
| 3872 | Automated urine microscopy | 8.72 | 158.09 | 5.81 | 105.34 |
| 3873 | Transmission electron microscopy ● Transmissie elektronmikroskopie | 85 | 1 541.05 | 57 | 1 033.41 |
| 3874 | Scanning electron microscopy ● Skanderings-elektronmikroskopie | 100 | 1 813.00 | 67 | 1 214.71 |
| 3875 | Inclusion bodies ● Insluitingsliggaampie | 4.5 | 81.59 | 3 | 54.39 |
| 3878 | Crystal identification polarised light microscopy ● Kristal identifikasie gepolariseerde ligmikroskopie | 4.5 | 81.59 | 3 | 54.39 |
| 3879 | Compylobacter in stool: fastidious culture ● Campylobacter in feces: puntenerige kweking | 9.9 | 179.49 | 6.6 | 119.66 |
| 3880 | Antigen detection with polyclonal antibodies ● Antigeen bespeuring met poliklonale antiliggame | 4.5 | 81.59 | 3 | 54.39 |
| 3881 | Mycobacteria ● Mikobakterie | 3 | 54.39 | 2 | 36.26 |
| 3882 | Antigen detection with monoclonal antibodies ● Antigeenbespeuring met monoklonale antiliggame | 10.8 | 195.80 | 7.2 | 130.54 |
| 3883 | Concentration techniques for parasites ● Konsentrasie tegnieke vir parasiete | 3 | 54.39 | 2 | 36.26 |
| 3884 | Dark field. Phase- or interference contrast microscopy. Nomarski or Fontana ● Donkerveld. Fase- of interferensie-kontrasmikroskopie. Nomarski of Fontana | 6.3 | 114.22 | 4.2 | 76.15 |
| 3885 | Cytochemical stain ● Sitochemiese kleuring | 5.45 | 98.81 | 3.65 | 66.17 |
| 21.3 | Bacteriology (culture and biological examination ● Bakteriologie (kweking en biologiese ondersoek) | | | | |
| 3886 | DELETED 2009: Antibiotic MIC per organism per antibiotic ● GESKRAP 2009: Antibiotikum MIK per organisme per antibiotikum | | | | |
| 3887 | Antibiotic susceptibility test, per organism ● Antibiotikum gevoeligheidstoets per organisme | 8 | 145.04 | 5.33 | 96.63 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|------|--|-------------------------|--------|---|--------|
| | | U/E | R | U/E | R |
| 3889 | Clostridium difficile toxin: Monoclonal immunological ● Clostridium difficile toksien: Monoklonaal immunologies. | 12.4 | 224.81 | 8.27 | 149.94 |
| 3890 | Antibiotic assay of tissues and fluids ● Antibiotikum-essai vir weefsels en vloeistof | 13.9 | 252.01 | 9.27 | 168.07 |
| 3891 | Blood culture: aerobic ● Bloedkweking: aerobies | 5.85 | 106.06 | 3.9 | 70.71 |
| 3892 | Blood culture: anaerobic ● Bloedkweking: anaerobies | 5.85 | 106.06 | 3.9 | 70.71 |
| 3893 | Bacteriological culture: miscellaneous ● Bakteriologiese kweking: diverse | 6.3 | 114.22 | 4.2 | 76.15 |
| 3894 | Radiometric blood culture ● Radiometriese bloedkweking | 10.8 | 195.80 | 7.2 | 130.54 |
| 3895 | Bacteriological culture: fastidious organisms ● Bakteriologiese kweking: puntenerige organisme | 9.9 | 179.49 | 6.6 | 119.66 |
| 3896 | In vivo culture: bacteria ● In vivo kweking: bakterie | 16 | 290.08 | 10.65 | 193.08 |
| 3897 | In vivo culture: virus ● In vivo kweking: virus | 16 | 290.08 | 10.65 | 193.08 |
| 3898 | Bacterial exotoxin production (in vitro assay) ● Bakteriese eksotoksien produksie (in vitro essai) | 4.5 | 81.59 | 3 | 54.39 |
| 3899 | Bacterial exotoxin production (in vivo assay) ● Bakteriese eksotoksien produksie (in vivo essai) | 20.7 | 375.29 | 13.8 | 250.19 |
| 3901 | Fungal culture ● Fungus-kweking | 4.5 | 81.59 | 3 | 54.39 |
| 3903 | Antibiotic level: biological fluids ● Antibiotikum vlak: biologiese vog | 11.7 | 212.12 | 7.8 | 141.41 |
| 3905 | Identification of virus or rickettsia ● Identifikasie van virus of rickettsia | 20.7 | 375.29 | 13.8 | 250.19 |
| 3906 | Identification: chlamydia ● Identifikasie: chlamidia | 16 | 290.08 | 10.65 | 193.08 |
| 3907 | Culture for staphylococcus aureus ● Kweking vir stafilococcus aureus | 2.25 | 40.79 | 1.5 | 27.20 |
| 3908 | Anaerobic culture: comprehensive ● Anaerobiese kweking: omvattend | 9.9 | 179.49 | 6.6 | 119.66 |
| 3909 | Anaerobic culture: limited procedure ● Anaerobiese kweking: beperkte prosedure | 4.5 | 81.59 | 3 | 54.39 |
| 3911 | B-Lactamase | 4.5 | 81.59 | 3 | 54.39 |
| 3915 | Mycobacterium culture ● Mikobakterie kweking | 4.5 | 81.59 | 3 | 54.39 |
| 3917 | Mycoplasma culture: limited ● Mikoplasma kweking beperk | 2.25 | 40.79 | 1.5 | 27.20 |
| 3918 | Mycoplasma culture: comprehensive ● Mikoplasma kweking: omvattend | 9.9 | 179.49 | 6.6 | 119.66 |
| 3919 | Identification of mycobacterium ● Identifikasie van mikobakterie | 9.9 | 179.49 | 6.6 | 119.66 |
| 3920 | Mycobacterium: antibiotic sensitivity ● Mikobakterie: antibiotikumsensitiwiteit | 9.9 | 179.49 | 6.6 | 119.66 |
| 3921 | Antibiotic synergistic study ● Ondersoek vir sinergisme van antibiotiese middels | 20.7 | 375.29 | 13.8 | 250.19 |
| 3922 | Viable cell count ● Lewendeseltelling | 1.35 | 24.48 | 0.9 | 16.32 |
| 3923 | Staph ID Abr (Yeast ID) | 3.15 | 57.11 | 2.1 | 38.07 |
| 3924 | Biochemical ident of bacterium: extended ● Biologiese ident van bakterie: omvattend | 12.5 | 226.63 | 8.33 | 151.02 |
| 3925 | Serological ident of bacterium: abridged ● Serologiese ident van bakterie: verkort | 3.15 | 57.11 | 2.1 | 38.07 |
| 3926 | Serological ident of bacterium: extended ● Serologiese ident van bakterie: omvattend | 10.2 | 184.93 | 6.8 | 123.28 |
| 3927 | Grouping of streptococci ● Streptokokkus groepering | 7.3 | 132.35 | 4.85 | 87.93 |
| 3928 | Antimicrobial substances ● Antimikrobiese substansies | 3.8 | 68.89 | 2.5 | 45.33 |
| 3929 | Radiometric mycobacterium identification ● Radiometriese mikobakterie identifikasie | 14 | 253.82 | 9.3 | 168.61 |
| 3930 | Radiometric mycobacterium antibiotic sensitivity ● Radiometriese mikobakterie antibiotiese sensitiwiteit | 25 | 453.25 | 16.7 | 302.77 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyens | |
|------|---|-------------------------|----------|--|--------|
| | | U/E | R | U/E | R |
| 4652 | Rapid automated bacterial identification per organism ● Vinnige geoutomatiseerde bakteriële identifikasie per organisme | 15 | 271.95 | 10 | 181.30 |
| 4653 | Rapid automated antibiotic susceptibility per organism ● Vinnige geoutomatiseerde antibiotikum gevoeligheid per organisme | 17 | 308.21 | 11.33 | 205.41 |
| 4654 | Rapid automated MIC per organism per antibiotic ● Vinnige geoutomatiseerde MIK per organisme per antibiotikum | 17 | 308.21 | 11.33 | 205.41 |
| 4655 | Mycobacteria: MIC determination - E Test ● Mikobakterie: MIK bepaling - E Toets | 16.50 | 299.15 | 11.00 | 199.43 |
| 4656 | Mycobacteria: Identification HPLC ● Mikobakterie: Identifikasie HPLC | 35.00 | 634.55 | 23.33 | 422.97 |
| 4657 | Mycobacteria: Liquefied, concentrated, fluorochrome stain ● Mikobakterie: Vervloeiide, gekonsentreerde flurochromiese kleuring | 9.90 | 179.49 | 6.60 | 119.66 |
| 21.4 | Serology ● Serologie | | | | |
| 3932 | HIV Elisa Type I and II (Screening tests only) | 14.1 | 255.63 | 9.4 | 170.42 |
| 3933 | IgE: Total; EMIT or ELISA ● IgE: Totaal; EMIT of ELISA | 11.7 | 212.12 | 7.8 | 141.41 |
| 3934 | Auto antibodies by labelled antibodies ● Oto-antiliggame deur gemerkte antiliggame | 16 | 290.08 | 10.65 | 193.08 |
| 3938 | Precipitin test per antigen ● Presipitasie toets per antigeen | 4.5 | 81.59 | 3 | 54.39 |
| 3939 | Agglutination test per antigen ● Agglutinasietoets per antigeen | 5.5 | 99.72 | 3.67 | 66.54 |
| 3940 | Haemagglutination test: per antigen ● Haemagglutinasietoets: per antigeen | 9.9 | 179.49 | 6.6 | 119.66 |
| 3941 | Modified Coombs' test for brucellosis ● Gewysigde Coombs-toets vir brucellose | 4.5 | 81.59 | 3 | 54.39 |
| 3942 | Hepatitis Rapid Viral Ab ● Hepatitis Virus AI - spoedmetode | 12.24 | 221.91 | 8.16 | 147.94 |
| 3943 | Antibody titer to bacterial exotoxin ● Antiliggaam titer teen bakteriese eksotoksien | 3.6 | 65.27 | 2.4 | 43.51 |
| 3944 | IgE: Specific antibody titer: ELISA/EMIT: per Ag ● IgE: spesifieke antiliggaam titer: ELISA/EMIT: per Ag | 12.4 | 224.81 | 8.27 | 149.94 |
| 3945 | Complement fixation test ● Komplementbindingstoets | 5.85 | 106.06 | 3.9 | 70.71 |
| 3946 | IgM: Specific antibody titer: ELISA or EMIT: per Ag ● IgM: Spesifieke antiliggaam titer: ELISA/EMIT: per Ag | 14.05 | 254.73 | 9.37 | 169.88 |
| 3947 | C-reactive protein ● C-reaktiwe proteïen | 3.6 | 65.27 | 2.4 | 43.51 |
| 3948 | IgG: Specific antibody titer: ELISA/EMIT: per Ag ● IgG: Spesifieke antiliggaam titer: ELISA/EMIT: per Ag | 12.95 | 234.78 | 8.63 | 156.46 |
| 3949 | Qualitative Kahn. VDRL or other flocculation ● Kwalitatiewe Kahn. VDRL of ander flokkulasie | 2.25 | 40.79 | 1.5 | 27.20 |
| 3950 | Neutrophil phagocytosis ● Neutrofiel-fagositose | 25.2 | 456.88 | 16.8 | 304.58 |
| 3951 | Quantitative Kahn. VDRL or other flocculation ● Kwantitatiewe Kahn. VDRL of ander flokkulasie | 3.6 | 65.27 | 2.4 | 43.51 |
| 3952 | Neutrophil chemotaxis ● Neutrofiel-chemotakse | 67.95 | 1 231.93 | 45.3 | 821.29 |
| 3953 | Tube agglutination test ● Buise agglutinasietoets | 4.15 | 75.24 | 2.76 | 50.04 |
| 3955 | Paul Bunnell: presumptive ● Paul Bunnell: vermoedelik | 2.25 | 40.79 | 1.5 | 27.20 |
| 3956 | Infectious Mononucleosis latex slide test (Monospot or equivalent) ● Infektiewe Mononukleose latex-plaatjietoets (Monospot of ekwivalent) | 8.5 | 154.11 | 5.67 | 102.80 |
| 3957 | Paul Bunnell: Absorption ● Paul Bunnell: Absorpsie | 4.5 | 81.59 | 3 | 54.39 |
| 4601 | Panel typing: Antibody detection: Class I ● Paneeltipering: Antiliggaam opsporing: Klas 1 | 36 | 652.68 | 24 | 435.12 |
| 4602 | Panel typing: Antibody detection: Class II ● Paneeltipering: Antiliggaam opsporing: Klas II | 44 | 797.72 | 29.3 | 531.21 |
| 4607 | Cross matching T-cells (per tray) ● Kruispassing T-selle (per blad) | 18 | 326.34 | 12 | 217.56 |
| 4608 | Cross matching B-cells ● Kruispassing B-selle | 38 | 688.94 | 25.3 | 458.69 |
| 4609 | Cross matching T- & B-cells ● Kruispassing T- & B-selle | 48 | 870.24 | 32 | 580.16 |
| 4610 | Helicobacter pylori antigen test ● Helikobakter pylori stoelgang antigeen | 34.6 | 627.30 | 23.07 | 418.26 |
| 4613 | Anti-Gm1 Antibody Assay ● Anti Gm1 AI bepaling | 75 | 1 359.75 | 50 | 906.50 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|------|---|-------------------------|----------|---|--------|
| | | U/E | R | U/E | R |
| 4614 | HIV Ab - Rapid Test ● MIV AI - spoedmetode | 12 | 217.56 | 8 | 145.04 |
| 3959 | Rose Waaler Agglutination test ● Rose Waaler agglutinasietoet. | 4.5 | 81.59 | 3 | 54.39 |
| 3961 | Slide agglutination test ● Voorwerpglas-agglutinasietoets | 2.63 | 47.68 | 1.75 | 31.73 |
| 3962 | Rebuck skin window ● Rebuck-huidvenster | 5.4 | 97.90 | 3.6 | 65.27 |
| 3963 | Serum complement level: each component ● Serum komplement vlak: per komponent | 3.15 | 57.11 | 2.1 | 38.07 |
| 3967 | Auto-antibody: Sensitised erythrocytes ● Outo-antiliggamme: Gesensitiseerde rooiselle | 4.5 | 81.59 | 3 | 54.39 |
| 3969 | Western blot technique ● Western klad tegniek | 74 | 1 341.62 | 49 | 888.37 |
| 3970 | DELETED 2009: Epstein-Barr virus antibody titer ● GESKRAP 2009: Epstein-Barr virus antiliggam titer | | | | |
| 3971 | Immuno-diffusion test: per antigen ● Immuno-diffusie toets: per antigeen | 3.15 | 57.11 | 2.1 | 38.07 |
| 3973 | Immuno electrophoresis: per immune serum ● Immuno-elektroforese: per immuunserum | 9.45 | 171.33 | 6.3 | 114.22 |
| 3975 | Indirect immuno-fluorescence test (Bacterial, viral, parasitic) ● Indirekte immuno fluoressensietoets (Bakterieel, viraal, parasitêr) | 12 | 217.56 | 8 | 145.04 |
| 3977 | Counter immuno-electrophoresis ● Kontra immuno-elektroferese | 6.75 | 122.38 | 4.5 | 81.59 |
| 3978 | Lymphocyte transformation ● Limfosien-transformasie | 51.7 | 937.32 | 34.5 | 625.49 |
| 3980 | Bilharzia Ag Serum/Urine ● Bilharzia Ag Serum/Urine | 14.5 | 262.89 | 9.67 | 175.32 |
| 21.5 | Skin tests ● Huidtoetse For skin-prick allergy tests, please refer to items 0218 to 0221 in the Integumentary Section | | | | |
| 21.6 | Biochemical tests: Blood ● Biochemiese toetse: Bloed | | | | |
| 3991 | Abnormal pigments: qualitative ● Abnormale pigmente: kwalitatief | 4.5 | 81.59 | 3 | 54.39 |
| 3993 | Abnormal pigments: quantitative ● Abnormale pigmente: kwantitatief | 9 | 163.17 | 6 | 108.78 |
| 3995 | Acid phosphatase ● Suurfosfatase | 5.18 | 93.91 | 3.45 | 62.55 |
| 3996 | Serum Amyloid A ● Serum Amiloied A | 8.28 | 150.12 | 5.52 | 100.08 |
| 3997 | Acid phosphatase fractionation ● Suurfosfatase fraksionasie | 1.8 | 32.63 | 1.2 | 21.76 |
| 3998 | Amino acids: Quantitative (Post derivatisation HPLC) ● Aminosure: Kwantitatief (Post derivatisering HDVC) | 78.12 | 1 416.32 | 52.08 | 944.21 |
| 3999 | Albumin ● Albumien | 4.8 | 87.02 | 3.2 | 58.02 |
| 4000 | Alcohol ● Alkohol | 12.4 | 224.81 | 8.27 | 149.94 |
| 4001 | Alkaline phosphatase ● Alkaliese fosfatase | 5.18 | 93.91 | 3.45 | 62.55 |
| 4002 | Alkaline Phosphatase-iso-enzymes ● Alkaliese fosfatase-iso-ensieme | 11.7 | 212.12 | 7.8 | 141.41 |
| 4003 | Ammonia: enzymatic ● Ammoniak: ensiematies | 7.71 | 139.78 | 5.14 | 93.19 |
| 4004 | Ammonia: monitor ● Ammoniak: monitor | 4.5 | 81.59 | 3 | 54.39 |
| 4005 | Alpha-1-antitrypsin ● Alfa-1-antitripsien | 7.2 | 130.54 | 4.8 | 87.02 |
| 4006 | Amylase ● Amilase | 5.18 | 93.91 | 3.45 | 62.55 |
| 4007 | Arsenic in blood, hair or nails ● Arseen in bloed, hare of naels | 36.25 | 657.21 | 24.17 | 438.20 |
| 4008 | Bilirubin – Reflectance ● Bilirubien reflektansie | 4.77 | 86.48 | 3.18 | 57.65 |
| 4009 | Bilirubin: total ● Bilirubien: totaal | 4.77 | 86.48 | 3.18 | 57.65 |
| 4010 | Bilirubin: conjugated ● Bilirubien: gekonjugeerd | 3.62 | 65.63 | 2.41 | 43.69 |
| 4014 | Cadmium: atomic absorp ● Kadmium: atoomabsorpsies | 18.12 | 328.52 | 12.08 | 219.01 |
| 4016 | Calcium: Ionized ● Kalsium: Geioniseerd | 6.75 | 122.38 | 4.5 | 81.59 |
| 4017 | Calcium: spectrophotometric ● Kalsium spektrofotometrie | 3.62 | 65.63 | 2.41 | 43.69 |
| 4018 | Calcium: atomic absorption ● Kalsium: atoomabsorpsie | 7.25 | 131.44 | 4.83 | 87.57 |
| 4019 | Carotene ● Karoteen | 2.25 | 40.79 | 1.5 | 27.20 |
| 4023 | Chloride ● Chloried | 2.59 | 46.96 | 1.73 | 31.36 |
| 4026 | LDL cholesterol (chemical determination) | 6.9 | 125.10 | 4.6 | 83.40 |
| 4027 | Cholesterol total | 5.34 | 96.81 | 3.56 | 64.54 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyens | |
|------|---|-------------------------|--------|--|--------|
| | | U/E | R | U/E | R |
| 4029 | Cholinesterase: serum or erythrocyte: each ● Cholinesterase: serum of rooisel: elk | 7.48 | 135.61 | 4.99 | 90.47 |
| 4030 | Cholinesterase phenotype (Dibucaine or fluoride each) ● Cholinesterase fenotipe (Dibucaine of fluoried elk) | 9 | 163.17 | 6 | 108.78 |
| 4031 | Total CO2 ● Totale CO2 | 5.18 | 93.91 | 3.45 | 62.55 |
| 4032 | Creatinine ● Kreatinien | 3.62 | 65.63 | 2.41 | 43.69 |
| 4035 | CSF-Albumin ● SSV Albumien | 9.45 | 171.33 | 6.3 | 114.22 |
| 4036 | CSF-IgG Index ● SSV IgG Indeks | 22.05 | 399.77 | 14.7 | 266.51 |
| 4040 | Homocysteine (random) ● Homosistein (lukraak) | 15.3 | 277.39 | 10.2 | 184.93 |
| 4041 | Homocysteine (after Methionine load) ● Homosistein (na Metionien-lading) | 18.1 | 328.15 | 12.06 | 218.65 |
| 4042 | D-Xylose absorption test: two hours ● D-Xylose absorpsietoets twee uur | 13.15 | 238.41 | 8.75 | 158.64 |
| 4045 | Fibrinogen: quantitative ● Fibrinogeen: kwantitatief | 3.6 | 65.27 | 2.4 | 43.51 |
| 4047 | Hollander test ● Hollander se toets | 24.75 | 448.72 | 16.5 | 299.15 |
| 4049 | Glucose tolerance test (2 specimens) ● Glukose toleransietoets (2 monsters) | 8.97 | 162.63 | 5.98 | 108.42 |
| 4050 | Glucose strip-test with photometric reading ● Glukose strokietoets met fotometriese lesing | 1.8 | 32.63 | 1.2 | 21.76 |
| 4051 | Galactose ● Galaktose | 11.25 | 203.96 | 7.5 | 135.98 |
| 4052 | Glucose tolerance test (3 specimens) ● Glukose toleransietoets (3 monsters) | 13.17 | 238.77 | 8.78 | 159.18 |
| 4053 | Glucose tolerance test (4 specimens) ● Glukose toleransietoets (4 monsters) | 17.37 | 314.92 | 11.58 | 209.95 |
| 4057 | Glucose Quantitative ● Glukose Kwantitatief | 3.62 | 65.63 | 2.41 | 43.69 |
| 4061 | Glucose tolerance test (5 specimens) ● Glukose toleransietoets (5 monsters) | 21.56 | 390.88 | 14.37 | 260.53 |
| 4063 | Fructosamine ● Fruktosamine | 7.2 | 130.54 | 4.8 | 87.02 |
| 4064 | Glycated haemoglobin: chromatography/HbA1C Geglikosileerde hemoglobien: chromatografie/HbA1C | 14.25 | 258.35 | 9.5 | 172.24 |
| 4067 | Lithium: flame ionisation ● Litium: vlam ionisasie | 5.18 | 93.91 | 3.45 | 62.55 |
| 4068 | Lithium: atomic absorption ● Litium: atoomabsorpsie | 7.48 | 135.61 | 4.99 | 90.47 |
| 4071 | Iron ● Yster | 6.75 | 122.38 | 4.5 | 81.59 |
| 4073 | Iron-binding capacity ● Ysterbindingsvermoë | 7.65 | 138.69 | 5.1 | 92.46 |
| 4076 | Carboxy Hemoglobin (6x per 24 hrs) | 19.1 | 346.28 | 12.73 | 230.79 |
