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## GENERAL NOTICE

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### NOTICE 943 OF 2008

#### COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASED ACT, 1993 (ACT NO. 130 OF 1993)

1. I, Membathisi Mpumzi Shepherd Mdladlana, Minister of Labour, hereby give notice that, after consultation with the Compensation Board and acting under the 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 Rules applicable thereto, appearing in the Schedule to this notice, with effect from **1 April 2008**.
2. The fees appearing in the Schedule are applicable in respect of services rendered on or after **1 April 2008** and **Exclude VAT**.



MEMBATHISI MPHUMZI SHEPHERD MDLADLANA  
MINISTER OF LABOUR

## 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.

### ***DIE WERKNEMER EN DIE MEDIESE DIENSVERSKAFER***

*Die werknemer het 'n vrye keuse van diensverskaffer bv. dokter, apteek, fisioterapeut, hospitaal ens. en geen inmenging met hierdie voorreg word toegelaat nie, solank dit redelik en sonder benadeling van die werknemer self of die Vergoedingsfonds uitgeoefen word. Die enigste uitsondering op hierdie reël is in geval waar die werkgewer met die goedkeuring van die Vergoedingskommissaris omvattende geneeskundige dienste aan sy werknemers voorsien, d.i. insluitende hospitaal-, verplegings- en ander dienste — artikel 78 van die Wet op Vergoeding vir Beroepsbeserings en Siektes verwys.*

*Kragtens die bepalings van artikel 42 van die Wet op Vergoeding vir Beroepsbeserings en Siektes mag die Vergoedingskommissaris 'n beseerde werknemer na 'n ander geneesheer deur homself aangewys verwys vir 'n mediese ondersoek en verslag. Spesiale fooie is betaalbaar vir hierdie diens wat feitlik uitsluitlik deur spesialiste gelewer word.*

*In die geval van 'n verandering in geneesheer wat 'n werknemer behandel, sal die eerste geneesheer wat behandeling toegedien het, behalwe waar die werknemer na 'n spesialis verwys is, as die lasgewer beskou word. **Ten einde geskille rakende die betaling vir dienste gelewer te voorkom, moet geneeshere hul daarvan weerhou om 'n werknemer wat reeds onder behandeling is te behandel sonder om die eerste geneesheer in te lig.** Oor die algemeen word verandering van geneesheer, tensy voldoende redes daarvoor bestaan, nie aangemoedig nie.*

*Volgens die Nasionale Gesondheidswet no 61 van 2003 Afdeling 5, mag 'n gesondheidswerker of diensverskaffer nie weier om noodbehandeling te verskaf nie. Die Vergoedingskommissaris kan egter nie sulke behandeling goedkeur alvorens aanspreeklikheid vir die eis kragtens die Wet op Vergoeding vir Beroepsbeserings en Siektes aanvaar is nie. **Vooraf goedkeuring vir behandeling is nie moontlik nie en geen mediese onkoste sal betaal word as die eis nie deur die Vergoedingsfonds aanvaar word nie.***

*Dit moet in gedagte gehou word dat 'n werknemer geneeskundige behandeling op sy eie risiko aanvra. As 'n werknemer dus aan 'n geneesheer voorgee dat hy geregtig is op behandeling in terme van die Wet op Vergoeding vir Beroepsbeserings en Siektes en tog versuim om die Vergoedingskommissaris of sy werkgewer in te lig oor enige moontlike gronde vir 'n eis, kan die Vergoedingsfonds geen aanspreeklikheid aanvaar vir geneeskundige onkoste wat aangegaan is nie. Die*

**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 werkgewer 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](http://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](http://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](http://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](http://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 or account number • *Diensverskaffer se verwysing of rekening nommer*
- The practice number (changes of address should be reported to BHF) • *Die praktyknommer (adresveranderings 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*

**RULES GOVERNING THE TARIFF / REËLS VAN TOEPASSING OP DIE TARIEF****A. Consultations: Definitions / Konsultasies: Definisies**

- (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
- (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
- (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

- 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!**  
**Normale ure en na-ure:** Normale werksure verwys na die tydperk 08:00 tot 17:00 op Maandae tot Vrydae, 08:00 tot 13:00 op Saterdag, en alle ander tye wat die geneesheer willekeurig skeduleer (al is dit vir die pasiënt se gerief) vir die lewering van dienste. Alle ander tye geld as na-ure. Openbare vakansiedae geld nie as normale werksdae nie en werk wat op hierdie dae verrig word, geld as na-uurse werk. Dienste word onwillekeurig geskeduleer vir 'n spesifieke tyd indien die geneesheer om mediese redes nie die diens by 'n vroeëre of latere geleentheid behoort te lewer nie. **Let wel; Items 0146 en 0147 (noodkonsultasies) sowel as wysiger 0011 (nood teaterprosedures) is slegs van toepassing gedurende die na-ure periode!**

- 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. Note: Rule C and item 6999 may not be used for comparable pathology services (sections 21, 22 and 23) / **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. **Let Wel:** Reël C en item 6999 is nie van toepassing op vergelykbare patologiese dienste (afdeling 21, 22 en 23) nie



- D. **Cancellation of appointments:** Unless timely steps are taken to cancel an appointment for a consultation the relevant consultation fee may be charged. (°For COIDA patients: In the case of 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 / **Kansellasie van afspraak:** *Tensy stappe vroegtydig gedoen word om 'n afspraak vir 'n konsultasie te kanselleer, kan die betrokke konsultasiegeelde gehef word. (°Vir BAD pasiënte: In geval van 'n beseerde werknemer, is die werknemer aanspreeklik vir die konsultasiegeelde.) In die geval van 'n algemene praktisyn beteken "vroegtydig" 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 fooie te hef vir 'n besoek by of weg van die dokter se spreekkamers na gelang van die geval*
- 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 / **Pre-operatiewe besoeke:** *Die toepaslike fooie mag gehef word vir alle pre-operatiewe besoeke met die uitsondering van 'n roetine pre-operatiewe besoek by die hospitaal*
- 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*
- G. **Post-operative care / Post-operatiewe sorg:**
- (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 fooie 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)*
  - (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*
  - (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*
  - (d) Aftercare refers to all **treatment in the post operative period** not requiring any further surgical intervention / *Nasorg verwys na alle behandeling in die na-operatiewe periode wat nie verdere sjirurgiese ingrepe verg nie*
- 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*
- 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 ondersoekes uitgevoer deur klinici:** *Gelde vir alle patologiese ondersoekes wat uitgevoer word deur lede van ander dissiplines (waar toelaatbaar) - verwys na wysiger 0097: Items wat onder Kliniese en Anatomiese Patologie resorteer: Raadpleeg afdeling Patologie*

- 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 fooie buite verhouding laag is in vergelyking met die werklike dienste deur 'n geneesheer gelewer, is hoër gelde onderhandelbaar. Aan die anderkant, as die fooie 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
- 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 huisarts 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
- 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
- M. **Procedure planned to be performed later:** In cases where, during a consultation / visit, a procedure is planned to be performed at a later occasion, a visit may not be charged for again, at such a later occasion / **Prosedure beplan om later uit te voer:** In gevalle waar 'n 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
- N. **Rendering of accounts for occupational injuries and diseases / Lewering van rekeninge vir beroepsbeserings en -siektes**
- (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 fooie 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
- (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 fooie 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**
- (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**
- (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 / **'n Bedrag 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**

**O. Costly or prolonged medical services or procedures:**

- (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*
- (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*
- (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. 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 the practitioner had to travel more than 16 kilometres in total / *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 die praktisyn meer as 16 kilometers in totaal moes afleë*
- (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 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 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 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) / *As 'n praktisyn 'n rondreisende praktyk bedryf, is hy nie geregtig om reisgelde te hef nie, behalwe in noodgevalle (onwillekeurig geskeduleerde dienste)*

**INTENSIVE CARE / INTENSIEWE SORG**

**RULES GOVERNING THIS SPECIFIC SECTION OF THE TARIFF CODE / REËLS VAN TOEPASSING OP HIERDIE SPESIFIEKE AFDELING VAN DIE TARIEFKODE**

- 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:**

- (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 chirurgiese fooie vir enige toestand of prosedure, sowel as 'n eerste konsultasie / besoek fooi wat die eerste evaluasie van*

die pasiënt dek terwyl die intensiewe sorg / hoë sorg tarief die daaglikse sorg in die intensiewe sorgeenheid insluit

- (b) Cost of any drugs and / or materials / Koste van medisyne en /of materiaal
  - (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
  - (d) Blood gases and chemistry tests, including arterial puncture to obtain specimens / Bloedgasondersoeke of chemiese bloedtoetse, insluitend arteriële punksie om bloedmonsters te verkry
  - (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**:
- (f) Performing and interpreting of a resting ECG / Uitvoering en vertolking van 'n rustende EKG
  - (g) Interpretation of chemistry tests and x-rays / Vertolking van biochemiese toetse en x-strale
  - (h) Intravenous treatment (item codes 0206 and 0207) / Intraveneuse behandeling (itemkodes 0206 en 0207)
- R. **Multiple organ failure:** Units for item codes 1208, 1209 and 1210 (Category 3: Cases with multiple organ failure) **include** resuscitation (i.e. item 1211: Cardio-respiratory resuscitation) / **Veelvuldige orgaan versaking:** Eenhede vir itemkodes 1208, 1209 en 1210 (Kategorie 3: Gevalle met veelvuldige orgaan versaking) **sluit** resussitasie **in** (i.e. item 1211: Kardio-respiratoriese resussitasie)
- 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**:
- (a) Measurement of minute volume, vital capacity, time- and vital capacity studies / Bepaling van minuutvolume, vitale kapasiteit, tyd- en vitale kapasiteitstudies
  - (b) Testing and connecting the machine / Toets en verbinding van masjien
  - (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
  - (d) Instruction to nursing staff / Opdragte aan verpleegpersoneel
  - (e) All subsequent visits for the first 24 hours / Alle daaropvolgende besoeke gedurende die eerste 24 uur
- 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 / Ventilasio (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

**RULES GOVERNING THE SECTION RADIOLOGY: MAGNETIC RESONANCE IMAGING / REËLS VAN TOEPASSING OP DIE AFDELING RADIOLOGIE: MAGNETIESE RESONANSIE BEELDING**