| 4078 | Oximetry analysis: MetHb, COHb, O2Hb, RHb, SulfHb ● Oksimetriese analise: MetHb, COHb, O2Hb, RHb, SulfHb | 6.75 | 122.38 | 4.5 | 81.59 |
| 4079 | Ketones in plasma: qualitative ● Ketone in plasma: kwalitatief | 2.25 | 40.79 | 1.5 | 27.20 |
| 4081 | Drug level-biological fluid: Quantitative ● Middel vlak-biologiese vog: kwantitatief | 10.8 | 195.80 | 7.2 | 130.54 |
| 4086 | Plasma Lactate | 16 | 290.08 | 10.67 | 193.45 |
| 4085 | Lipase ● Lipase | 5.18 | 93.91 | 3.45 | 62.55 |
| 4091 | Lipoprotein electrophoresis ● Lipoproteien-elektroferese | 9 | 163.17 | 6 | 108.78 |
| 4093 | Osmolality: Serum or urine ● Osmolaliteit: Serum of urien | 6.75 | 122.38 | 4.5 | 81.59 |
| 4094 | Magnesium: Spectrophotometric ● Magnesium: Spektrofotometries | 3.62 | 65.63 | 2.41 | 43.69 |
| 4095 | Magnesium: Atomic absorption ● Magnesium: Atoomabsorpsie | 7.25 | 131.44 | 4.83 | 87.57 |
| 4096 | Mercury: Atomic absorption ● Kwik: Atoomabsorpsie | 18.12 | 328.52 | 12.08 | 219.01 |
| 4098 | Copper: Atomic absorption ● Koper: Atoomabsorpsie | 18.12 | 328.52 | 12.08 | 219.01 |
| 4105 | Protein electrophoresis ● Proteien-elektroferese | 9 | 163.17 | 6 | 108.78 |
| 4106 | IgG sub-class 1.2. 3 or 4: Per sub-class ● IgG subklas 1.2. 3 of 4: Per subklas | 20 | 362.60 | 13.2 | 239.32 |
| 4109 | Phosphate ● Fosfaat | 3.62 | 65.63 | 2.41 | 43.69 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|------|--|-------------------------|--------|---|--------|
| | | U/E | R | U/E | R |
| 4111 | Phospholipids ● Fosfolipiede | 3.15 | 57.11 | 2.1 | 38.07 |
| 4113 | Potassium ● Kalium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4114 | Sodium ● Natrium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4117 | Protein: total ● Proteïen: totaal | 3.11 | 56.38 | 2.07 | 37.53 |
| 4121 | pH. pCO ₂ or pO ₂ each ● pH. pCO ₂ of pO ₂ : elk | 6.75 | 122.38 | 4.5 | 81.59 |
| 4123 | Pyruvic acid ● Pirodruiwesuur | 4.5 | 81.59 | 3 | 54.39 |
| 4125 | Salicylates ● Salisilate | 4.5 | 81.59 | 3 | 54.39 |
| 4126 | Secretin-pancreozymin responds ● Sekretien-pankreasimien-respons | 26.1 | 473.19 | 17.4 | 315.46 |
| 4127 | Caeruloplasmien ● Seruloplasmin | 4.5 | 81.59 | 3 | 54.39 |
| 4128 | Phenylalanine: Quantitative ● Feniëalanien: kwantitatief | 11.25 | 203.96 | 7.5 | 135.98 |
| 4129 | Glutamate dehydrogenase (GDH) ● Glutamaat dehidrogenase (GDH) | 5.4 | 97.90 | 3.6 | 65.27 |
| 4130 | Aspartate amino transferase (AST) ● Aspartaat amino transferase (AST) | 5.4 | 97.90 | 3.6 | 65.27 |
| 4131 | Alanine amino transferase (ALT) ● Alanien amino transferase (ALT) | 5.4 | 97.90 | 3.6 | 65.27 |
| 4132 | Creteine kinase (CK) ● Kreatien kinase (CK) | 5.4 | 97.90 | 3.6 | 65.27 |
| 4133 | Lactate dehydrogenase (LD) ● Laktaat dehidrogenase (LD) | 5.4 | 97.90 | 3.6 | 65.27 |
| 4134 | Gamma glutamyl transferase (GGT) ● Gamma glutamiel transferase (GGT) | 5.4 | 97.90 | 3.6 | 65.27 |
| 4135 | Aldolase ● Aldolase | 5.4 | 97.90 | 3.6 | 65.27 |
| 4136 | Angiotensin converting enzyme (ACE) ● Anglotensien omskakelingsensiem (ACE) | 9 | 163.17 | 6 | 108.78 |
| 4137 | Lactate dehydrogenase isoenzyme ● Laktaat dehidrogenase isoensiem | 10.8 | 195.80 | 7.2 | 130.54 |
| 4138 | CK-MB: immunoinhibition/precipitation I CK-MB: immunoinhibisie/presipetasie | 10.8 | 195.80 | 7.2 | 130.54 |
| 4139 | Adenosine deaminase ● Adenosien deaminase | 5.4 | 97.90 | 3.6 | 65.27 |
| 4142 | Red cell enzymes: each ● Rooiselensiem: elk | 7.8 | 141.41 | 5.2 | 94.28 |
| 4143 | Serum/plasma enzymes: each ● Serum/plasma ensiem: elk | 5.4 | 97.90 | 3.6 | 65.27 |
| 4144 | Transferrin ● Transferrien | 11.7 | 212.12 | 7.8 | 141.41 |
| 4146 | Lead: atomic absorption ● Lood: atoomabsorpsie. | 15 | 271.95 | 10 | 181.30 |
| 4151 | Urea ● Ureum | 3.62 | 65.63 | 2.41 | 43.69 |
| 4152 | CK-MB | 12.4 | 224.81 | 8.27 | 149.94 |
| 4154 | Myoglobin quantitative: Monoclonal immunological ● Mioglobien kwantitatief: Monoklonaal immunologies | 12.4 | 224.81 | 8.27 | 149.94 |
| 4155 | Uric acid ● Uriensuur | 3.78 | 68.53 | 2.52 | 45.69 |
| 4157 | Vitamin A-saturation test ● Vitamien A-versadigingstoets | 15.3 | 277.39 | 10.2 | 184.93 |
| 4158 | Vitamin E (tocopherol) ● Vitamien E (tokoferol) | 3.6 | 65.27 | 2.4 | 43.51 |
| 4159 | Vitamin A ● Vitamien A | 6.3 | 114.22 | 4.2 | 76.15 |
| 4160 | Vitamin C (ascorbic acid) ● Vitamien C (askorbiensuur) | 2.25 | 40.79 | 1.5 | 27.20 |
| 4161 | Trop T | 20 | 362.60 | 13.33 | 241.67 |
| 4171 | Sodium + potassium + chloride + CO ₂ + urea ● Natrium + kalium + chloried + CO ₂ + ureum | 15.84 | 287.18 | 10.56 | 191.45 |
| 4172 | ELIZA or EMIT technique ● ELIZA of EMIT tegniek | 12.42 | 225.17 | 8.28 | 150.12 |
| 4181 | Quantitative protein estimation: Mancini method ● Kwantitatiewe proteïen bepaling: Mancini metode | 7.76 | 140.69 | 5.17 | 93.73 |
| 4182 | Quantitative protein estimation: nephelometer ● Kwantitatiewe proteïen bepaling: nefelometer | 8.28 | 150.12 | 5.52 | 100.08 |
| 4183 | Quantitative protein estimation: labelled antibody ● Kwantitatiewe proteïen bepaling: gemerkte antiliggam | 12.42 | 225.17 | 8.28 | 150.12 |
| 4185 | Lactose ● Laktose | 10.8 | 195.80 | 7.2 | 130.54 |
| 4187 | Zinc: atomic absorption ● Sink: atoomabsorpsie | 18.12 | 328.52 | 12.08 | 219.01 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|-------------|---|-------------------------|----------|---|--------|
| | | U/E | R | U/E | R |
| 21.7 | Biochemical tests: Urine ● Biochemiese toets: uriene | | | | |
| 4188 | Urine dipstick, per stick (irrespective of the number of tests on stick) ● Urien doopstrok, per strok (ongeg die aantal toets op die strok) | 1.5 | 27.20 | 1 | 18.13 |
| 4189 | Abnormal pigments ● Abnormale pigmente | 4.5 | 81.59 | 3 | 54.39 |
| 4193 | Alkapton test: homogentisic acid ● Alkapton toets: homogentisien-suur | 4.5 | 81.59 | 3 | 54.39 |
| 4194 | Amino acids: quantitative (Post derivatisation HPLC) ● Aminosure: kwantitatief (Post derivatisering HDVC) | 78.12 | 1 416.32 | 52.08 | 944.21 |
| 4195 | Amino laevulinic acid ● Aminolevuliensuur | 18 | 326.34 | 12 | 217.56 |
| 4197 | Amylase ● Amilase | 5.18 | 93.91 | 3.45 | 62.55 |
| 4199 | Ascorbic acid ● Askorbiensuur | 2.25 | 40.79 | 1.5 | 27.20 |
| 4201 | Bence-Jones protein ● Bence-Jones proteien | 2.7 | 48.95 | 1.8 | 32.63 |
| 4203 | Phenol ● Fenol | 3.6 | 65.27 | 2.4 | 43.51 |
| 4204 | Calcium: atomic absorption ● Kalsium: atoomabsorpsie | 7.25 | 131.44 | 4.83 | 87.57 |
| 4205 | Calcium: spectrophotometric ● Kalsium: spektrofotometries | 3.62 | 65.63 | 2.41 | 43.69 |
| 4206 | Calcium: absorption and excretion studies ● Kalsium: absorpsie en ekskresie studies | 25 | 453.25 | 16.7 | 302.77 |
| 4209 | Lead: atomic absorption ● Lood: atoom absorpsie | 15 | 271.95 | 10 | 181.30 |
| 4211 | Bile pigments: qualitative ● Galpigmente: kwalitatief | 2.25 | 40.79 | 1.5 | 27.20 |
| 4213 | Protein: quantitative ● Proteien: kwantitatief | 2.25 | 40.79 | 1.5 | 27.20 |
| 4216 | Mucopolysaccharides: qualitative ● Mukopolisakkariede: kwalitatief | 3.6 | 65.27 | 2.4 | 43.51 |
| 4217 | Oxalate/Citrate: enzymatic each ● Oksalaat/Sitraat: ensiematies elk | 9.38 | 170.06 | 6.25 | 113.31 |
| 4218 | Glucose: quantitative ● Glukose: kwantitatief | 2.25 | 40.79 | 1.5 | 27.20 |
| 4219 | Steroids: chromatography (each) ● Steroiede: chromatografie (elk) | 7.2 | 130.54 | 4.8 | 87.02 |
| 4221 | Creatinine ● Kreatinien | 3.62 | 65.63 | 2.41 | 43.69 |
| 4223 | Creatinine clearance ● Kreatinien-opruiming | 7.65 | 138.69 | 5.1 | 92.46 |
| 4227 | Electrophoreses: qualitative ● Elektroforese: kwalitatief | 4.5 | 81.59 | 3 | 54.39 |
| 4229 | Uric acid clearance ● uriensuuropruiming | 7.65 | 138.69 | 5.1 | 92.46 |
| 4231 | Metabolites HPLC (High Pressure Liquid Chromatography) ● Metaboliete HDVC (Hoë Druk Vloeistof Chromatografie) | 37.50 | 679.88 | 25.00 | 453.25 |
| 4232 | Metabolites (Gaschromatography/Mass spectrophotometry) ● Metaboliete (Gaschromatografie/massa spektrofotometrie) | 46.80 | 848.48 | 31.20 | 565.66 |
| 4233 | Pharmacological/Drugs of abuse: Metabolites HPLC (High Pressure Liquid Chromatography) ● Farmakologiese/Gewoontevormende middels: Metaboliete HDVC (Hoë Druk Vloeistof Chromatografie) | 37.50 | 679.88 | 25.00 | 453.25 |
| 4234 | Pharmacological/Drugs of abuse: Metabolites (Gaschromatography/Mass spectrophotometry) ● Farmakologiese/Gewoontevormende middels: Metaboliete (Gaschromatografie/massa spektrofotometrie) | 46.80 | 848.48 | 31.20 | 565.66 |
| 4237 | 5-Hydroxy-indole-acetic acid: screen test ● 5-Hidroksie-indolasynsuur: siftingstoets | 2.7 | 48.95 | 1.8 | 32.63 |
| 4239 | 5-Hydroxy-indole-acetic acid: quantitative ● 5-Hidroksie-indolasynsuur: kwantitatief | 6.75 | 122.38 | 4.5 | 81.59 |
| 4241 | DELETED 2009: Indican or indole: qualitative ● GESKRAP 2009: Indikan of indool: kwalitatief | | | | |
| 4247 | Ketones: excluding dip-stick method ● Ketone: dompelstrokiemetode uitgesluit | 2.25 | 40.79 | 1.5 | 27.20 |
| 4248 | Reducing substances ● Reduserende stowwe | 1.8 | 32.63 | 1.2 | 21.76 |
| 4251 | Metanephrines: column chromatography ● Metanefriene: kolom chromatografie | 22.05 | 399.77 | 14.7 | 266.51 |
| 4253 | Aromatic amines (gas chromatography/mass spectrophotometry) I Aromatiese amiene (gas chromatografie/massaspektrofotometrie) | 27 | 489.51 | 18 | 326.34 |
| 4254 | Nitrosophtol test for tyrosine ● Nitrosoaftoltoets vir tirosien | 2.25 | 40.79 | 1.5 | 27.20 |
| 4262 | Micro Albumin-Qualitative ● Mikroalbumien Kwalitatief | 4.5 | 81.59 | 3 | 54.39 |
| 4263 | pH: Excluding dip-stick method ● pH: Dompelstrokiemetode uitgeslote | 0.9 | 16.32 | 0.6 | 10.88 |
| 4265 | Thin layer chromatography: one way ● Dunlaag chromatografie: enkelrigting | 6.75 | 122.38 | 4.5 | 81.59 |
| 4266 | Thin layer chromatography: two way ● Dunlaag chromatografie: tweerigting | 11.25 | 203.96 | 7.5 | 135.98 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyne | |
|------|--|-------------------------|----------|---|----------|
| | | U/E | R | U/E | R |
| 4267 | Total organic matter screen: Infrared ● Totale organiese materiaal sifting: Infrarooi | 31.25 | 566.56 | 20.83 | 377.65 |
| 4268 | Organic acids: quantitative: GCMS ● Organiese sure: kwantitatief: GCMS | 109.38 | 1 983.06 | 72.92 | 1 322.04 |
| 4269 | Phenylpyruvic acid: ferric chloride ● Fenielpirodruiwesuur: ferrichloried | 2.25 | 40.79 | 1.5 | 27.20 |
| 4271 | Phosphate excretion index ● Fosfaat uitskeidings indeks | 22.05 | 399.77 | 14.7 | 266.51 |
| 4272 | Porphobilinagen qualitative screen: urine ● Porfobilinogeen kwalitatiewe sifting: urien | 5 | 90.65 | 3.33 | 60.37 |
| 4273 | Porphobilinogen/ALA: quantitative each ● Porfobilinogeen/ALS kwantitatief elk | 15 | 271.95 | 10 | 181.30 |
| 4283 | Magnesium: spectrophotometric ● Magnesium: spektrofotometries | 3.62 | 65.63 | 2.41 | 43.69 |
| 4284 | Magnesium: atomic absorption ● Magnesium: atoomabsorpsie | 7.25 | 131.44 | 4.83 | 87.57 |
| 4285 | Identification of carbohydrate ● Identifikasie van koolhidrate | 7.65 | 138.69 | 5.1 | 92.46 |
| 4287 | Identification of drug: qualitative ● Identifikasie van geneesmiddel: kwalitatief | 4.5 | 81.59 | 3 | 54.39 |
| 4288 | Identification of drug: quantitative ● Identifikasie van geneesmiddel: kwantitatief | 10.8 | 195.80 | 7.2 | 130.54 |
| 4293 | Urea clearance ● Ureum opruiming | 5.4 | 97.90 | 3.6 | 65.27 |
| 4297 | Copper: spectrophotometric ● Koper: spektrofotometries | 3.62 | 65.63 | 2.41 | 43.69 |
| 4298 | Copper: Atomic absorption ● Koper: atoomabsorpsie | 18.12 | 328.52 | 12.08 | 219.01 |
| 4300 | Indican or Indole: Qualitative ● Indikan of Indool: Kwalitatief | 3.15 | 57.11 | 2.1 | 38.07 |
| 4301 | Chloride ● Chloried | 2.59 | 46.96 | 1.73 | 31.36 |
| 4307 | Ammonium chloride loading test ● Ammoniumchloried-ladingstoets | 22.05 | 399.77 | 14.7 | 266.51 |
| 4309 | Urobilinogen: quantitative ● Urobilinogeen: kwantitatief | 6.75 | 122.38 | 4.5 | 81.59 |
| 4313 | Phosphates ● Fosfaat | 3.62 | 65.63 | 2.41 | 43.69 |
| 4315 | Potassium ● Kalium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4316 | Sodium ● Natrium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4319 | Urea ● Ureum | 3.62 | 65.63 | 2.41 | 43.69 |
| 4321 | Uric acid ● Uriensuur | 3.62 | 65.63 | 2.41 | 43.69 |
| 4322 | Fluoride ● Fluoried | 5.18 | 93.91 | 3.45 | 62.55 |
| 4323 | Total protein and protein electrophoreses ● Totale proteïene en proteïenelektroforese. | 11.25 | 203.96 | 7.5 | 135.98 |
| 4325 | VMA: quantitative ● VMA: kwantitatief | 11.25 | 203.96 | 7.5 | 135.98 |
| 4327 | Immunofixation: Total Protein, IgG, IgA, IgM, Kappa, Lambda ● Immunofiksasie: Totale proteïene, IgG, IgA, IgM, Kappa, Lambda | 46.88 | 849.93 | 31.25 | 566.56 |
| 4335 | Cystine: quantitative ● Sistien: kwantitatief | 12.6 | 228.44 | 8.4 | 152.29 |
| 4336 | Dinitrophenal hydrazine test: ketoacids ● Dinitrofenol-hidrasientoets vir ketosure | 2.25 | 40.79 | 1.5 | 27.20 |
| 4337 | Hydroxyproline: quantitative ● Hidroksieprolien: kwantitatief | 18.9 | 342.66 | 12.6 | 228.44 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyns | |
|--------------|--|-------------------------|----------|---|--------|
| | | U/E | R | U/E | R |
| 21.8 | Biochemical tests: Faeces ● Biochemiese toetse: Fekalieë | | | | |
| 4339 | Chloride ● Chloried | 2.59 | 46.96 | 1.73 | 31.36 |
| 4343 | Fat: qualitative ● Vet: kwalitatief | 3.15 | 57.11 | 2.1 | 38.07 |
| 4345 | Fat: quantitative ● Vet: kwantitatief | 22.05 | 399.77 | 14.7 | 266.51 |
| 4347 | pH ● pH | 0.9 | 16.32 | 0.6 | 10.88 |
| 4351 | Occult blood: chemical test ● Okkulte bloed: chemiese toets | 2.25 | 40.79 | 1.5 | 27.20 |
| 4352 | Occult blood (monoclonal antibodies) ● Okkulte bloed (monoklonale antiliggame) | 10 | 181.30 | 6.67 | 120.93 |
| 4357 | Potassium ● Kalium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4358 | Sodium ● Natrium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4361 | Stercobilin ● Sterkobilien | 2.25 | 40.79 | 1.5 | 27.20 |
| 4363 | Stercobilinogen: quantitative ● Sterkobilinoëen: kwantitatief | 6.75 | 122.38 | 4.5 | 81.59 |
| 21.9 | Biochemical tests: Miscellaneous ● Biochemiese toetse: Diverse | | | | |
| 4370 | Vancomycin, Phenytoin, Theophylline | 12.4 | 224.81 | 8.27 | 149.94 |
| 4371 | Amylase in exudate ● Amilase in eksudaat | 5.18 | 93.91 | 3.45 | 62.55 |
| 4374 | Trace metals in biological fluid: Atomic absorption ● Spoorelemente in biologiese vog: atoomabsorpsie | 18.13 | 328.70 | 12.08 | 219.01 |
| 4375 | Calcium in fluid: Spectrophotometric ● Kalsium in vog: Spektrofotometries | 3.62 | 65.63 | 2.41 | 43.69 |
| 4376 | Calcium in fluid: Atomic absorption ● Kalsium in vog: Atoomabsorpsie | 7.25 | 131.44 | 4.83 | 87.57 |
| 4388 | Gastric contents: Maximal stimulation ● Maaginhoud: Maksimum stimulasietoets | 27 | 489.51 | 18 | 326.34 |
| 4389 | Gastric fluid: Total acid per specimen ● Maagsap: Totale suur per monster | 2.25 | 40.79 | 1.5 | 27.20 |
| 4391 | Renal calculus: Chemistry ● Niersteen: Chemiese ontleding | 5.4 | 97.90 | 3.6 | 65.27 |
| 4392 | Renal calculus: Crystallography ● Niersteen: Kristallografie | 16.25 | 294.61 | 10.8 | 195.80 |
| 4393 | Saliva: Potassium ● Speeksel: Kalium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4394 | Saliva: Sodium ● Speeksel: Natrium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4395 | Sweat: Sodium ● Sweet: Natrium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4396 | Sweat: Potassium ● Sweet: Kalium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4397 | Sweat: Chloride ● Sweet: Chloried | 2.59 | 46.96 | 1.73 | 31.36 |
| 4399 | Sweat collection by iontophoresis (excluding collection material) ● Sweetkolleksie deur iontoforese (kolleksie materiaal uitgesluit) | 4.5 | 81.59 | 3 | 54.39 |
| 4400 | Tryptophane loading test ● Triptofaanladingstoets | 22.05 | 399.77 | 14.7 | 266.51 |
| 21.10 | Cerebrospinal fluid ● Serebro spinale vog | | | | |
| 4401 | Cell count ● Seltelling | 3.45 | 62.55 | 2.3 | 41.70 |
| 4407 | Cell count. protein. glucose and chloride ● Seltelling. proteïen. glukose en chloried | 7.65 | 138.69 | 5.1 | 92.46 |
| 4409 | Chloride ● Chloried | 2.59 | 46.96 | 1.73 | 31.36 |
| 4415 | Potassium ● Kalium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4416 | Sodium ● Natrium | 3.62 | 65.63 | 2.41 | 43.69 |
| 4417 | Protein: Qualitative ● Proteïen: Kwalitatief | 0.9 | 16.32 | 0.6 | 10.88 |
| 4419 | Protein: Quantitative ● Proteïen: Kwantitatief | 3.11 | 56.38 | 2.07 | 37.53 |
| 4421 | Glucose ● Glukose | 3.62 | 65.63 | 2.41 | 43.69 |
| 4423 | Urea ● Ureum | 3.62 | 65.63 | 2.41 | 43.69 |
| 4425 | Protein electrophoresis ● Proteïenelektroforese | 12.6 | 228.44 | 8.4 | 152.29 |
| 4434 | Bacteriological DNA identification (PCR) | 75 | 1 359.75 | 50 | 906.50 |

| | | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyns | |
|--------------|---|-------------------------|---------------------|---|-----------------|
| | | U/E | R | U/E | R |
| 21.12 | Isotopes ● Isotope | | | | |
| 4451 | HCG: Monoclonal immunological :Quantitative | 12.4 | 224.81 | 8.27 | 149.94 |
| 4458 | Micro-albuminuria: radio-isotope method ● Mikro-albuminurie: radio-isotoop metode | 12.42 | 225.17 | 8.3 | 150.48 |
| 4459 | Acetyl choline receptor antibody ● Asetielcholien reseptor antiliggaam | 158.12 | 2 866.72 | 105.41 | 1 911.08 |
| 4463 | C6 complement functional essay ● C6 komplement funksionele bepaling | 45 | 815.85 | 30 | 543.90 |
| 4466 | Beta-2-microglobulin ● Beta-2-mikroglobulien | 12.42 | 225.17 | 8.28 | 150.12 |
| 4469 | S-S100 | 20 | 362.60 | 13.33 | 241.67 |
| 4452 | Bone-Specific Alk. Phosphatase ● Been alkaliese fosfatase | 20 | 362.60 | 13.33 | 241.67 |
| 4479 | Vitamin B12-absorption: Shilling test ● Vitamien B12-opsorsie: Shillingtoets | 11.7 | 212.12 | 7.8 | 141.41 |
| 4480 | Serotonin ● Serotonien | 18.75 | 339.94 | 12.5 | 226.63 |
| 4482 | Free thyroxine (FT4) ● Vry tiroksien (FT4) | 17.48 | 316.91 | 11.65 | 211.21 |
| 4484 | Thyroid profile (only with special motivation) | 37.8 | 685.31 | 24.72 | 448.17 |
| 4485 | Insulin ● Insulien | 12.42 | 225.17 | 8.28 | 150.12 |
| 4488 | NT Pro BNP | 47.04 | 852.84 | 33.35 | 604.64 |
| 4491 | Vitamin B12 ● Vitamien B12 | 12.42 | 225.17 | 8.28 | 150.12 |
| 4493 | Drug concentration: quantitative ● Middelkonsentrasie: kwantitatief | 12.42 | 225.17 | 8.28 | 150.12 |
| 4497 | Carbohydrate deficient transferrin ● Koolwaterstof-gebrekkige transferrien | 29.06 | 526.86 | 19.37 | 351.18 |
| 4499 | Cortisol ● Kortisol | 12.42 | 225.17 | 8.28 | 150.12 |
| 4500 | DHEA sulphate ● DHEA-sulfaat | 12.42 | 225.17 | 8.28 | 150.12 |
| 4507 | Thyrotropin (TSH) ● Tirotropien (TSH) | 19.6 | 355.35 | 13.07 | 236.96 |
| 4509 | Free tri-iodothyronine (FT3) ● Vry trijodotironien (FT3) | 17.48 | 316.91 | 11.65 | 211.21 |
| 4511 | Renin activity ● Renien aktiwiteit | 18.9 | 342.66 | 12.6 | 228.44 |
| 4516 | Follitropin (FSH) ● Follitropien (FSH) | 12.42 | 225.17 | 8.28 | 150.12 |
| 4517 | Lutropin (LH) ● Lutropien (LH) | 12.42 | 225.17 | 8.28 | 150.12 |
| 4522 | Alpha-Feto protein ● Alfa-fetoproteïen | 12.42 | 225.17 | 8.28 | 150.12 |
| 4523 | ACTH ● AKTH | 21.74 | 394.15 | 14.49 | 262.70 |
| 4524 | Free PSA ● Vry PSA | 14.49 | 262.70 | 9.66 | 175.14 |
| 4527 | Gastrin ● Gastrien | 12.42 | 225.17 | 8.28 | 150.12 |
| 4528 | Ferritin ● Ferritien | 12.42 | 225.17 | 8.28 | 150.12 |
| 4530 | Antiplatelet antibodies ● Antiplaatjie antiliggame | 15.3 | 277.39 | 10.2 | 184.93 |
| 4531 | Hepatitis: per antigen or antibody ● Hepatitis: per antigeen of antiliggaam | 14.49 | 262.70 | 9.66 | 175.14 |
| 4532 | Transcobalamine ● Transkobalamien | 12.42 | 225.17 | 8.28 | 150.12 |
| 4533 | Folic acid ● Foliensuur | 12.42 | 225.17 | 8.28 | 150.12 |
| 4536 | Erythrocyte folate ● Rooisel foliensuur | 17.48 | 316.91 | 11.65 | 211.21 |
| 4537 | Prolactin ● Prolaktien | 12.42 | 225.17 | 8.28 | 150.12 |
| 4538 | Procalcitonin: qualitative | 32 | 580.16 | 21.33 | 386.71 |
| 4539 | Procalcitonin: Quantitative | 46 | 833.98 | 30.67 | 556.05 |
| 21.13 | After hour service and travelling fees (applicable to pathologists only) ● Buite normale werksure en reisgelde (slegs van toepassing op patoloë) | | | | |
| | Miscellaneous ● Diverse | | | | |
| 4544 | Attendance in theatre ● Teenwoordigheid in teater | 27 | 489.51 | - | - |
| 4547 | After hour service: (Monday to Friday) 17:00 to 08:00. Saturday 13:00 to Monday 08:00 and public holidays ● Diens buite normale werksure (Maandag tot Vrydag) 17:00 tot 08:00. Saterdag 13:00 tot Maandag 08:00 en openbare vakansiedae | Tariff/Tarief + 50% | Tariff/Tarief + 50% | | |
| 4549 | Minimum fee for after hour service ● Minimumgelde vir diens buite normale werk-ure | 6.3 | 114.22 | - | - |

| | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyns | |
|--|-------------------------|---|---|---|
| | U/E | R | U/E | R |
| 4551 Fees not detailed in the above Pathology Schedule (section 21) are obtainable from the National Pathology Group of the SAMA, and will be based on the fee for a comparable service in the Tariff of fees ● Gelde vir dienste nie vermeld in die voorafgaande Patologie skedule (afdeling 21), is verkrygbaar van die Nasionale Patologiegroep van die SAMA en sal baseer word op die gelde van 'n vergelykbare diens in die Tarief | | - | | - |

| | Pathologist Patoloog | | Other Specialists and General Practitioners Ander Spesialiste en Algemene Praktisyns | |
|---|-------------------------|----------|---|----------|
| | U/E | R | U/E | R |
| 22. ANATOMICAL PATHOLOGY ● ANATOMIESE PATOLOGIE | | | | |
| The amounts in this section are calculated according to the Anatomical Pathology unit values ● Die bedrae in hierdie afdeling word volgens die Anatomiese Patologie eenheidswaardes bereken | | | | |
| 22.1 Exfoliative cytology ● Eksfoliatiewe sitologie | | | | |
| 4561 Sputum and all body fluids: First unit ● Sputum en alle liggaamsvog: Eerste eenheid | 13.4 | 239.86 | 8.9 | 159.31 |
| 4563 Sputum and all body fluids: Each additional unit ● Sputum en alle liggaamsvog: Elke addisionele eenheid | 7.8 | 139.62 | 5.2 | 93.08 |
| 4564 Performance of fine-needle aspiration for cytology ● Uitvoer van fynnaald aspirasie vir sitologie | 15 | 268.50 | | |
| 22.2 Histology ● Histologie | | | | |
| 4567 Histology per sample/specimen each ● Histologie per monster, elk | 20 | 358.00 | 13.3 | 238.07 |
| 4571 Histology per additional block each ● Histologie per block, elk | 11.6 | 207.64 | 7.7 | 137.83 |
| 4575 Histology and frozen section in laboratory ● Histologie en bevrore snit in laboratorium | 22.7 | 406.33 | 15.1 | 270.29 |
| 4577 Histology and frozen section in theatre Histologie en bevrore snit in operasiesaal | 90 | 1 611.00 | 60 | 1 074.00 |
| 4578 Second and subsequent frozen sections, each Tweede en daaropvolgende bevrore snitte, elk. | 20 | 358.00 | 13.4 | 239.86 |
| 4579 Attendance in theatre - no frozen section performed Teenwoordigheid in teater - sonder dat bevrore snit uitgevoer is | 26.3 | 470.77 | 17.5 | 313.25 |
| 4582 Serial step sections (including 4567) ● Seriesneë (ingeslote 4567) | 23.3 | 417.07 | 15.6 | 279.24 |
| 4584 Serial step sections per additional block each ● Seriesneë, per bykomende blok elk | 13.5 | 241.65 | 9 | 161.10 |
| 4587 Histology consultation ● Histologie konsultasie | 10.1 | 180.79 | 6.7 | 119.93 |
| 4589 Special stains ● Spesiale kleuring | 6.7 | 119.93 | 4.5 | 80.55 |
| 4591 Immuno-fluorescence/studies ● Immuno-fluoresiën/studies | 20.7 | 370.53 | 13.8 | 247.02 |
| 4593 Electron microscopy ● Elektron-mikroskopiese ondersoek | 94 | 1 682.60 | 63 | 1 127.70 |
| 4650 Autogenous vaccine ● Outogene vaksien | 8 | 143.20 | 5.33 | 95.41 |
| 4651 Entomological examination ● Entomologiese ondersoeke | 13.9 | 248.81 | 9.27 | 165.93 |

| | Specialist Spesialis | | General practitioner Algemene Praktisyn | |
|---|--|--------|--|--------|
| | U/E | R | U/E | R |
| IV. TRAVELLING EXPENSES ● REISKOSTE | | | | |
| Refer to General Rule P P ● Verwys na Algemene Reël P | | | | |
| P. Travelling fees ● Reisgelde: | | | | |
| (a) Where, in cases of emergency, a practitioner was called out from his residence or rooms to a patient's home or the hospital, travelling fees can be charged according to the section on travelling expenses (section IV) if more than 16 kilometres in total had to be travelled ● Waar 'n praktisyn in noodgevalle vanaf sy huis of kamers na 'n pasiënt se woning of 'n hospitaal uitgeroep word, kan reisgelde gehef word volgens die afdeling aangaande reiskoste (afdeling IV indien meer as 16 kilometers in totaal gereis moes word. | | | | |
| (b) If more than one patient are attended to during the course of a trip, the full travelling expenses must be divided between the relevant patients ● Indien meer as een pasiënt tydens 'n reis aandag geniet, moet die volle reisgeld pro rata tussen die pasiënte verdeel word. | | | | |
| (c) A practitioner is not entitled to charge for any travelling expenses or travelling time to his rooms ● 'n Praktisyn is nie geregtig om fooie te hef vir enige reiskoste of reistyd na sy kamers nie. | | | | |
| (d) Where a practitioner's residence is more than 8 kilometres away from a hospital, no travelling fees may be charged for services rendered at such hospitals, except in cases of emergency (services not voluntarily scheduled) ● Waar 'n praktisyn se woning meer as 8 kilometers vanaf 'n hospitaal geleë is, mag geen reisgelde gehef word vir dienste gelewer in sodanige hospitale nie, behalwe in noodgevalle (onwillekeurig geskeduleerde dienste). | | | | |
| (e) Where a practitioner conducts an itinerant practice, he is not entitled to charge fees for travelling expenses except in cases of emergency (services not voluntarily scheduled) ● Waar 'n praktisyn 'n rondreispraktijk bedryf, is hy nie geregtig om reisgelde te hef nie, behalwe in noodgevalle (onwillekeurig geskeduleerde dienste). | | | | |
| When in cases of emergency (refer to general rule P), a doctor has to travel more than 16 kilometres in total to visit an employee, travelling costs can be charged and shall be calculated as follows ● Wanneer 'n praktisyn in noodgevalle (verwys na algemene reël P), meer as 16 kilometers in totaal moet reis om 'n werknemer te besoek, kan reiskoste gehef word en word dit soos volg bereken: | | | | |
| Consultation, visit or surgical fee PLUS ● Konsultasie, besoek of chirurgiese gelde PLUS | | | | |
| 5001 | Cost of public transport and travelling time <u>or</u> item 5003 ● Koste van openbare vervoer en reistyd <u>of</u> item 5003. | | | |
| 5003 | R5.00 per km for each kilometre in excess of 16 kilometres travelled in own car: 19 km total = 3 x R5.00 = R15.00 (no travelling time) ● R5.00 per km vir elke kilometer verder as 16 kilometer in totaal afgeleë in eie motor: 19 km totaal = 3 x R5.00 = R15.00 (geen reistyd). | | | |
| Travelling time (Only applicable when public transport is used) ● Reistyd (Slegs van toepassing wanneer van openbare vervoer gebruik gemaak word.) | | | | |
| 5005 | 18 | 313.56 | | |
| 5007 | | | 18 | 313.56 |
| 5009 | 27 | 470.34 | | |
| 5011 | | | 27 | 470.34 |
| 5013 | Travelling fees are not payable to practitioners who assisted at operations on cases referred to surgeons by them ● Reisgelde is nie betaalbaar indien 'n mediese praktisyn 'n afstand reis om as assistent behulpsaam te wees by 'n operasie op 'n pasiënt deur homself na die chirurg verwys nie | | | |
| 5015 | Travelling expenses may be charged from the medical practitioner's residence for calls received at night or during weekends in cases where travelling fees are allowed ● Reiskoste kan vir reise van die mediese praktisyn se woonhuis of in antwoord op oproepe ontvang gedurende die nag of naweke geëis word, in gevalle waar reisgeld gehef mag word | | | |