**W. Magnetic Resonance Imaging • Magnetiese Resonansie Beelding**

- (a) In case where a Magnetic Resonance Imaging of any anatomical region was requested, proper written motivation by the practitioner who requested the examination must be submitted with the account upon which the Compensation Fund will consider approval for payment / Indien 'n Magnetiese Resonansie Beelding van enige liggaamsdeel aangevra was, moet skriftelike motivering deur die praktisyn wat die ondersoek aangevra het saam met die rekening voorgelê word waarna goedkeuring vir betaling deur die Verfoedingsfonds oorweeg sal word

- (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

**RULES GOVERNING THE SECTION MEDICAL PSYCHOTHERAPY / REËLS VAN TOEPASSING OP DIE AFDELING MEDIESE PSIGOTERAPIE**

**Note • Opmerking:**

- (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**
- (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**

- 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 geregverdig en fooie kan daarvoor gehef word, bo en behalwe die fooi vir die prosedure
- Vb. Except where otherwise indicated, the duration of a medical psychotherapeutic session is set at 20 minutes or part thereof provided that such a part comprises 50% or more of the time of a session. This set duration is also applicable for psychiatric examination methods / *Behalwe waar anders aangedui, duur 'n mediese psigoterapeutiese sessie 20 minute of deel daarvan op voorwaarde dat sodanige gedeelte 50% of meer van die tydsduur van 'n sessie behels. Hierdie vasstelling geld ook vir psigiatriese ondersoekmetodes*

**RULES GOVERNING THE SECTION RADIOLOGY / REËLS VAN TOEPASSING OP DIE AFDELING RADIOLOGIE**

- 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*
- Z. No fee to is subject to more than one reduction / *Geen gelde is onderworpe aan meer as een vermindering nie*

**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**

- AA. Procedures exclude the cost of isotope used / *Prosedures sluit die koste van die isotoop gebruik uit*

**RULE GOVERNING THE SECTION RADIATION ONCOLOGY / REËL VAN TOEPASSING OP DIE AFDELING STRALINGSONKOLOGIE**

- 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*

**RULE GOVERNING ULTRASOUND EXAMINATIONS / REËL VAN TOEPASSING OP ULTRASONIESE ONDERSOEKE**

- 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

- (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

#### RULES GOVERNING THE SECTION URINARY SYSTEM / REËLS VAN TOEPASSING OP DIE AFDELING URIENSTELSEL

- 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
- (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
- (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

#### RULE GOVERNING THE SECTION RADIOLOGY / REËL VAN TOEPASSING OP DIE AFDELING RADIOLOGIE

- 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

**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 After-hours emergency radiological services:** For involuntarily scheduled after-hours emergency radiological services (see general rule B: Normal hours and after hours), the additional fee shall be 50% of the fee for the particular service (section 19.12: Portable unit examinations excluded). For after-hours MR scans, a maximum levy of 100 Radiological units (R 1231.00) is applicable / **Na-uurse radiologiese nooddienste:** Vir onwillekeurig geskeduleerde na-uurse radiologiese nooddienste (raadpleeg algemene reël B: Normale ure en na-ure), is die addisionele heffing 50% van die fooi vir die spesifieke diens (afdeling 19.12: Ondersoeke met mobiele eenhede uitgesluit). Vir na-uurse MR-skanderings is 'n maksimum heffing van 100 Radiologie eenhede (R 1231.00) van toepassing

**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 stated in the tariff code, when multiple procedures / operations add significant time and / or complexity, and when each procedure / operation is clearly identifiable and defined, the following rule shall prevail: 100% (full value) for the first or major procedure / operation, plus 50% (half of) the tariff fee in respect of each additional operation or procedure with a maximum of four additional operations or procedures / Wanneer meer as een prosedure / operasie heelwat addisionele tyd en / of ingewikkeldheid meebring, en as elke prosedure / operasie duidelik identifiseerbaar en gedefinieer is, sal die volgende reël geld, behalwe waar anders gespesifiseer is in die tariefkode: 100% (volle tarief) vir die eerste of groter prosedure / operasie plus 50% (hefte van) tariefgelde ten opsigte van elke bykomende operasie of prosedure tot 'n maksimum van vier bykomende operasies of prosedures
- (b) In case of multiple fractures and / or dislocations the above rule shall prevail / In geval van meer as een fraktuur en / of ontwingting sal die bostaande reël van toepassing wees
- (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 the unrelated endoscopic procedures and provide a diagnosis to identify and indicate the diagnostic endoscopic procedure(s) unrelated to other therapeutic procedures performed under the same anaesthetic / Wanneer suiwer diagnostiese endoskopiese prosedures of diagnostiese endoskopiese prosedures onverwant aan enige terapeutiese prosedure onder dieselfde narkose uitgevoer word, is wysiger 0005 nie van toepassing op die fooie van sodanige diagnostiese endoskopiese prosedures nie aangesien die fooie vir endoskopiese prosedures nie nasorg insluit nie. Spesifiseer die onverwante endoskopiese prosedures en voorsien 'n diagnose om die diagnostiese endoskopiese prosedure(s) onverwant aan ander terapeutiese prosedures onder dieselfde narkose uitgevoer, te identifiseer en aan te dui.

- (d) Please note: When more than one small procedure are performed and the tariff code provides 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 / *Neem asseblief kennis: Wanneer meer as een klein prosedure uitgevoer word en die tariefkode voorsiening maak vir items vir "daaropvolgende" of "maksimum vir veelvuldige bykomende prosedures" (raadpleeg Afdeling 2. Huidstelsel) is wysiger 0005 nie van toepassing nie, aangesien die tarief reeds verminder is.*
- (e) "+" Means that this item code is used in addition to another definitive procedure and is therefore not subject to reduction according to modifier 0005 (see also modifier 0082) / *"+" Beteken dat hierdie itemkode bykomend tot 'n ander bepalende prosedure itemkode gebruik word en daarom nie aan vermindering onderworpe is volgens wysiger 0005 nie (raadpleeg ook wysiger 0082)*

**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 BEENOORPLANTINGSPROSEDURES EN INSTRUMENTASIE IN KOMBINASIE MET ARTRODESE (FUSIE) UITGEVOER WORD :**

- (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:*
1. Bone graft procedures and instrumentation are to be charged in addition to arthrodesis / *Beenoorplantingsprosedures en instrumentasie word bykomend tot artrodese gehef*
  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*
- (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*
- 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 fooie 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 fooie betaalbaar*
- 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 clinical procedure units (R176.60) 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 kliniese prosedure eenhede (R 176.60), ongeag die aantal items van toerusting wat voorsien word*
- (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 clinical procedure units (R176.60) irrespective of the number of items of equipment provided / **Gebruik van eie toerusting in hospitaalteater or 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 kliniese prosedure eenhede (R 176.60), ongeag die aantal items van toerusting wat voorsien word*



- 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 fooie
- 0009 **Assistant:** The fee for an assistant is 20% of the fee for the specialist surgeon, with a minimum of 36 clinical procedure units (R423.70) / **Assistent:** Die fooie vir 'n assistent is 20% van die spesialis chirurg se fooie met 'n minimum van 36 kliniese prosedure eenhede (R423.70)
- 0010 **Local anaesthetic / Lokale verdowing:**
- (a) The 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 clinical procedure units (i.e. 31 or more clinical procedure units (R 353.10) allocated to a single item) or (2) where more than one operation or procedure is performed at the same time with a combined value of greater than 50 clinical units (R588.50) / *Fooie mag gehef 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 kliniese prosedure eenhede (d.i. 31 of meer kliniese prosedure eenhede (R 353.10) 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 kliniese prosedure eenhede (R588.50) dra*
- (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 0036: Anaesthetic administered by a general practitioner, shall be applicable in such a case / *Die fooie 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 0036: Narkose deur 'n algemene praktisyn toegedien, sal van toepassing wees in sodanige geval*
- (c) The fee for a **local anaesthetic** administered is not applicable to radiological procedures such as angiography and myelography / *Die fooie vir **plaaslike verdowing** toegedien is nie van toepassing op radiologiese prosedures soos angiografie en miëlografie nie*
- (d) No fee may be levied for the topical application of local anaesthetic / *Geen fooie mag gehef word vir die topikale aanwending van lokale verdowing nie*
- (e) Please note: modifier 0010: Local anaesthetic administered by the practitioner 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 gehef word nie*
- 0011 **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 clinical procedure units (R141.20) 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 operasieteater uitgevoer word, kan 'n bykomende 12 kliniese prosedure eenhede (R141.20) gehef 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 ASSEMBLIEF DIE TYDSDUUR IN MINUTE AAN)*
- 0013 **Endoscopic examinations done at operations:** Where a related 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 verwante endoskopiese ondersoek uitgevoer word by 'n operasie deur die*

*chirurg of die anesthesioloog, mag slegs 50% van die fooie vir die endoskopiese ondersoek gehef word*

- 0014 **Operations previously performed by other surgeons:** Where an operation is performed which has previously been performed by another surgeon, e.g. a revision or repeat operation, the fee shall be calculated according to the full tariff for the 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 / **Operasies voorheen uitgevoer deur ander chirurge:** Wanneer 'n operasie uitgevoer word wat vantevore deur 'n ander chirurg uitgevoer is, byvoorbeeld 'n hersteloperasie of herhaling van 'n operasie, word die fooie bereken volgens die volle operasietarief plus addisionele fooie soos onderhandel 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

#### 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

- 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 fooie daarvoor gehef nie, omdat die nabehandeling by die globale operasiefooie 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.
- 0017 **Injections administered by practitioners:** When desensitization, intravenous, intramuscular or subcutaneous injections are administered by the practitioner him / herself to patients who attend the consulting rooms, the first injection forms part of the consultation / visit. Subsequent injections for the same condition should be charged at 7.5 consultative services units (R88.30) using modifier 0017 to reflect the amount. (NOT chargeable together with a consultation item code) / **Inspuitings deur praktisyns toegedien:** Wanneer desensitiserings-, binne-aarse, binnespiers of onderhuidse inspuitings deur die praktisyn self aan 'n pasiënt wat die spreekkamer besoek toegedien word, vorm toediening van die eerste inspuiting deel van die konsultasie / besoek. 7.5 Konsultasie eenhede (R88.30) vir daaropvolgende inspuitings vir dieselfde toestand) kan gehef word met itemkode 0017 om dit aan te dui. (NIE betaalbaar saam met 'n konsultasie kode nie)

#### 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

- 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% for surgeons; 50% increase in anaesthetic time units for anaesthesiologists / *Chirurgiese wysiger vir persone met 'n LMI van meer as 35 (bereken volgens  $\text{kg/m}^2$ ): Fooi vir die prosedure +50% vir chirurge; verhoging van 50% in narkose tydseenhede vir anesthesioloë.*

#### 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

- 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 narkosefooie:** Narkosefooie 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 ontwrigtings, tel eenhede by soos uitgelê in wysigers 5441 tot 5448
- 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:*
- 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 anaesthetic units (R110.00) 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 anaesthetic units (R165.00) 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 narkose-eenhede (R110.00) 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 narkose-eenhede (R165.00) per 15 minute of deel daarvan na die eerste uur
- 0024** **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 fooi behoort gehef te word
- 0025** **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 / **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 fooi 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*

- 0027 **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 major 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 gelyk aan aan dié van die groter operasie met die hoogste aantal eenhede dra
- 0029 **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 / **Assistent anesthesioloë:** Wanneer die omvang van 'n narkose dit vereis, kan gebruik gemaak word van die dienste van 'n assistent anesthesioloog. Die assistent anesthesioloog se vergoeding sal op dieselfde basis bereken word as in die geval van 'n algemene praktisyn wat narkose toedien
- 0031 **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 fooie mag vir sodanige dienste gehief word wanneer dit voor, of gedurende werklike teater- of operasietyd gelewer word nie
- 0032 **Patients in the prone position:** Anaesthesia administered to patients in the prone position shall carry a minimum of 4 basic anaesthetic units. When the basic anaesthetic units for the procedure are 3, one additional anaesthetic unit (R55.00) should be added. If the basic anaesthetic units for the procedure are 4 or more (R220.00), no additional units should be added / **Pasiënte in buikliggende posisie:** Narkose toegedien aan pasiënte in die buikliggende posisie sal 'n minimum van 4 basiese narkose-eenhede dra. Wanneer die basiese narkose-eenhede vir 'n prosedure 3 is word een addisionele narkose-eenheid (R55.00) bygevoeg. Indien die basiese narkose-eenhede wat toegeken is aan die prosedure 4 of meer beloop (R220.00), word geen bykomende eenhede bygevoeg nie
- 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 basic anaesthetic units. When the basic anaesthetic units for the procedure are 3, one extra anaesthetic unit (R55.00) should be added. If the basic anaesthetic units for the procedure are 4 or more (R220.00), 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 basiese narkose eenhede dra. Wanneer die basiese narkose eenhede vir die prosedure 3 is, word een addisionele narkose eenheid (R55.00) bygevoeg. Indien die basiese narkose eenhede wat toegeken is aan die prosedure 4 of meer beloop (R220.00), word geen bykomende eenhede bygevoeg nie
- 0035 **Anaesthesia administered by specialist anaesthesiologists / anaesthetists:** No anaesthesia administered by a specialist anaesthesiologist / anaesthetist shall carry a total value of less than 7 anaesthetic units (R385.00) comprising basic units, time units and the appropriate modifiers / **Narkose toegedien deur spesialis anesthesioloë / narkotiseurs:** Geen narkose toegedien deur

*'n spesialis anesthesioloog / narkotiseur sal 'n totale waarde van minder as 7 narkose eenhede (R385.00) beloop nie insluitend basiese eenhede, tydseenhede en toepaslike wysigers*

- 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 anaesthetic units (R385.00). 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 units would be reduced to less than 11 units in total. The monetary value of the unit is the same for both anaesthesiologists / anaesthetists / **Narkose toegedien deur algemene praktisyns:** Fooie 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 fooie 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 narkose-eenhede (R385.00) 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 eenhede verlaag sal word na minder as 11 eenhede in totaal nie. Die geldwaarde van 'n eenheid bly dieselfde vir beide anesthesioloë / narkotiseurs
- 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)
- 0037 Body hypothermia:** Utilisation of total body hypothermia: Add 3 anaesthetic units (R165.00) / **Liggaamshipotermie:** Aanwending van totale liggaams-hipotermie: Voeg 3 narkose-eenhede by (R165.00)
- 0038 Peri-operative blood salvage:** Add 4 anaesthetic units (R220.00) for intra-operative blood salvage and 4 anaesthetic units for post-operative blood salvage / **Peri-operatiewe bloedherwinning:** Voeg 4 narkose-eenhede (R220.00) by vir intra-operatiewe bloedherwinning en 4 narkose-eenhede vir post-operatiewe bloedherwinning
- 0039 Control of blood pressure:** Deliberate control of blood pressure: All cases up to one hour: Add 3 anaesthetic units (R165.00), thereafter add 1 (one) additional anaesthetic unit (R55.00) per quarter hour or part thereof (PLEASE INDICATE THE TIME IN MINUTES) / **Bloeddrukbeheer:** Doelbewuste beheer van bloeddruk: Alle gevalle tot en met een uur: Voeg 3 narkose-eenhede by (R165.00), daarna word 1(een) bykomende narkose-eenheid (R55.00) bygevoeg per kwartier of gedeelte daarvan. (DUI ASSEMBLIEF DIE TYD IN MINUTE AAN)
- 0041 Hyperbaric pressurisation:** Utilisation of hyperbaric pressurisation: Add 3 anaesthetic units (R165.00) / **Hiperbariese druk:** Aanwending van hiperbariese druk: Voeg 3 narkose-eenhede by (R165.00)
- 0042 Extracorporeal circulation:** Utilisation of extracorporeal circulation: Add 3 anaesthetic units (R165.00) / **Buiteliggaamlike sirkulasie:** Aanwending van buiteliggaamlike sirkulasie: Voeg 3 narkose-eenhede by (R165.00)

#### MUSCULO-SKELETAL SYSTEM / SPIER-SKELET STELSEL

#### MODIFIERS GOVERNING ANAESTHETIC FEES FOR ORTHOPAEDIC OPERATIONS / WYSIGERS VAN TOEPASSING OP NARKOSEFOOIE 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)*

- 5441** Add one 1 anaesthetic unit (R55.00), except where the procedure refers to the skeletal bones named in modifiers 5442 to 5448 / *Voeg een 1 narkose-eenheid (R55.00) by, behalwe waar die prosedure betrekking het op die skeletbene wat genoem word in wysigers 5442 tot 5448*
- 5442** Shoulder, scapula, clavicle, humerus, elbow joint, upper 1/3 tibia, knee joint, patella, mandible and temporo-mandibular joint: Add two 2 anaesthetic units (R110.00) / *Skouer, skapula, klavikula, humerus, elmooggewrig, boonste 1/3 van tibia, kniegewrig, patella, mandibula en temporo-mandibulêre gewrig: Voeg twee 2 narkose-eenhede (R110.00) by*
- 5443** Maxillary and orbital bones: Add three 3 anaesthetic units (R165.00) / *Maksillêre en orbitale bene: Voeg drie 3 narkose-eenhede by (R165.00)*
- 5444** Shaft of femur: Add four 4 anaesthetic units (R220.00) / *Skag van femur: Voeg vier 4 narkose-eenhede by (R220.00)*
- 5445** Spine (except coccyx), pelvis, hip, neck of femur: Add five 5 anaesthetic units (R275.00) / *Werwelkolom (behalwe koksieks), pelvis, heup, nek van femur: Voeg vyf 5 narkose-eenhede (R275.00) by.*
- 5448** Sternum and / or ribs and musculo-skeletal procedures which involve an intra-thoracic approach: Add eight 8 anaesthetic units (R440.00) / *Sternum en / of ribbe en spier-skeletprosedures wat 'n intra-torakale toegang behels: Voeg agt 8 narkose-eenhede (R440.00) by*
- 0045** **Post-operative alleviation of pain / Na-operatiewe pynverligting**
- (a) When a **regional or nerve block procedure** is performed, the appropriate item code for a patient in a hospital or nursing facility can be charged, provided that it is not the primary anaesthetic technique / *Wanneer 'n streeksblok of senuweeblok uitgevoer word, kan die toepaslike itemkode vir 'n pasiënt in 'n hospitaal of verpleeginrigting gehef word, solank genoemde blok nie die primêre narkosetegniek is nie*
- (b) When a **second medical practitioner** has administered the regional or nerve block for post-operative alleviation of pain it shall be charged according to the particular procedure for instituting therapy. Revisits shall be charged according to the appropriate hospital follow-up visit for a patient in a hospital or nursing facility / *Wanneer 'n tweede mediese praktisyn die streeksblok of senuweeblok vir na-operatiewe pynverligting toedien, sal fooie gehef word volgens die betrokke prosedure vir die toedien van die terapie. Herbesoeke word volgens die toepaslike opvolgbesoek vir 'n pasiënt by 'n hospitaal of verpleeginrigting gehef*
- (c) None of the above is applicable to **routine post-operative pain management** i.e. intramuscular, intravenous or subcutaneous administration of opiates or NSAID (nonsteroidal anti-inflammatory drugs) / *Geeneen van die bogemelde is van toepassing op roetine na-operatiewe behandeling vir pyn, bv. binnespiers, binneaarse of subkutane toediening van opiate, of NSAIDS (non-steroid anti-inflammatoriese middels) nie*

**MODIFIER GOVERNING FEES FOR AN ANAESTHESIOLOGIST UTILISING AN INTRA-AORTIC BALLOON PUMP (CARDIOVASCULAR SYSTEM) / WYSIGER VAN TOEPASSING OP FOOIE VIR 'N ANESTESIOLOOG WAT GEBRUIK MAAK VAN 'N INTRA-AORTIESE BALLONPOMP (KARDIO-VASKULÊRESTELSEL)**

- 0100** **Intra-aortic balloon pump:** Where an anaesthesiologist would be responsible for operating an intra-aortic balloon pump, a fee of 75 clinical procedure units (R882.80) is applicable / **Intra-aortiese ballonpomp:** Waar 'n anesthesioloog verantwoordelik is vir die beheer van 'n intra-aortiese ballonpomp is 'n tarief van 75 kliniese prosedure eenhede (R 882.80) van toepassing

#### MUSCULO-SKELETAL SYSTEM / SPIER-SKELETSTELSEL

#### MODIFIERS GOVERNING THIS SPECIFIC SECTION OF THE TARIFF / WYSIGERS VAN TOEPASSING OP HIERDIE SPESIFIEKE AFDELING VAN DIE TARIEF