COIDA tariff for Medical Practitioners

**THE UNIT VALUES FOR THE VARIOUS GROUPS AND SECTIONS AS FROM 1 APRIL 2013 ARE AS FOLLOWS:
EENHEIDSWAARDES TEN OPSIGTE VAN DIE VERSKEIE GROEPE EN AFDELINGS SOOS VANAF 1 APRIL 2013:**

| | Groups and Sections / Groepe en Afdelings | Unit Value / Eenheidswaarde |
|----|---|------------------------------------|
| 1. | Consultation Services codes 0146 & 0109 / Konsultasiedienste kodes 0146 & 0109 | R 17.42 |
| | Consultation Services: codes 0181; 0182;0183,0184,0186 0151/ Konsultasiedienste: kodes 0181; 0182;0183,0184,0186 0151 | R 17.75 |
| | Audiology and Speech therapy consultations: 1011, 1012, 1013 | R 7.58 |
| 2. | Clinical procedures / Kliniese prosedures | R 17.42 |
| 3. | Anaesthetics / Narkose | R 81.42 |
| 4. | Radiology & MRI / Radiologie & MRB | R 18.22 |
| 5. | Radiation Oncology / Stralingsonkologie | R 19.17 |
| 6. | Ultrasound / Ultraklank | R 17.22 |
| 7. | Computed Tomography / Rekenaartomografie | R 17.51 |
| 8. | Clinical Pathology / Kliniese Patologie | R 18.13 |
| 9. | Anatomical Pathology / Anatomiese Patologie | R 17.90 |

Note : The unit value and amounts published in the tariff is **VAT Exclusive**
Neem kennis : Die eenheidswaarde en bedrae gepubliseer in die tarief is **BTW Uitgesluit**

COIDA & RSSA INDICATIONS FOR MRI OF INJURY ON DUTY PATIENTS.

Select the appropriate injury, modality and indication to be used in conjunction with a MRI.

Annexure A ➡ MRI motivation form.

Annexure B ➡ COIDA & RSSA indication for MRI.

Annexure C ➡ Indications for plexus and peripheral nerve block.

Annexure: A
The Department of Labour: Compensation Fund

MRI Motivation Form for Employee's Injured on Duty

Claim Number:

Employee's Name:

Employees ID No:

Name of Employer:

Date of Accident / Injury:

Type of Injury:

Brief description of how injury occurred:

Previous clinic / imaging investigations done, and dates:

Imaging investigation required:

Motivation / Clinical indications for the investigation:

Requesting Doctors Name:

Practice Number:

Date of Referral

This form should preferably be typed.

ANNEXURE :B**COIDA & RSSA– Indications for MR Imaging of Injury on Duty Patients**

Select the appropriate injury, modality and indication. To be used in conjunction with a MRI / CT motivation. Refer also to the document “Guidelines for Imaging of MRI and other studies for Injury on Duty Patients”

 Head Injury - Acute (1) (Acute regarded as within first week of date of injury)

- | | |
|-----------------------------|---|
| <input type="checkbox"/> CT | <input type="checkbox"/> Reduced level of consciousness (1.i.a) |
| | <input type="checkbox"/> Seizures (1.i.b) |
| | <input type="checkbox"/> Neurological deficit (1.i.c) |
| | <input type="checkbox"/> Skull or facial bone fractures (1.i.d) |

 Head + Cervical Spine Injury – Acute (2)

- | | |
|---|---|
| <input type="checkbox"/> CT | <input type="checkbox"/> Head as above (2.i) |
| | <input type="checkbox"/> CT Spine (bone or joint injury) depending on result spine x-ray (2.ii) |
| <input type="checkbox"/> MRI – in selected cases following a CT (2.iii) | |

 Head Injury – Sub acute

- | | |
|------------------------------|---|
| <input type="checkbox"/> MRI | <input type="checkbox"/> Rotational axonal injury (2.d) |
| | <input type="checkbox"/> Chronic subdural haemorrhage |

 Head Injury - long term sequela (3)

- | | |
|------------------------------|--|
| <input type="checkbox"/> CT | <input type="checkbox"/> If convulsions present in semi acute phase, do CT first (3.b) |
| <input type="checkbox"/> MRI | <input type="checkbox"/> Epilepsy (contrast and additional sequences often required) (3.a) |
| | <input type="checkbox"/> Long term structural changes (3.c) |

 Spine – Acute

- | | |
|------------------------------|---|
| <input type="checkbox"/> CT | <input type="checkbox"/> Bone or joint injury (4.i) |
| <input type="checkbox"/> MRI | <input type="checkbox"/> Cord compression (5.i) |
| | <input type="checkbox"/> Neurological signs (nerve root) (5.ii) |
| | <input type="checkbox"/> Vertebral body fracture (selected cases) (5.iii) |

 Spine – sub acute and long term sequela

- | | |
|------------------------------|---|
| <input type="checkbox"/> MRI | <input type="checkbox"/> Cord injury (6.i) |
| | <input type="checkbox"/> Disc herniation (6.ii) |
| | <input type="checkbox"/> Post operative assessment (selected cases) (6.iii) |

 Chest / Body Injury (7)

- | | | | |
|-----------------------------|---|---|---|
| <input type="checkbox"/> CT | <input type="checkbox"/> Sternal fracture | <input type="checkbox"/> Vascular of lung | <input type="checkbox"/> Other organs / soft tissue |
|-----------------------------|---|---|---|

 Extremities

- | | |
|------------------------------|---|
| <input type="checkbox"/> CT | <input type="checkbox"/> Complicated fractures and dislocations (10) |
| <input type="checkbox"/> MRI | <input type="checkbox"/> Muscle distal biceps insertion (9) |
| | <input type="checkbox"/> Cartilage, tendons, labrum, soft tissue of, joints (8.iii.a) |
| | <input type="checkbox"/> Planning repair of joints (8.iii.b) |
| | <input type="checkbox"/> Knee, elbow, ankle (usually no contrast) (8.iii.d) |
| | <input type="checkbox"/> Shoulder, wrist, hip (usually with contrast) (8.iii.c) |

The numbers after the indications refer to the document "Guidelines for Imaging of MRI and other studies for Injury on Duty Patients". The above indications are not exhaustive, and are merely a selection of the more common indications.



South African Private Ambulance
& Emergency Services Association

www.sapaesa.co.za

DOCTOR MOTIVATIONAL LETTER

PATIENT NAME: _____

DATE OF TRANSFER: _____

TRANSFER DESTINATION: _____

PATIENT CONDITION:

| | |
|--------------------------|--|
| <input type="checkbox"/> | Bedridden |
| <input type="checkbox"/> | Septicemia |
| <input type="checkbox"/> | Post amputation |
| <input type="checkbox"/> | Wound infection |
| <input type="checkbox"/> | Further treatment |
| <input type="checkbox"/> | Unstable vital signs |
| <input type="checkbox"/> | Post operative complication |
| <input type="checkbox"/> | Decreased level of consciousness |
| <input type="checkbox"/> | Radiology (X-Ray, CT Scan, MRI Scan, Ultrasound) |
| <input type="checkbox"/> | Treatment of burns |
| <input type="checkbox"/> | Patient has bedsores |
| <input type="checkbox"/> | Large plaster cast |
| <input type="checkbox"/> | Patient cannot sit in a car |
| <input type="checkbox"/> | Removal of internal fixation |
| <input type="checkbox"/> | Removal of external fixation |
| <input type="checkbox"/> | Public transport will compromise patient's treatment |
| <input type="checkbox"/> | Patient has severe muscular or ligament damage |
| <input type="checkbox"/> | Patient still has IV line in situ |
| <input type="checkbox"/> | Patient requires medical care during the journey |

COMMENTS: _____

DOCTOR NAME: _____

DOCTOR HPCSA NUMBER: _____

DOCTOR SIGNATURE: _____

DATE: _____

South African Private Ambulance Emergency Services Association

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Chairman: N Gargan Vice Chairman: C Ruggunan Treasurer: TND Emslie Secretary: D Gardner
Executive: G Mills Executive: A Leicester CEO: O Wright

Reg No: 2004/008913/08

ANNEXURE: C

Item 2800 and 2802 as part of anaesthesia

2800 – Plexus nerve block

2802 – Peripheral nerve block

The motivation for the use of one of these codes in addition to that for the “normal” anaesthesia is that it controls post operative pain and minimises the use of pain injections / medication and encourages early mobilisation.

It is reasonable if the injury / surgery is of sufficient nature to expect much pain post operatively, such as in the fracture of a long bone that was surgically reduced and fixated.

It is however not reasonable in cases of a simple fracture to a hand bone / foot bone or uncomplicated amputation of a finger / toe or other simple procedures.

Examples of claims where I have found the use reasonable:

- open reduction / internal fixation of a femur / tibia – fibula / humerus / radius – ulna
- total knee replacement / total hip replacement

Examples where the use of the codes is not reasonable:

- one fracture in the hand / foot treated surgically
- amputation finger / toe or part of finger / toe
- arthroscopy of the ankle / knee / shoulder

I have seen one claim for a “crushed foot” where I accepted the use of the code because of many fractures and multiple procedures in one operation.

Item 2800 and 2802 as part of treatment

There also are instances where the use of the codes is part of the treatment (no surgery performed and is not part of general anaesthesia as such). This is why the codes were put into the tariff structure in the first place.

Multiple rib fractures are treated with a nerve block for pain management and that would be acceptable.

ANAESTHESIA GUIDELINES TO BILLING 2013

Services involving administration of anaesthesia are reported by the use of the Doctors Guide to Billing codes plus modifier codes defined under Anaesthesia Modifiers.

1. To report regional or general anaesthesia provided by a medical practitioner also performing the services for which the anaesthesia is being provided, it should be noted that a doctor should usually perform either the role of the operating surgeon or the anaesthesiologist, but not both. When the anaesthesiologist, other than the medical practitioner performing the procedure, provides anaesthesia services as specified in these guidelines (conscious sedation or otherwise), the anaesthesia codes should be reported.

2. These services may include but are not limited to general, regional, supplementation of local anaesthesia, or other supportive services to afford the patient the anaesthesia care deemed optimal by the anaesthesiologist during any procedure. Monitored anaesthesia care is included in the service and the reporting of any professional anaesthesia services is reported as if a general anaesthetic was administered.

3. These services include the anaesthesia care during the procedure, the administration of fluids and/or blood and the usual monitoring services (e.g. ECG, temperature, blood pressure, oximetry, and capnography). Unusual forms of monitoring (e.g. intra-arterial, central venous and Swan-Ganz) are not included.