- 0046** Where in the treatment of a specific fracture or dislocation (compound or closed) an initial procedure is followed **within one month** by an open reduction, internal fixation, external skeletal fixation or bone grafting on the same bone, the fee for the initial treatment of that fracture or dislocation shall be reduced by 50%. Please note: This reduction does not include the assistant's fee where applicable. After one month, the full fee for the initial treatment is applicable / *Waar gedurende die behandeling van 'n spesifieke fraktuur of ontwrigting (oop of geslote) 'n aanvanklike prosedure binne een maand gevolg word deur 'n oop reduksie of interne fiksasie, buite-skeletfiksasie of beenoorplanting aan dieselfde been, word die fooie vir die aanvanklike behandeling van die spesifieke fraktuur of ontwrigting met 50% verminder. Let wel: Hierdie vermindering sluit nie die assistentsgelde in waar van toepassing nie. Na verloop van 'n maand is die volle fooie vir die aanvanklike behandeling betaalbaar*
- 0047** A fracture **NOT requiring reduction** shall be charged on a fee per service basis (<sup>o</sup>PROVIDED that the cumulative amount does NOT exceed the fee for a reduction) / Vir 'n **fraktuur wat NIE reduksie vereis** nie word 'n bedrag bereken volgens die fooi per diens gelewer (<sup>o</sup>MITS die kumulatiewe bedrag NIE die fooie vir 'n reduksie oorskry nie)
- 0048** Where in the treatment of a fracture or dislocation an initial closed reduction is followed **within one month** by further closed reductions under general anaesthesia, the fee for such subsequent reductions will be 27 clinical procedure units (R317.80) (not including after-care) / *Indien die aanvanklike geslote behandeling van 'n fraktuur of ontwrigting binne een maand opgevolg word deur verdere geslote reduksies onder algemene narkose, sal die fooie vir sodanige reduksies 27 kliniese prosedure eenhede (R317.80) beloop (nasorg nie ingesluit nie)*
- 0049** Except where otherwise specified, in cases of **compound fractures**, 77 clinical procedure units (R906.30) (specialists) and 77 (R906.30) clinical procedure units (general practitioners) are to be added to the units for the fractures including debridement / *In gevalle van oop frakture word 77 kliniese prosedure eenhede (R906.30) (spesialiste) en 77 kliniese prosedure eenhede (algemene praktisyns) (R906.30) bygetel by die eenhede vir die fraktuur, behalwe waar elders anders gespesifiseer, debridement ingesluit*
- 0050** In cases of a **compound fracture where a debridement is followed by internal fixation (excluding fixation with Kirschner wires, as well as fractures of hands and feet)**, the full amount according to either modifier 0049: Cases of compound fractures, or modifier 0051: Fractures requiring open reduction, internal fixation, external skeletal fixation and / or bone grafting, may be added to the fee for the procedure involved, plus half of the amount according to the second modifier (either modifier 0049: Cases of compound fractures or modifier 0051: Fractures requiring open reduction, internal fixation, external skeletal fixation and / or bone grafting, as applicable) / *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 fooie 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)*

- 0051 Fractures requiring **open reduction, internal fixation, external skeletal fixation and / or bone grafting**: Specialists add 77 clinical procedure units (R906.30); general practitioners add 77 clinical procedure units (R906.30) / **Frakture wat oop reduksie, interne fiksasie, buite-skeletfiksasie en / of beenoorplanting** vereis: *Spesialiste voeg 77 kliniese prosedure eenhede (R906.30) by; algemene praktisyns voeg 77 kliniese prosedure (R906.30) eenhede by*
- 0053 Fractures requiring **percutaneous internal fixation** [insertion and removal of fixatives (wires) into of fingers and toes]: Specialists and general practitioners add 32 clinical procedure units (R376.60) / **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 kliniese prosedure eenhede (R376.60)*
- 0055 **Dislocation** requiring open reduction: Units for the specific joint plus 77 clinical procedure units (R906.30) for specialists for general practitioners (R906.30) / **Ontwrigting** wat oop reduksie vereis: *Eenhede vir die spesifieke gewrig plus 77 kliniese prosedure eenhede (R906.30) vir spesialiste en algemene praktisyns*
- 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 fooie vir die eerste voet volgens wysiger 0005: Meer as een prosedure / operasie onder dieselfde narkose uitgewerk. Fooie 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% / **Hersieningsoperasie vir totale gewrigsvervanging** en onmiddellike herinplasing (met of sonder infeksie): *fooie soos vir totale gewrigsvervanging + 100%*

**MODIFIER GOVERNING COMBINED PROCEDURES ON THE SPINE / WYSIGER VAN TOEPASSING OP GEKOMBINEERDE PROSEDURES OP DIE WERWELKOLOM**

- 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 fooie vir die deel van die operasie deur elkeen verrig*

**MODIFIERS GOVERNING THE SUBSECTION REPLANTATION SURGEY / WYSIGERS VAN TOEPASSING OP DIE ONDERAFDELING REPLANTASIE CHIRURGIE**

- 0063 Where **two specialists work together on a replantation procedure**, each shall be entitled to two-thirds of the fee for the procedure / **As twee spesialiste saam aan 'n replantasie prosedure werk**, is elkeen geregtig op twee derdes van die fooie vir die prosedure
- 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 fooie betaabaar vir amputasie van die nie-lewensvatbare dele nie

**MODIFIER GOVERNING THE SECTION LARYNX / WYSIGER VAN TOEPASSING OP DIE AFDELING LARINKS**

- 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 %. (Die fooie vir ander operasies waar 'n operasiemikroskoop gebruik moet word, sluit die gebruik van 'n operasiemikroskoop in behalwe waar anders in die Tariefrielyn gespesifiseer)

**MODIFIERS GOVERNING NASAL SURGERY / WYSIGERS VAN TOEPASSING OP CHIRURGIE VAN DIE NEUS**

**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 fooie vir die prosedure wat uitgevoer is by. Slegs van toepassing op items 1025, 1027, 1030, 1033, 1035, 1036, 1039, 1047, 1054 en 1083

**MODIFIER GOVERNING OPEN PROCEDURE(S) WHEN PERFORMED THROUGH THORACOSCOPE / WYSIGER VAN TOEPASSING OP OOP PROSEDURE(S) WANNEER TORAKOSKOPIES UITGEVOER WORD**

**0070** Add 45 clinical procedure units (R529.70) to procedure(s) performed through a **thoracoscope** / Voeg 45 kliniese prosedure-eenhede (R529.70) by oop prosedure(s) wat **torakoskopies** uitgevoer word

**MODIFIER GOVERNING GASTROENTEROLOGY PROCEDURES / WYSIGER VAN TOEPASSING OP GASTROENTEROLOGIESE PROSEDURES**

**0074** A reduction of 33,33% (1/3) in the fee will apply to all **fibre optic procedures** performed using hospital equipment / 'n Vermindering van 33,33% (1/3) van die fooie sal van toepassing wees op alle **veseloptiese prosedures** wat met hospitaaltoerusting uitgevoer word

**MODIFIER GOVERNING FEES FOR FIBRE OPTIC PROCEDURES / WYSIGER VAN TOEPASSING OP GELDE VIR VESELOPTIESE PROSEDURES**

**0075** The fee plus 21 clinical procedure units (R247.20) will apply where **fibre optic procedures** are performed in rooms with own equipment. Please note: Modifier 0075 is not applicable to any of the items for diagnostic procedures in the otorhinolaryngology sections of the tariff guide / Die fooie plus 21 kliniese prosedure eenhede (R247.20) sal van toepassing wees waar **veseloptiese prosedures** in spreekkamers met eie apparaat uitgevoer word. Let wel: Wysiger 0075 is nie van toepassing op enige items vir diagnostiese prosedures in die otorinolaringologie-afdelings van die tariefrielyn nie

**MODIFIER GOVERNING THE SECTION ON PHYSICAL TREATMENT / WYSIGER VAN TOEPASSING OP DIE AFDELING FISIESE BEHANDELING**

- 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 fooie gehef kan word (Slegs van toepassing indien dienste deur 'n spesialis in fisiese geneeskunde gelewer word)**
- (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**

**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

**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 aansoek om sulke goedkeuring gedoen word

#### **MODIFIER GOVERNING THE SECTION MEDICAL PSYCHOTHERAPY / WYSIGER VAN TOEPASSING OP DIE AFDELING MEDIESE PSIGOTERAPIE**

- 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 fooie 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 **After-hours emergency radiological services:** For involuntarily scheduled after-hours emergency radiological services (see general rule B: Normal hours and after hours), the additional fee shall be 50% of the fee for the particular service (section 19.12: Portable unit examinations, excluded). For after-hours MR scans (items 6200 to 6255), a maximum levy of 100 radiological units (R1231.00) is applicable / **Na-uurse radiologiese nooddienste:** Vir onwillekeurig geskeduleerde na-uurse radiologiese nooddienste (raadpleeg algemene reël B: Normale ure en na-ure), is die addisionele fooi 50% van die fooie vir die spesifieke diens gelewer (afdeling 19.12: Ondersoeke met mobiele eenhede, uitgesluit). Vir na-uurse MR-skanderings (items 6200 tot 6255) is 'n maksimum heffing van 100 radiologiese eenhede (R1231.00) van toepassing
- 0002 **Written report on X-rays:** The lowest level item code for a new patient office (consulting rooms) visit, is applicable only where 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 initial hospital visit code, as appropriate, are not to be used for the routine reporting of 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 oor X-strale wat elders geneem is en aan hom voorgelê word. Die bogemelde itemkode en die laagste vlak aanvanklike hospitaal besoek kode, moet nie gebruik word vir die roetine verslaggewing van X-strale wat elders geneem is nie
- 0080 **Multiple examinations: Full Fee / Veelvuldige ondersoeke: Volle tarief**
- 0081 **Repeat examinations: No reduction / Her-ondersoek: Geen vermindering**
- 0082 "+" Means that this item code is complementary to a preceding item code and is therefore not subject to reduction / "+" Beteken dat hierdie itemkode saam met 'n vorige itemkode gebruik word en daarom nie aan vermindering onderworpe is nie
- 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 fooie sal van toepassing wees op radiologiese ondersoeke, 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 fooie waar X-strale deur huisartse geneem word:**

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 verwag dat daarvan gebruik gemaak sal word. As omstandighede ten tyde van die eerste konsultasie ongunstig is om sodanige dienste te bekom, kan die huisarts 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 verfee op die gebruikelike wyse moet indien*

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 huisarts X-straalfoto's met sy eie apparaat neem waar die dienste van 'n spesialis radioloog onverkrygbaar is, mag hy die voorgeskrewe fooie vir die neem van die foto's eis*
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 huisarts 'n X-straalondersoek by 'n provinsiale hospitaal aanvra waar die dienste van 'n spesialis radioloog beskikbaar is word verwag dat die radioloog die X-straalfoto's sal lees waarvoor hy een derde van die voorgeskrewe fooi mag eis*  
 (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 • *As die hospitaal se radiografis nie beskikbaar is nie en die huisarts 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 huisarts se X-straalbevindings in 'n geskrewe verslag bevestig waarvoor die radioloog dan een derde van die voorgeskrewe tarief mag eis*
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 huisarts '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 bevindings in te dien, kan hy twee derdes van die voorgeskrewe tarief daarvoor eis*
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 huisarts 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

- 0084** **Film costs:** In the case of radiological item codes where film are used, practitioners should adjust the fee upwards or downwards in accordance with changes in the price of film in comparison with November 1979; the calculation must be done on the basis that film costs comprise 10% of the monetary value of the unit (This information is obtainable from the Radiological Society of SA) / **Filmkoste:** In geval van radiologiese itemkodes waar van film gebruik gemaak word, moet praktisyns die fooie opwaarts of afwaarts aanpas in ooreenstemming met veranderinge in die prys van film in vergelyking met November 1979; die berekening moet gedoen word op die basis dat 10% van die eenheid se geldwaarde uit filmkoste bestaan (Hierdie inligting is verkrygbaar by die Radiologiese Vereniging van SA)
- 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

#### MODIFIER GOVERNING VASCULAR STUDIES / WYSIGER VAN TOEPASSING OP VASKULÊRE STUDIES

- 0086** **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 Kontras=mediums" vul mekaar aan en vorm saam 'n enkele ondersoek: die fooie betaalbaar vir hierdie items is gevolglik nie onderworpe aan verhoging ooreenkomstig die bepalings van wysiger 0080: Veelvuldige ondersoeke, nie

**PLEASE NOTE:** Modifier 0083 is not applicable to Section 19.8 of the tariff  
**LET WE :** Wysiger 0083 is nie van toepassing op Afdeling 19.8 van die tarief nie

#### Rules applicable to vascular studies • Reëls van toepassing op vaskulêre studies

- (a) The machine fee (items 3536 to 3550) includes the cost of the following / Die fooie 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 fooie gehê 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, gidsdrade, inplasingstoestelle, gespesialiseerde kateters, ballon kateters, stente, anti-emboliese middels, verdowingsmiddels en kontrasmedia)
- (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 gehê word en is slegs van toepassing vir radiologiese praktyke
- (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 fooie hef volgens wysigers en die toepaslike kodes*

- (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*

**MODIFIERS GOVERNING VASCULAR STUDIES AND INTERVENTIONAL RADIOLOGY PROCEDURES / WYSIGERS VAN TOEPASSING OP VASKULÊRE STUDIES EN INTERVENSIONELE RADIOLOGIE PROSEDURES**

- 6300** 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 fooie vir items 3536-3550 toegelaat (spesifiseer duur van prosedure op rekening)*
- 6301** 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 fooie met 40% verminder (d.w.s. 60% van die tarief word gehef)*
- 6302** 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 fooie met 40% verminder (d.w.s. 60% van die tarief word gehef)*
- 6303** 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*
- 6305** 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 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 radiologiese eenhede verminder na die aanvanklike kateterisasie. Die volle fooie (100%) word vir die eerste kateterisasie gehef*

**MODIFIERS GOVERNING ULTRASONIC INVESTIGATIONS / WYSIGERS VAN TOEPASSING OP DIE AFDELING ULTRAKLANK ONDERSOEKE**

- 0160** **Aspiration of biopsy procedure** performed under direct ultrasonic control by an ultrasonic aspiration biopsy transducer (Static Realtime): 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): Fooie vir die liggaamsdeel wat ondersoek word plus 30% van die eenhede*
- 0165** **Use of contrast during ultrasound study:** add 6 ultrasound units (R69.80) / *Gebruik van kontras gedurende ultraklank studie: voeg 6 ultraklankeenhede (R69.80) by*

**MODIFIER GOVERNING INTERVENTIONAL RADIOLOGICAL PROCEDURES / WYSIGER VAN TOEPASSING OP INTERVENSIONELE RADIOLOGIESE PROSEDURES**

- 0090** **Radiologist's fee for participation in a team:** 30 radiology units (R369.30) 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) / Radioloog se fooie vir deelname in 'n span: 30 radiologiese eenhede (R369.30) 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)

#### MODIFIERS GOVERNING MAGNETIC RESONANCE IMAGING / WYSIGERS VAN TOEPASSING OP MAGNETIESE RESONANSIE BEELDING

- 6100** In order to charge the full fee (600 magnetic resonance units (R7386.00) 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 fooie (600 magnetiese resonansie-eenhede (R7386.00)) vir 'n ondersoek van 'n bepaalde enkele anatomiese liggaamsdeel te hef, moet die ondersoek uitgevoer word met die toepaslike radio frekwensielus wat T1 en T2 opnames insluit op ten minste twee vlakke*
- 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 fooie gehef word nie - ook van toepassing op alle radioterapie beplanningstudies, per streek*
- 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*

**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 / **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 Verfoedingsfonds oorweeg sal word

#### MODIFIERS GOVERNING THE SECTION RADIATION ONCOLOGY / WYSIGERS VAN TOEPASSING OP DIE AFDELING BESTRALINGSONKOLOGIE

- 0001** **After-hours emergency radiological services:** For involuntarily scheduled after-hours emergency radiological services (see general rule B: Normal hours and after hours), the additional fee shall be 50% of the fee for the particular services rendered (section 19.12: Portable unit examinations, excluded) / **Na-ure radiologiese nooddienste:** *Vir onwillekeurig geskeduleerde na-ure radiologiese nooddienste (raadpleeg algemene reël B: Normale ure en na-ure), is die addisionele fooi 50% van die tarief vir die spesifieke diens gelewer (afdeling 19.12: Ondersoeke met mobiele eenhede, uitgesluit)*
- 0093** The fees for radiation oncology shall apply only where a specialist in radiation oncology uses his own apparatus / *Die fooie vir bestralingsonkologie geld net waar die spesialis in bestralingsonkologie sy eie apparaat gebruik*

#### MODIFIERS GOVERNING THE SECTION PATHOLOGY / WYSIGERS VAN TOEPASSING OP DIE AFDELING PATOLOGIE

- 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 toetsse 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 fooie teen twee derdes van die patoloog se tarief gehef word*

- 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 fooi van 50% van die tarief vir die betrokke patologiese diens van toepassing wees, met die volgende voorwaardes:
- 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*
  - Specimens must be collected on a stat basis where applicable / *Monsters moet, waar van toepassing, op 'n stat basis bekom word*
  - Test must be performed on a stat basis / *Toetse moet op 'n stat basis uitgevoer word*
  - 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*
  - 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.*

**Notes:** For fees for Histology and Cytology refer to item codes 4561 to 4593 under section 22: Anatomical Pathology / **Opmerkings:** Vir Histologiese- en Sitologiese tariewe verwys na itemkodes 4561 tot 4593 onder Afdeling 22: Anatomiese Patologie

	Specialist		General		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
<b>CONSULTATIONS • KONSULTASIES</b>							
<b>GENERAL PRACTITIONERS AND ALL SPECIALISTS • ALGEMENE PRAKTISYNS EN ALLE SPESIALISTE</b>							
<p>a. Only one of items 0181-0188 as appropriate may be charged for a single service and not combinations thereof • Slegs een van items 0181-0188 wat toepaslik is mag gehef word vir 'n diens en nie kombinasies daarvan nie</p> <p>b. These services must be <b>face-to-face with the patient</b> and excludes the time spent doing special investigations which receive additional remuneration • Hierdie dienste moet met <b>die pasiënt persoonlik</b> wees en sluit die tyd gebruik om spesiale ondersoeke uit te voer, waarvoor bykomende vergoeding geëis kan word, uit.</p> <p>c. Only one of the items 0145, 0146 or 0147 may be charged as appropriate and not combinations thereof • Slegs een van die items 0145, 0146 of 0147 soos toepaslik mag gehef word en nie 'n kombinasie daarvan nie.</p> <p>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 siektetoestand uitgevoer word</p> <p>e. Code 0181 includes remuneration for the completion of the first and final medical reports • Kode 0181 sluit vergoeding in vir die voltooiing van die eerste en finale mediese verslae.</p>							
<b>NEW PATIENT • NUWE PASIENT</b>							
0181	Visit for a new problem / new patient with problem focused history, examination and management • Besoek vir 'n nuwe probleem / nuwe pasiënt met probleem- gefokusde geskiedenis, ondersoek en hantering.	33	395.70	33	395.70		
<b>FOLLOW-UP VISIT • OPVOLGBESOEK</b>							
0186	Follow-up visit for the evaluation and management of a patient • Opvolg-besoek vir die evaluering en hantering van 'n pasiënt.	25	299.80	20	239.80		
<b>CONSULTATIONS: SPECIALISTS AND GENERAL PRACTITIONERS • KONSULTASIES : SPESIALISTE EN ALGEMENE PRAKTISYNS</b>							
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 • Vir konsultasie/besoek weg van die dokter se huis of kamers: VOEG BY items 0181 of 0186 soos toepaslik. Bevestig waar besoek plaasgevind het. Let asseblief daarna op dat item 0145 nie toepaslik is vir voor-narkose evaluerings nie en mag nie by item 0151 gevoeg word nie.	6	70.60	6	70.60		
0145 is not applicable for travelling to doctor's own satellite rooms • 0145 is nie van toepassing vir reis na dokter se eie sateliet spreekkamers nie.							