4. The use of special equipment, if owned by the practitioner, namely nerve stimulators, fiberoptic bronchoscopes, ultrasound machines - for placement of CVP/nerve blocks, PCA devices and syringe pumps, is not included and billed in addition.

5. Complications and sensitivity encountered by the patient during a procedure:

- An anaesthesiologist / anaesthetist is obliged to report back in writing to the patient, the referring practitioner and the surgeon who performed the procedure, of any complications and reactions encountered during anaesthesia
- A copy of such report should be kept by the anaesthesiologist / anaesthetist for future reference.

The Evaluation / Management consultation services are in addition to the above services. **2**

EVALUATION / MANAGEMENT CONSULTATION SERVICES

These include:

Pre-operative assessment (codes 0151-0153). This is face-to-face time spent with the patient, assessing prior medical and surgical history, medication and allergic history, prior anaesthetics, examination and discussion of anaesthetic techniques and risk, ordering of appropriate investigations and ordering of any pre-operative medication. This assessment may also be done in the theatre admission area, and whilst this is not ideal, it is understood that due to late admissions on the day of surgery and other explanations it is not always possible to see the patient in the ward.

If the pre-operative assessment is not followed by an operation, it would be regarded as a Consultation and items 0173-0175 for In-hospital Consultations and items 0190-0192 for Consultations in own rooms, will apply (see modifier 0024)

Unscheduled emergency consultation service, without travel (code 0146) and with travel (code 0147). Only one of these items may be used as an add-on to the consultation service (codes 0151-0153, 0173-0175) if, the procedure is unbooked/unscheduled (i.e. not booked on a scheduled slate, or booked as an add-on to an elective slate after the theatre slates have been finalised by the theatre booking secretary) and surgery is of an emergency diagnosis (i.e. failure to treat within a restricted time-period of 24hrs may well result in loss of life, limb or significant complications).

Post-operative assessments (code 0109). Anaesthesiology does not have a global fee component and therefore if cardio-respiratory, pain or any other assessment or intervention is necessary, this code will apply.

Consultation services provided at own consultation rooms (including pain clinic consultations) done prior to the anaesthetic to assess fitness for anaesthesia and to improve physical status prior to an anaesthetic, codes 0190-0193, will apply.

REPORTING OF ANAESTHESIA SERVICES

All anaesthesia values are determined by adding a Basic Unit Value, which is related to the complexity of the service, plus Time Units, plus Modifying Units (if any).

Basic value or base unit: the basic value, also referred to as the base unit or relative value, is listed for anaesthetic management of most surgical procedures. This includes the value of all usual anaesthesia services except for the time actually spent in anaesthesia care and any modifiers.

The basic value units have two components:

One component reflects all usual services included in the anaesthesia service. Usual services include: administration of fluids and/or blood products incidental to the procedure and interpretation of non-invasive monitoring (ECG, temperature, blood pressure, oximetry and capnography).

The second component reflects the relative work or cost of the specific anaesthesia service. Cost in this context refers to the medical practitioner's expertise/training/ risk. For example, the basic value for the anaesthesia service related to a closed reduction of a radius fracture might be 3,00 anaesthetic units, as it has a relatively low level of work or cost. The basic value for an anaesthesia service associated with an intrathoracic coronary artery bypass graft procedure might be 15,00 anaesthetic units, reflecting a high level of work or cost.

Two exceptions to using the basic value are listed, namely:

A minimum basic value of 4,00 anaesthetic units are allowed for all procedures of the head, neck or shoulder girdle, requiring field avoidance (code 0034).

In addition, any procedure performed in any position other than lithotomy or supine has a minimum basic value of 4,00 anaesthetic units (item 0032).

If the anaesthesia code associated with the surgical procedure carries a basic value greater than four, the higher basic value is reported. **3**

Excluded from the Basic Unit Value are:

Unusual forms of monitoring e.g. placement of intra-arterial, central venous and pulmonary artery catheters,

Use of trans-oesophageal echocardiography (TEE)

Use of special equipment.

TIME (CODE 0023):

Anaesthetic time is the actual time spent providing the anaesthesia service. Time begins as the anaesthesiologist prepares the patient for anaesthesia care in the operating room or in an equivalent area. Time ends when the personal attendance of the anaesthesiologist is no longer required and the patient can be safely placed in post-anaesthesia recovery under the supervision of nursing or other trained personnel. Should a second patient receive an anaesthetic before the discharge of the first patient from the recovery unit, then the anaesthetic time for the first patient shall cease.

Time is reported in units based on defined time increments. For the first hour of anaesthesia 2,00 anaesthetic units are allocated to each 15 minute period or part thereof, thereafter 3,00 anaesthetic units are allocated per each 15 minute period or part thereof. On some anaesthesia services, time is not reported additionally. A '+T' is designated after the base unit for procedures requiring time reported separately. Do not list time separately for procedures without this designation.

RAND CONVERSION FACTOR (RCF):

Anaesthesia charges must be calculated by means of a conversion factor since the charges are not based on fixed amounts. The conversion factor is the Rand value associated with each unit of anaesthesia. The Rand conversion factor is multiplied by the total number of anaesthesia units (basic, time and modifiers, if applicable) for a given anaesthesia service, to arrive at the total charges for the anaesthesia service.

Standard formula: The total anaesthesia units for a given anaesthesia service are determined by using the total units multiplied by the Rand Conversion Factor (RCF). The total charge for a specific anaesthesia service is calculated by means of the following formula:

Basic value + Time units + Modifying units = Anaesthetic units

Additional Procedure units x RCF + Consult units x RCF + Anaesthetic units x RCF = Total fee for the procedure

MONITORED (STAND-BY) ANAESTHESIA

Monitored anaesthesia care is defined as instances where an anaesthesiologist has been requested to provide specific services to a patient undergoing a planned procedure. The patient receives either local anaesthesia or no anaesthesia. However, the anaesthesiologist is required to provide pre-operative assessment, to remain in attendance during the procedure to monitor the patient and to administer additional anaesthetics should it be required and to provide post-operative services as required.

Monitored care, as described above, is any other anaesthesia procedure. The procedure should be assigned the applicable anaesthesia code with time and modifying units being added as for general anaesthesia.

When an anaesthesiologist is requested by the attending medical practitioner to be present in the operating room to monitor vital signs and manage the patient on an anaesthesia level, even though the actual surgery is being done under local anaesthesia, calculations will be the same as if general anaesthesia had been administered (time + base value).

Stand-by anaesthesia is generally accepted without motivating documents for the following:

Vaginal deliveries

Subdural haematomas

Vascular imaging and interventional procedures e.g. angioplasty, stents, embolectomy and filters

Interventional radiology

Patients with physical status ASA 3 or ASA 4

Insertion of a cardiac pacemaker, cardiac catheterizations and coronary angiograms and coronary stents

Cataract extraction and/or lens implant

MORE THAN ONE ANAESTHESIOLOGIST – MODIFIER 0029

When it is necessary to have a second anaesthesiologist it is recommended that the remuneration for the second anaesthesiologist shall be calculated at the same rate for the first hour and thereafter at 80% of the principal specialist rate, and the time charged is for the actual time in attendance.

Pre-operative assessment is not chargeable and may also not charge for the modifiers 0037 to 0044 or the orthopaedic modifiers 5441 to 5448.

Either the principal anaesthesiologist or the assistant anaesthesiologist may charge for the placement of the invasive monitoring lines, namely codes 1215 to 1218.

The monetary value of modifier 0029 will not be less than 7,00 anaesthetic units (refer to modifier 0035).

CONSCIOUS SEDATION – MODIFIER 0020

Conscious sedation (CS) is a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or by light tactile stimulation. A distinction is also made between light sedation and deep sedation (conscious sedation).

In light sedation, the patient responds to verbal or tactile stimuli, no airway intervention is required, spontaneous ventilation is adequate and the cardio-vascular function is usually maintained.

In deep sedation (conscious sedation) purposeful response is only after repeated or painful stimuli, airway intervention may be required, spontaneous ventilation may be inadequate and cardio-vascular function is maintained.

Conscious sedation is therefore seen as an anaesthetic technique. According to a HPCSA Ruling (April 1987 Vol 6 p 295) a medical practitioner 'was not permitted to perform procedures and simultaneously administer the anaesthetic'. If deep sedation (conscious sedation as per the definition above) was provided, a second practitioner had to be present to monitor the patient during the sedation period.

The following will apply to conscious sedation cases:

1. Conscious sedation performed by the operator: No additional fee may be charged for the conscious sedation if it is performed by the operator, except to remunerate him/her for the medicine used during the treatment if it is supplied by the operator. The conscious sedation in this scenario is included in the fee for the procedure performed.
2. Conscious sedation performed by the operator with a second person (anaesthesiologist) participating in the general care of a patient during a surgical procedure: The anaesthesiologist is remunerated at the usual anaesthetic rates. Thus the operator under the "supervision of a second person" performs the conscious sedation in this scenario. No fee is charged by the operator for performing the conscious sedation. However, the anaesthesiologist on stand-by charges for a general anaesthetic as appropriate.
3. Conscious sedation performed by an anaesthesiologist (not the operator): The account is rendered as for general anaesthesia. Conscious sedation is an anaesthetic technique that should be handled in the same way as for example an epidural anaesthetic.
4. This code may need to be used to indicate on the anaesthetic account that the procedure was performed in an unattached theatre suite as there may often not be an associated hospital theatre account.

EMERGENCY SURGERY FOR THEATRE PROCEDURES (MODIFIER 0011)

Any bona fide, justifiable emergency procedure (all hours), undertaken in an operating theatre, will attract an additional 12,00 clinical units per half-hour or part thereof of the operating time for all members of the surgical team. The conditions as outlined in the use of codes 0146 or 0147 applies 5

Item 0147 is appropriate for anaesthesiologists/anaesthetists during after-hour periods only where the Compensation Fund is responsible for the account in cases of emergency which may or may not necessitate an anaesthetic (refer to Rule B).

PAIN MANAGEMENT

Normal post-operative pain management includes oral, intramuscular or intravenous medications. Normal post-operative pain management provided by the surgeon and/or anaesthesiologist is included in the global fee for the surgical procedure.

Some procedures and/or patients require more than the usual type of post-operative pain management and this is frequently provided or supervised by an anaesthesiologist. These services are additional procedures and are reported as follows:

An Intrathecal or spinal injection for pain management is reported with code 2799.

Epidural or sub-arachnoid (code 2801) pain management is reported with the appropriate procedure codes for the placement of an epidural or caudal block.

Plexus nerve block (Code 2800) is reported for the following more complex blocks - Brachial plexus block, Cervical plexus block, Axillary nerve block, Multiple ipsilateral intercostal nerve blocks, Sciatic nerve block, Femoral nerve block, Paravertebral block, Psoas compartment block, Celiac plexus block, Phrenic nerve block, Vagus nerve block, Facial nerve block, Trigeminal nerve block, Stellate ganglion block, Superior hypogastric plexus, Sphenopalatine ganglion.

Inserting an indwelling nerve catheter (code 2804) is reported if a catheter is inserted with a spinal (code 2799), plexus block (code 2800) or an epidural (code 2801).

Patient-controlled analgesia (PCA) is reported with code 1220 plus 1221 if appropriate on a per-day basis. Code 0201 is appropriate for the cost of material used in treatment and is also applicable for disposable PCA devices purchased and provided by practitioners.

Indications for use of PCA (intravenous or epidural):

- Intrathoracic cases

- Major vascular cases (aortic, carotid, iliac, femoral, brachial arteries)

- Intra-abdominal procedures (gastric and bowel procedures, renal, hysterectomy, prostatectomy)

- Major orthopaedic procedures (joint replacements, spinal surgery, internal fixation of long-bones)

- Major head and neck procedures (neck dissections)

- Major plastic or soft tissue procedures (mastectomy, extensive skin graft, burns, abdominoplasty)

- Labour and post-caesarian section

- Acute herpes zoster

- Sickle cell crisis

Post-operative pain management services are not calculated based on time. These services are reported as a single, daily charge.