	Specialist		General		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
0146 For after hours emergency or unscheduled consultation/visit at the doctor's home or rooms: ADD to items 0181 or 0186 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 0186 soos toepaslik (Algemene Reel B verwys)	8	94.20	8	94.20			
0147 For after hours emergency or unscheduled consultation/ visit away from the doctor's home or rooms: ADD to items 0181 or 0186 as appropriate as appropriate (General Rule B refers) • Vir 'n na-ure noodgeval of ongeskuleerde konsultasie/besoek weg van die dokter se huis of kamers: VOEG BY items 0181 of 0186 soos toepaslik soos toepaslik (Algemene Reel B verwys)	14	164.80	14	164.80			
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, 0147 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 gehêf word (nie vir gebruik saam met items 0111, 0146, 0147 of intensiewe sorg items 1204-1214)	12	141.20	12	141.20			
<b>PRE-ANAESTHETIC ASSESSMENT • VOORNARKOSE EVALUERING</b>							
(a) Pre-anaesthetic consultations for all major vascular, cardio-thoracic and orthopaedic cases will attract a unit value of at least 15,00 units • Vir voornarkose konsultasies van alle groot vaskulêre, kardiotorokale en ortopediese gevalle sal ten minste 'n eenheidswaarde van 15,00 eenhede gehêf word.							
(b) Only one of the items 0146 or 0147 may be charged and not combinations thereof. Please note: Item 0145 is not applicable to pre-anaesthetic assessments • Slegs een van die items 0146 of 0147 mag gehêf word en nie 'n kombinasie daarvan nie. Let wel: Item 0145 is nie toepaslik vir voornarkose evaluering nie.							
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	383.70	32	383.70			
<b>GENERAL • ALGEMEEN</b>							
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)		1,800.00					
2918 Non-operative supervision of head/brain injuries, spinal injuries (including paraplegics) or burns for all disciplines, except urologists • Nie-operatiewe toesig van kop/brain beserings, spinale beserings (paraplieë ingesluit) of brandwonde vir alle dissiplines, behalwe uroloë.	244	2,871.90	195	2,297.50			

	Specialist		General		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
<p>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</p> <p>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). ● <b>Neem Kennis</b> : 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 Reel G en N(c) verwys).</p>	117	1,377.10	93.6	1,101.70			
<b>MEDICINE, MATERIAL, AND SUPPLIES ● MEDIKASIE, MATERIAAL EN VOORRAAD</b>							
<p>0196 <b>Chronic medicine and/or material indicator:</b> 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</p>							
<p>0200 Cost of prostheses and/or internal fixation cost price + 20% with a maximum markup of R2334.40 ● Koste van prosteses en/of interne fikasie apparaat. Kosprys + 20% met 'n maksimum winsgrens van R2334.40</p>							
<p>0201 (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 Pryslis 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. hegtingsmateriaal) benodig sal betaling oorweeg word mits die eis van 'n motivering vergesel word.</p>							

	Specialist		General		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
(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 pasient, 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.							
0202 Setting of sterile tray: A fee of 10,00 clinical procedure units may be charged for the setting of a sterile tray where a sterile procedure is performed in the rooms. Cost of stitching material, if applicable, shall be charged for according to item 0201. • Stel van 'n steriele blad: 'n Tarief van 10,00 kliniese prosedure eenhede kan gehef word vir die stel van 'n steriele blad waar 'n steriele prosedure in die spreekkamers uitgevoer word. Koste van heftingsmateriaal, indien van toepassing, word volgens Item 0201 gehef	10	117.70	10	117.70			

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
6999 Unlisted procedure / service code: A procedure / service may be provided that is not listed in the CF tariffs. Please quote the correct SAMA code with code 6999 • Ongespesifiseerde procedure / diens kode: 'n Prosedure / diens mag gelewer word wat nie in die VF tarief gelys word nie. Dui asseblief die korrekte SAMA kode aan saam met item 6999.							
<b>1. INTRAVENOUS TREATMENT / BINNEAARSE-BEHANDELING</b>							
0206 Intravenous infusions (push-in) Insertion of cannula— chargeable once per 24 hour • Intravenouse infuus (instoot) Inplaas van kannule—fooi hefbaar vir een uitvoering per 24 uur	6	70.60	6	70.60			
0207 Intravenous infusions (cut-down): Cut-down and insertion of cannula—chargeable once per 24 hours • Intravenouse infuus (Insnyding) : Insny en inplaas van kannule—fooi hefbaar vir een uitvoering per 24 uur	8	94.20	8	94.20			
<b>VENESECTION • VENESEKSIE</b>							
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	70.60	6	70.60			
<p><i>Note: How to charge for Intravenous Infusions:</i> 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</p> <p><i>Opmerking: Hoe om gelde te hef vir Intravenouse infusies:</i> Praktisyne 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 gehief word vir slegs die instandhouding van die infuus nie, byvoorbeeld kontroliering van die vloeï van voorskryf van die inhoud, aangesien dit gereken word as deel van die dienste wat tydens konsultasies gelewer word</p>							
0210 Collection of blood specimen(s) by medical practitioner for pathology examination, per venesection • Verkryging van bloed monster(s) deur mediese praktisyne vir patologie-onderzoek, per veneseksie	3.25	38.30	3.25	38.30			
<b>2. INTEGUMENTARY SYSTEM • HUIDSTELSEL</b>							
<b>2.1 Allergy • Allergie</b>							
<i>Patch Tests • Plaktoets:</i>							
0217 First patch • Eerste plaktoets	4	47.10	4	47.10			
0219 Each additional patch • Elke bykomende toets	2	23.50	2	23.50			
<i>Skin Prick Tests • Velpriktoets:</i>							
0218 Skin-prick testing: Insect venom, latex and drugs • Velpriktoets: Insekgif, latex en geneesmiddels	2.8	33.00	2.8	33.00			
0220 Immediate hypersensitivity testing (Type I reaction): per antigen: Inhalant and food allergens • Onmiddellike hipersensitiwiteitstoetsing (Type I reaksie): per antigeen, insaeming en voedsel allergeene.	1.9	22.40	1.9	22.40			
0221 Delayed hypersensitivity testing (Type IV reaction): per antigen • Vertraagde hipersensitiwiteitstoetsing (Type IV reaksie): per antigeen	2.8	33.00	2.8	33.00			

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>2.2 Skin (general) • Vel (algemeen)</b>							
0255 Drainage of subcutaneous abscess, onychia, paronychia, pulp space or avulsion of nail • Dreinerings van onderhuidse abses, onikie, paronikie of avulsie van nael	20	235.40	20	235.40	3	165.00	+T+M
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	1,024.00	87	1,024.00	3	165.00	+T
0259 Removal of foreign body superficial to deep fascia (except hands). • Verwydering van vreemde voorwerp oppervlakkig tot diep-fascia (buiten hande)	20	235.40	20	235.40	3	165.00	+T
0261 Removal of foreign body deep to deep fascia (except hands). • Verwydering van vreemde voorwerp diep-tot-diep-fascia (buiten hande)	31	364.90	31	364.90	3	165.00	+T
(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)							
<b>2.3 Major plastic repair • Groot plastiese herstel</b>							
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	2,754.20	187.2	2,203.30	4	220.00	+T
0290 Reconstructive procedures (including all stages) and skingraft by myo-cutaneous or fascio-cutaneous flap • Rekonstruktiewe prosedures (alle stadiums ingesluit) en veloorplanting met behulp van miokutane- of fassiokutane flap	410	4,825.70	328	3,860.60	4	220.00	+T
0291 Reconstructive procedures (including all stages) grafting by micro-vascular re-anastomosis • Rekonstruktiewe prosedures (insluitende alle stadiums) weefseloordraging met behulp van mikrovaskulêre heraanstomoses	800	9,416.00	640	7,532.80	4	220.00	+T
0292 Distant flaps: First stage • Velflappe uit afgeleë posisie: Eerste stadium	206	2,424.60	164.8	1,939.70	4	220.00	+T
0293 Contour grafts (excluding cost of material) • Kontoertransplantasie (uitgesonderd koste van materiaal)	206	2,424.60	164.8	1,939.70	4	220.00	+T
0294 Vascularised bone graft with or without soft tissue with one or more sets micro-vascular anastomoses • Gevaskulariseerde beenoordrag met of sonder sagtweefsel met een of meer stelle mikro-vaskulêre anastomoses	1200	14,124.00	960	11,299.20	6	330.00	+T
0295 Local skin flaps (large, complicated) • Plaaslike velflappe (groot, 206	206	2,424.60	164.8	1,939.70	4	220.00	+T
0296 Other procedures of major technical nature • Ander groot tegniese prosedures	206	2,424.60	164.8	1,939.70	4	220.00	+T
0297 Subsequent major procedures for repair of same lesion (M0006 not applicable) • Daaropvolgende groot prosedures vir herstel van dieselfde letsel (W 0006 nie van toepassing nie)	104	1,224.10	104	1,224.10	4	220.00	+T

	Specialist Specialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>2.4 Lacerations, scars, cysts and other skin lesions/Stitching of soft tissue injuries • Laserasies, littekens, siste en ander velletsels/Hegting van sagteweefsel beserings</b>							
<b>Stitching of soft tissue injuries / Hegting van sagteweefsel beserings</b>							
0300	14	164.80	14	164.80	3	165.00	+T
Stitching of wound (with or without local anaesthesia); Including normal after-care • Hegting van wond (met of sonder lokale verdowing): Normale nasorg ingesluit.							
0301	7	82.40	7	82.40	3	165.00	+T
Additional wounds stitched at same session (each) • Bykomende wonde geheg tydens dieselfde geleentheid (elk).							
0302	64	753.30	64	753.30	4	220.00	+T
Deep laceration involving limited muscle damage • Diep laserasie met beperkte spierskade.							
0303	128	1,506.60	120	1,412.40	4	220.00	+T
Deep laceration involving extensive muscle damage • Diep laserasie met uitgebreide spierskade.							
<i>NOTE: Length of procedure of theatre time must be reflected on the account</i>							
<i>OPMERKING: Duur van prosedure of teatertyd moet op die rekening aangedui word.</i>							
0304	50	588.50	50	588.50	3	165.00	+T
Major debridement of wound, sloughectomy or secondary suture • Uitgebreide debridement van wond, nekrotektomie of sekondêre hegting							
0305	25	294.30	25	294.30	3	165.00	+T
Needle biopsy—soft tissue • Naaldbiopsie—sagte weefsel							
0307	27	317.80	27	317.80	3	165.00	+T
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							
0308	14	164.80	14	164.80	3	165.00	+T
Each additional small procedure done at the same time • Elke bykomende klein prosedure wat gelyktydig gedoen word							
0310	38	447.30	38	447.30	3	165.00	+T
Radical excision of nailbed • Radikale verwydering van naelbed							
0314	104	1,224.10	104	1,224.10	4	220.00	+T
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							
0315	55	647.40	55	647.40	3	165.00	+T
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							
<b>2.6 Burns • Brandwonde</b>							
0345							
Minor burns • Klein brandwonde							
0347							
Moderate burns • Matige brandwonde							
0351	276	3,248.50	220.8	2,598.80	5	275.00	+T
Major burns: Resuscitation (including supervision and intravenous therapy — first 48 hours) • Ernstige brandwonde: Resussitasie (met inbegrip van toesig en binne-aarse terapie — eerste 48 uur)							
0353	100	1,177.00	100	1,177.00	5	275.00	+T
Tangential excision and grafting: Small • Tangensiale eksisie en oorplanting: Klein							
0354	200	2,354.00	160	1,883.20	5	275.00	+T
Tangential excision and grafting: Large • Tangensiale eksisie en oorplanting: Groot							
<b>2.7 Hands (skin) • Hande (vel)</b>							
0355	147.40	1,734.90	120	1,412.40	4	220.00	+T
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 by Cutler							
0357	45	529.70	45	529.70	3	165.00	+T
Small skin graft in acute hand injury • Klein veloorplanting by akute							