Procedures for chronic pain management (example epidural for pain) is only charged as a consultation service (0173-0175 or 0190-0192) plus the procedure code 2801 plus 2804 if appropriate – note there is no fee for anaesthetic time.

Epidurals and Spinals

- If used as the anaesthetic technique then the placement of the epidural (code 2801) or spinal (code 2799) is not charged and the fee should be as a general anaesthetic.
- If inserted during a general anaesthetic then code 2801 and if appropriate 2804 can be charged.
- If an epidural is repeated at a different level due to a CSF leak at the time of initial insertion, it is considered as only one procedure.
- If it is resited at a different occasion, it becomes a separate and additional procedure.
- Code 2801 is appropriate for epidural blood patches that are performed on the second or subsequent day after the inadvertent spinal tap.

ANAESTHETIC OBSTETRIC GUIDELINES TO BILLING:

Epidural insertion for labour

Pre-anaesthetic consultation (0151) charged plus 0146 or 0147 (as appropriate) unless elective induction of labour.

Time charged using modifier 0023 of actual time spent attending to the patient, usually between 45-60 minutes (8 time units).

Epidural PCA is a routine norm for a labouring parturient and procedure code 1220 plus 1221 (if equipment owned by practitioner) is appropriate.

When epidural analgesia is administered, an anaesthesiologist may attend to more than one patient. The anaesthesiologist may insert the epidural catheter, start the continuous anaesthetic and leave the patient's bedside. The anaesthesiologist periodically returns to check on the patient or to increase the amount of anaesthetic while attending to other patients who are also receiving epidurals for vaginal deliveries.

Once an anaesthesiologist has committed to providing epidural pain relief during labour they are committed to remain available to manage any obstetric emergency.

Epidural labour patients progressing to caesarean

- If the same operator who inserted the epidural is involved in the caesarean section then:

No additional pre-anaesthetic consultation fee (0151) but 0146 or 0147 as appropriate.

Additional top-up times may be charged for the time spent with the patient prior to admission to the theatre.

Thereafter standard general anaesthetic reimbursement as if a separate procedure.

- If another anaesthesiologist is used for the caesarean, then:

Another consultation service is charged plus 0146 or 0147 as appropriate.

There-after standard general anaesthetic reimbursement as if a separate procedure.

MODIFIERS TO BE USED IN ANAESTHETICS

All anaesthesia services are reported by use of the procedure codes plus the use of other optional modifiers as may be appropriate.

1. Code **0018** - Surgical modifier for persons with a BMI of 35> (calculated according to kg/m²):

A 50% increase in anaesthetic time units for anaesthesiologists

2. Code **0019** - Surgery on neonates (up to and including 28 days after birth) and low birth weight infants (less than 2500g) under general anaesthesia (excluding circumcision):

A 50% increase in anaesthetic time units for anaesthesiologists

3. Code **0032** - Patients in prone position: Anaesthesia administered to patients in the prone position shall have a minimum of 4,00 basic anaesthetic units. When the basic anaesthetic units for the procedure is 3,00, one extra anaesthetic unit should be added. If the basic anaesthetic units for the procedure is 4,00 or more, no extra units should be added

4. Code **0034** - Head and neck procedures: All anaesthetics administered for diagnostic, surgical or X-ray procedures on the head and neck shall have a minimum of 4,00 basic anaesthetic

units. When the basic anaesthetic units for the procedure is 3,00, one extra anaesthetic unit should be added. If the basic anaesthetic units for the procedure is 4,00 or more, no extra units should be added

5. Code **0037** - Body hypothermia: Utilisation of total body hypothermia: Add 3,00 anaesthetic units

6. Code **0038** – Peri-operative blood salvage: Add 4,00 anaesthetic units for intra-operative blood salvage and 4,00 anaesthetic units for post-operative blood salvage

Peri-operative blood salvage is appropriate for the collection of autologous blood intra-operatively and for the administering of salvaged blood (either from cell-saver or re-infusion drains) in the post-operative period.

7. Code **0039** – Control of blood pressure: Deliberate control of the blood pressure: All cases up to one hour: Add 3,00 anaesthetic units, thereafter add 1,00 (one) additional anaesthetic unit per quarter hour or part thereof. This modifier code is used for:

Improved surgical exposure (mastoidectomy, tympanoplasty, spinal surgery, major neck dissections, endoscopic sinus drainage, mandibular or maxillary osteotomy, total hip replacement, shoulder surgery).

Maintain perfusion pressures (cardiac surgery, craniotomy for tumour/aneurysm, major vascular surgery, carotid endarterectomy, major plastic free flaps, vasoactive tumours – phaemochromoctoma/carcinoid syndromes, pre-eclamptic or eclamptic patients, and shocked trauma cases on inotropic support).

Invasive monitoring is not regarded as mandatory for the appropriate use of this code.

8. Code **0040** - Phaeochromocytoma: The basic anaesthetic units for procedures performed for phaeochromocytoma shall be 15,00 anaesthetic units

9. Code **0041** - Hyperbaric pressurisation: Utilisation of hyperbaric pressurisation: Add 3,00 anaesthetic units

10. Code **0042** - Extracorporeal circulation: Utilisation of extracorporeal circulation: Add 3,00 anaesthetic units

11. Code **0043** - Patients under one year of age: For all cases where the patient is under one year of age – 3,00 anaesthetic units to be added

12. Code **0044** – Neonates (i.e up to and including 28 days after birth): 3,00 anaesthetic units to be added to the basic anaesthetic units for the particular procedure. This modifier is charged in addition to Modifier 0043: Cases under one year of age

13. Modifiers used for musculo-skeletal procedures (code **5441-5448**):

If anaesthetic is administered for procedures on more than one category of bone, the modifier for the highest category of bone concerned is applicable.

5441 Add one (1,00) anaesthetic unit, except where the procedure refers to the bones named in Modifiers 5442 to 5448

5442 Shoulder, scapula, clavicle, humerus, elbow joint, upper 1/3 tibia, knee joint, patella, mandible and temporomandibular joint: Add two (2,00) anaesthetic units

5443 Maxillary and orbital bones: Add three (3,00) anaesthetic units

5444 Shaft of femur: Add four (4,00) anaesthetic units

5445 Spine (except coccyx), pelvis, hip, neck of femur: Add five (5,00) anaesthetic units

5448 Sternum and/or ribs and musculo-skeletal procedures which involve an intra-thoracic approach: Add eight (8,00) anaesthetic units. Not appropriate for anaesthetic on open heart procedures. **8**

CHRONIC PAIN MANAGEMENT SERVICES

Chronic pain management services are not anaesthesia services. These are distinct services frequently performed by anaesthesiologists who have additional training in pain management procedures. Pain management services are reported following the same rules as those for surgical procedures.

Pain management services include consultative services, trigger point injections, spine and spinal cord injections and nerve blocks. Each code for pain management services should have a specific fee selected from the appropriate codes for the services or procedures rendered. In other words, no adjustments are made based on time, physical status or qualifying circumstances. These codes may be the same as those used for nerve blocks during anaesthesia.

ANAESTHESIOLOGISTS AS CLINICIANS

It is appropriate for anaesthesiologists acting as clinicians, to charge the appropriate consultation or procedure item when rendering a service not related to the administration of an anaesthetic.

Examples are:

- o Placement of intercostal drains (code 1141)
- o Performing of percutaneous tracheostomy (code 1127)
- o Nerve ablation procedures
- o Bronchoscopy (code 1132)
- o Trans-oesophageal echocardiography (code 3636, 3637, 5115)
- o Pulmonary stress testing: For determination of VO₂ max (code 1199)
- o Effort electrocardiogram with the aid of a special bicycle ergometer, monitoring apparatus and availability of associated apparatus (code 1234)
- o Ownership of specialised equipment, namely ultrasound (code 5103) and blood-gas analyser machines, (code 4068)

SPECIFIC CODES

Code 0100 Intra-aortic balloon pump: Where an anaesthesiologist would be responsible for operating an intra-aortic balloon pump, a fee of 75,00 clinical procedure units is applicable.

Appropriate as a once-off charge if the anaesthesiologist is in total control of the pump from insertion to removal. A daily charge is not appropriate.

Code 0113 New born attendance: Emergency attendance to newborn at all hours (once per patient) (items 0107, 0109, 0111, 0145, 0146 and/or 0147 may not be added to item 0113).

The specialist fee is appropriate for anaesthesiologists.

Code 0133 Writing of special motivations for procedures and treatment without the physical presence of a patient (includes report on the clinical condition of a patient) requested by or on behalf of a third party funder or its agent.

Code 0205 Intravenous treatment: Intravenous infusions (cut-down or push-in) (patients under three years): Cut-down and/or insertion of cannula - chargeable once per 24 hours.

Chargeable by an anaesthesiologist provided it is not inserted in a theatre environment, i.e. ward, casualty or ICU/Highcare areas.

Code 0206 Intravenous treatment: Intravenous infusions (push-in) (patients over three years): Insertion of cannula - chargeable once per 24 hours.

Chargeable by an anaesthesiologist if they are not the attending doctor either in the ICU/Highcare or involved in the pre- and intraoperative management of the patient, as this fee is included in the pre-operative consult and the fee for critical care services. 9

Code 1321 Stand-by fee for coronary angioplasty.

Anaesthesiologist need not be present during the procedure, but must be available for resuscitation or emergency CABG surgery.

Code 1132 Bronchoscopy: Diagnostic bronchoscopy.

This code is chargeable by an anaesthesiologist if a diagnostic bronchoscopy is performed or for the confirmation of the correct placement of a double-lumen tube.

Code 1356 Insertion and removal of intra-aortic balloon pump (modifier 0005 not applicable)

This code can only be charged by either the surgeon or the anaesthesiologist. The person actually inserting and removing the IABP can charge the code.

Code 1780 Gastric and duodenal intubation

Appropriate to be charged by the anaesthesiologist if they have inserted the naso-gastric tube.

Code 2799 Procedures for pain relief: Intrathecal injections for pain

Code 2800 Procedures for pain relief: Plexus nerve block

The following more complex nerve blocks will be billable under this code: Brachial plexus block, Cervical plexus block, Axillary nerve block, Multiple ipsilateral intercostal nerve blocks, Sciatic nerve block, Femoral nerve block, Paravertebral block, Psoas compartment block, Celiac plexus block, Phrenic nerve block, Vagus nerve block, Facial nerve block, Trigeminal nerve block, Stellate ganglion block, Superior hypogastric plexus, Sphenopalatine ganglion.

Code 2801 Procedures for pain relief: Epidural injection for pain

Code 2802 Procedures for pain relief: Peripheral nerve block

All other peripheral nerve blocks not mentioned in code 2800.

Code 3636 Trans-oesophageal echocardiography including passing the device

Specialist anaesthesiologists with demonstrated skill and experience may charge this code for recognized intra-operative decision making or diagnostic indications when surgery is not necessarily part of the treatment. In both cases this assumes that problem orientated or a complete study is done and advanced decision making is required.

Code 3637 + Colour Doppler (may be added onto any other regional exam, but not to be added to items 3605, 5110, 5111, 5112, 5113 or 5114)

Code 5103 Ultrasound soft tissue, any region

Ultrasound used for the placement of central venous access, arterial lines and nerve blocks can be charged by the anaesthesiologist if he performed the ultrasound.

Please note Rule GG - Capturing and recording of examinations: Images from all radiological, ultrasound and magnetic resonance imaging procedures must be captured during every examination and a permanent record generated by means of film, paper, or magnetic media. A report of the examination, including the findings and diagnostic comment, must be written and stored for five years.

Code 5115 Intra-operative ultrasound study

This code is to be used when anaesthesia or monitored anaesthesia care is required for an ultrasound study to be done.