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
0359 Release of extensive skin contracture and/or excision of scar tissue with major skin graft resurfacing • Losmaak van groot velkontraaktuur en/of uitsnyding van littekenweefsel met bedekking deur veloorplanting	192	2,259.80	153.6	1,807.90	3		165.00 +T
0361 Z-plasty • Z-plastie	220.1	2,590.60	176.08	2,072.50	3		165.00 +T
0363 Local flap and skin graft • Lokale flap en veloorplanting	150	1,765.50	120	1,412.40	3		165.00 +T
0365 Cross finger flap (all stages) • Kruisvingerflap (alle stadia)	192	2,259.80	153.6	1,807.90	3		165.00 +T
0367 Palmarflap (all stages) • Palmareflap (alle stadia)	192	2,259.80	153.6	1,807.90	3		165.00 +T
0369 Distant flap: First stage • Afgeleë flap: Eerste stadium	158	1,859.70	126.4	1,487.70	3		165.00 +T
0371 Distant flap: Subsequent stage (not subject to General Modifier 0006) • Afgeleë flap: Opvolgende stadia (nie onderhewig aan Algemene Wysiger 0006)	77	906.30	77	906.30	3		165.00 +T
0373 Transfer neurovascular island flap • Verplasing van neuro-vaskulêre	230.5	2,713.00	184.4	2,170.40	3		165.00 +T
0374 Syndactily: 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	2,853.00	193.92	2,282.40	3		165.00 +T
<i>Dupuytren's contracture • Dupuytren se kontraaktuur</i>							
0375 Fasciotomy • Fassiëktomie	51	600.30	51	600.30	3		165.00 +T
0376 Fasciectomy • Fassiëktomie	218	2,565.90	174.4	2,052.70	3		165.00 +T
<b>3. MUSCULO-SKELETAL SYSTEM / SPIER-SKELETSTELSEL</b>							
<b>3.1 BONES • BENE</b>							
<b>3.1.1 Fractures • Frakture</b>							
0383 Scapula • Skapula		*		*	3		165.00 +T+M
0387 Clavicle • Klavikel	77	906.30	77	906.30	3		165.00 +T+M
0388 Percutaneous pinning supracondylar fracture elbow - stand alone procedure • Perkutane fiksering van suprakondulêre fraktuur - elmboog - alleenstaande prosedure	175.70	2,068.00	140.56	1,654.40	3		165.00 +T+M
0389 Humerus • Humerus	77	906.30	77	906.30	3		165.00 +T+M
0391 Radius and/or Ulna • Radius en/of Ulna	77	906.30	77	906.30	3		165.00 +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	2,471.70	168	1,977.40	3		165.00 +T+M
0402 Carpal bone • Karpale been	64	753.30	64	753.30	3		165.00 +T+M
0403 Bennett's fracture-dislocation • Bennett se fraktuur-ontwrigting	51	600.30	51	600.30	3		165.00 +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	1,392.40	118.3	1,392.40	3		165.00 +T+M
Fracture Reduction under general anaesthetic • Fraktuur reduksie onder algemene narkose :							
<i>Finger phalanx • Vinger falanks</i>							
<i>Distal • Distaal</i>							
0409 Simple • Eenvoudig		*		*	3		165.00 +T+M
0411 Compound (open) • Oop	52	612.00	52	612.00	3		165.00 +T+M
<i>Proximal or middle • Proksimaal of middel</i>							
0413 Simple • Eenvoudig	48	565.00	48	565.00	3		165.00 +T
0415 Compound • Oop	102	1,200.50	102	1,200.50	3		165.00 +T+M
<i>Pelvis • Pelvis</i>							
0417 Closed (modifier 0051 is applicable) • Geslote (wysiger 0051 is van toepassing)		*		*	3		165.00 +T
0419 Operative reduction and fixation • Operatiewe reduksie en fiksasie	320	3,766.40	256	3,013.10	3		165.00 +T+M
0421 Femur: Neck or Shaft • Femur: Nek of Skag	192	2,259.80	153.6	1,807.90	3		165.00 +T+M
0425 Patella • Patella	51	600.30	51	600.30	3		165.00 +T+M
0429 Tibia with or without Fibula • Tibia met of sonder Fibula	128	1,506.60	120	1,412.40	3		165.00 +T+M
0433 Fibula shaft • Fibulaskag		*		*	3		165.00 +T+M
0435 Malleolus of ankle • Malleolus van enkelgewrig	58	682.70	58	682.70	3		165.00 +T+M
0437 Fracture-dislocation of ankle • Fraktuurontwrigting van enkelgewrig	128	1,506.60	120	1,412.40	3		165.00 +T+M
0438 Open reduction Talus fracture (Modifier 0051 not applicable) • Oop reduksie Talus fraktuur (Wysiger 0051 nie van toepassing nie)	198.7	2,338.70	158.96	1,871.00	3		165.00 +T+M

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	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	753.30	64	753.30	4		220.00 +T+M
0440 Open reduction Calcaneus fracture (Modifier 0051 not applicable) • Oop reduksie Kalkanius fraktuur (Wysiger 0051 nie van toepassing nie)	403.50	4,749.20	322.5	3,795.80	3		165.00 +T+M
0441 Metatarsal • Metatarsaal	41.8	492.00	41.8	492.00	3		165.00 +T+M
<i>Toe phalanx • Toonfalanks</i>		*		*	3		165.00 +T
0443 Distal: Simple • Distaal: Eenvoudig	32	376.60	32	376.60	3		165.00 +T+M
0445 Compound • Oop							
<i>Other • Ander</i>							
0447 Simple - Eenvoudig	26	306.00	26	306.00	3		165.00 +T
0449 Compound • Oop	52	612.00	52	612.00	3		165.00 +T+M
<i>Sternum and (or) Ribs • Sternum en (of) Ribbe</i>		*		*	3		165.00 +T
0451 Closed • Geslote					3		165.00 +T+M
0452 Open reduction and fixation of multiple fractured ribs for flail chest • Oop reduksie en fiksasie van veelvuldige ribfrakture vir vleël borskas	230	2,707.10	184	2,165.70	3		165.00 +T+M
<i>Spine • Werwelkolom</i>							
<i>With or without paralysis • Met of sonder verlamming</i>		*		*	3		165.00 +T+M
0455 Cervical • Nek		*		*	3		165.00 +T+M
0456 Rest • Res					3		165.00 +T+M
0459 Open reduction and internal fixation for fracture and/or dis- location of spine • Oop reduksie en interne fiksasie vir frak- tuur en/of dislokasie van werwelkom	320	3,766.40	256	3,013.10	3		165.00 +T+M
<i>Compression fracture • Kompressiefraktuur</i>		*		*	3		165.00 +T+M
0461 Cervical • Nek		*		*	3		165.00 +T+M
0462 Rest • Res					3		165.00 +T+M
<i>Spinous/ transverse processes • Spineuse of transverse prosesse</i>		*		*	3		165.00 +T+M
0463 Cervical • Nek		*		*	3		165.00 +T+M
0464 Rest • Res					3		165.00 +T+M
<b>3.1.1.1 Operations for fractures • Operasies vir frakture</b>							
0465 Fractures involving large joints • Frakture wat groot gewrigte aantas	288	3,389.80	230.4	2,711.80	3		165.00 +T+M
0473 Percutaneous insertion plus subsequent removal of Kirschner wires or Steinmann pin (Not subject to rule G) (M0005 not applicable) • Perkutane inplasing en daaropvolgende verwydering van Kirschner drade of Steinmann penne(Nie onderhewig aan reël G nie) (W0005 nie van toepassing)	43	506.10	43	506.10	3		165.00 +T+M
<i>Bonegrafting or internal fixation for mal- or non-union • Beenoorplanting of interne fiksasie vir wan- of nie-hegting</i>							
0475 Femur, Tibia, Humerus, Radius and Ulna • Femur, Tibia, Humerus, Radius	282	3,319.10	225.6	2,655.30	3		165.00 +T+M
0479 Other bones (not applicable on fingers and toes) • Ander bene (nie van toepassing op vingers en tone nie)	154	1,812.60	123.2	1,450.10	3		165.00 +T+M
<b>3.1.2 Bony operations • Benige operasies</b>							
<b>3.1.2.1 Bone grafting • Beenoorplanting</b>							
0497 Resection of bone with or without grafting • Reseksie van been met of sonder oorplanting	282	3,319.10	225.6	2,655.30	3		165.00 +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	4,001.80	272	3,201.40	3		165.00 +T+M
0499 Grafts to cysts : Large bones • Oorplanting by siste : Groot bene	192	2,259.80	153.6	1,807.90	3		165.00 +T+M
0501 Grafts to cysts : Small bones • Oorplanting by siste : Klein beentjies	128	1,506.60	120	1,412.40	3		165.00 +T+M
0503 Grafts to cysts : Cartilage graft • Oorplanting by siste : Kraakbeenoorplanting	206	2,424.60	164.8	1,939.70	3		165.00 +T+M
0505 Grafts to cysts : Inter-metacarpal bone graft • Oorplanting by siste : Inter-metakarpale beenoor-planting	147	1,730.20	120	1,412.40	3		165.00 +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	588.50	50	588.50	3		165.00 +T+M



	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>3.1.2.2 Acute / chronic osteomyelitis ● Akute / kroniese osteomielitis</b>							
0509		*		*			-
0511		*		*			-
0512	128	1,506.60	120	1,412.40	3		165.00 +T+M
<b>3.1.2.3 Osteotomy ● Osteotomie</b>							
0514	330	3,884.10	264	3,107.30	3		165.00 +T+M
0515	330	3,884.10	264	3,107.30	3		165.00 +T+M
0516	320	3,766.40	256	3,013.10	3		165.00 +T+M
0521	320	3,766.40	256	3,013.10	3		165.00 +T+M
0527	320	3,766.40	256	3,013.10	3		165.00 +T+M
0528	115	1,353.60	115	1,353.60	3		165.00 +T+M
0530	120	1,412.40	120	1,412.40	3		165.00 +T+M
0531	278.90	3,282.70	223.12	2,626.10	3		165.00 +T+M
0532	160	1,883.20	128	1,506.60	3		165.00 +T+M
0533	60	706.20	60	706.20	3		165.00 +T+M
0534	150	1,765.50	120	1,412.40	3		165.00 +T+M
<b>3.1.2.4 Exostosis ● Eksostose</b>							
<i>Excision - Eksisie</i>							
0535	60	706.20	60	706.20	3		165.00 +T+M
0537	96	1,129.90	96	1,129.90	3		165.00 +T+M
<b>3.1.2.5 Biopsy ● Biopsie</b>							
0539	50	588.50	50	588.50	4		220.00 +T
0541	32	376.60	32	376.60	4		220.00 +T
0543	64	753.30	64	753.30			Per bone - Soos per been
0545	96	1,129.90	96	1,129.90			Per bone - Soos per been
<b>3.2 Joints ● Gewrigte</b>							
<b>3.2.1 Dislocations ● Ontwrigtings</b>							
0547	38	447.30	38	447.30	3		165.00 +T+M
0549	51	600.30	51	600.30	3		165.00 +T+M
0551	51	600.30	51	600.30	3		165.00 +T+M
0552	77	906.30	77	906.30	3		165.00 +T+M
0553	130	1,530.10	120	1,412.40	3		165.00 +T+M
0555	77	906.30	77	906.30	3		165.00 +T+M

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
0556 Carpo-metacarpo dislocation • Karpometakarpale ontwrigting	51	600.30	51	600.30	3	165.00	+T+M
0557 Metacarpo-phalangeal or interphalangeal joints (hand) • Metakarpofalangeaal of interfalangeale gewigte (hand)	26	306.00	26	306.00	3	165.00	+T+M
0559 Hip • Heup	109	1,282.90	109	1,282.90	3	165.00	+T+M
0561 Knee • Knie	96	1,129.90	96	1,129.90	3	165.00	+T+M
0563 Patella • Patella	32	376.60	32	376.60	3	165.00	+T+M
0565 Ankle • Enkel	90	1,059.30	90	1,059.30	3	165.00	+T+M
0567 Sub-Talar dislocation • Sub-Talare ontwrigting	90	1,059.30	90	1,059.30	3	165.00	+T+M
0569 Intertarsal or Tarsometatarsal or Mid-tarsal • Intertarsaal of Tarsometatarsaal of Midtarsaal	77	906.30	77	906.30	3	165.00	+T+M
0571 Meta-tarsophalangeal or interphalangeal joints (foot) • Metatarsofalangeaal of interfalangeale gewigte (voet)	14	164.80	14	164.80	3	165.00	+T+M
0573 Spine with or without paralysis • Werwelkolom met of sonder verlamming		*		*			--
<b>3.2.2 Operations for dislocations • Operasies vir ontwrigting</b>							
0578 Recurrent dislocation of shoulder • Herhaalde skouer-ontwrigting	200	2,354.00	160	1,883.20	3	165.00	+T+M
0579 Recurrent dislocation of large joints • Herhalende ontwrigting van groot gewigte	161	1,895.00	128.8	1,516.00	3	165.00	+T+M
<b>3.2.3 Capsular operations • Kapsulêre operasies</b>							
Capsulotomy or arthrotomy or biopsy or drainage of joint • Kapsulotomie of artrotomie of biopsie of dreinasie van gewrig							
0582 Small joint (including three weeks after-care) • Klein gewrig (drie weke nasorg ingesluit)	51	600.30	51	600.30	3	165.00	+T+M
0583 Large joint (including three weeks after-care) • Groot gewrig (drie weke nasorg ingesluit)	96	1,129.90	96	1,129.90	3	165.00	+T+M
0585 Capsulectomy digital joint • Kapsulektomie digitale gewrig	64	753.30	64	753.30	3	165.00	+T+M
0586 Multiple percutaneous capsulotomies of metacarpo-phalangeal joints • Veelvuldige perkutane kapsulotomieë van metakarpofalangeale gewigte	90	1,059.30	90	1,059.30	3	165.00	+T+M
0587 Release of digital joint contracture • Losmaak van falan- gealegewrigskontratuur	128	1,506.60	120	1,412.40	3	165.00	+T+M
<b>3.2.4 Synovectomy • Sinovektomie</b>							
0589 Digital joint • Digitale gewrig	77	906.30	77	906.30	3	165.00	+T+M
0592 Large joint • Grootgewrig	160	1,883.20	128	1,506.60	3	165.00	+T+M
0593 Tendon synovectomy • Tendon sinovektomie	203.7	2,397.50	162.96	1,918.00	3	165.00	+T+M
<b>3.2.5 Arthrodesis • Artrodese</b>							
0597 Shoulder • Skouer	224	2,636.50	179.2	2,109.20	3	165.00	+T+M
0598 Elbow • Elmboog	180	2,118.60	144	1,694.90	3	165.00	+T+M
0599 Wrist • Polsgewrig	180	2,118.60	144	1,694.90	3	165.00	+T+M
0600 Digital joint • Digitale gewrig	128	1,506.60	120	1,412.40	3	165.00	+T+M
0601 Hip • Heup	320	3,766.40	256	3,013.10	3	165.00	+T+M
0602 Knee • Knie	180	2,118.60	144	1,694.90	3	165.00	+T+M
0603 Ankle • Enkel	180	2,118.60	144	1,694.90	3	165.00	+T+M
0604 Sub-talar • Sub-talaar	130	1,530.10	120	1,412.40	3	165.00	+T+M
0605 Stabilization of foot (triple-arthrodeses) • Stabilisering van voet (drievoudige artrodese)	180	2,118.60	144	1,694.90	3	165.00	+T+M
0607 Mid-tarsal wedge resection • Midtarsale wigreseksie	180	2,118.60	144	1,694.90	3	165.00	+T+M

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>3.2.6 Arthroplasty • Artroplastie</b>							
0614 Debridement large joints • Debridement groot gewrigte	160	1,883.20	128	1,506.60	3		165.00 +T+M
0615 Excision medial or lateral end of clavicle • Eksisie mediale of laterale punt van klavikel	116	1,365.30	116	1,365.30	3		165.00 +T+M
0617 Shoulder: Acromioplasty • Skouer: Akromioplastie	192	2,259.80	153.6	1,807.90	3		165.00 +T+M
0619 Shoulder: Partial replacement • Skouer: Gedeeltelike vervanging	277	3,260.30	221.6	2,608.20	5		275.00 +T+M
0620 Shoulder: Total replacement • Skouer: Totale vervanging	416	4,896.30	332.8	3,917.10	5		275.00 +T+M
0621 Elbow: Excision head of radius • Elmboog: Eksisie kop van radius	96	1,129.90	96	1,129.90	3		165.00 +T+M
0622 Elbow: Excision • Elmboog: Eksisie	192	2,259.80	153.6	1,807.90	3		165.00 +T+M
0623 Elbow: Partial replacement • Elmboog: Gedeeltelike vervanging	188	2,212.80	150.4	1,770.20	3		165.00 +T+M
0624 Elbow: Total replacement • Elmboog: Totale vervanging	282	3,319.10	225.6	2,655.30	3		165.00 +T+M
0625 Wrist: Excision distal end of ulna • Polsgewrig: Eksisie distale end van ulna	96	1,129.90	96	1,129.90	3		165.00 +T+M
0626 Wrist: Excision single bone • Polsgewrig: Eksisie een beentjie	110	1,294.70	110	1,294.70	3		165.00 +T+M
0627 Wrist: Excision proximal row • Polsgewrig: Eksisie proksimale ry	166	1,953.80	132.8	1,563.10	3		165.00 +T+M
0631 Wrist: Total replacement • Polsgewrig: Totale vervanging	249	2,930.70	199.2	2,344.60	3		165.00 +T+M
0635 Digital joint: Total replacement • Digitale gewrig: Totale vervanging	192	2,259.80	153.6	1,807.90	3		165.00 +T+M
0637 Hip: Total replacement • Heup: Totale vervanging	416	4,896.30	332.8	3,917.10	3		165.00 +T+M
0641 Hip: Prosthetic replacement of femoral head • Heup: Vervanging van kop van femur met protese	288	3,389.80	230.4	2,711.80	3		165.00 +T+M
0643 Hip: Girdlestone • Heup: Girdlestone	320	3,766.40	256	3,013.10	3		165.00 +T+M
0645 Knee: Partial replacement • Knie: Gedeeltelike vervanging	277	3,260.30	221.6	2,608.20	3		165.00 +T+M
0646 Knee: Total replacement • Knie: totale vervanging	416	4,896.30	332.8	3,917.10	3		165.00 +T+M
0649 Ankle: Total replacement • Enkel: Totale vervanging	290.4	3,418.00	232.32	2,734.40	3		165.00 +T+M
0650 Ankle: Astragalectomy • Enkel: Astragalektomie	154	1,812.60	123.2	1,450.10	3		165.00 +T+M
<b>3.2.7 Miscellaneous (Joints) • Diverse (gewrigte)</b>							
0661 Aspiration of joint or intra-articular injection (not subject to rule G) (M 0005 not applicable) • Aspirasie van gewrig of intra-artikulêre inspuiting (nie onderhewig aan reël G nie) (W 0005 nie van toepassing)	9	105.90	9	105.90	3		165.00 +T+M
0667 Arthroscopy (excluding after-care), modifiers 0005 and 0013 not applicable • Artroskopies (nasorg uitgesluit), wysigers 0005 en 0013 nie van toepassing nie	60	706.20	60	706.20	3		165.00 +T+M
0669 Manipulation large joint under general anaesthetic (not subject to rule G) (M 0005 not applicable) • Manipulasie van groot gewrig onder algemene narkose (nie onderhewig aan reël G nie) (W 0005 nie van toepassing)	14	164.80	14	164.80	4		220.00 Hip+T
					3		165.00 Knee+T
					3		165.00 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		*		*	3		165.00 Knee / Shoulder + T
					4		220.00 Hip+T
0673 Meniscectomy or operation for other internal derangement of knee • Menisektomie of operasie vir ander interne verstoring van knie	109	1,282.90	109	1,282.90	3		165.00 +T+M
<b>3.2.8 Joint ligament reconstruction or suture • Rekonstruksie of hegting van ligamente</b>							
0675 Ankle: Collateral • Enkel: Kollateraal	160	1,883.20	128	1,506.60	3		165.00 +T+M
0677 Knee: Collateral • Knie: Kollateraal	160	1,883.20	128	1,506.60	3		165.00 +T+M
0678 Knee: Cruciate • Knie: Kruisligament	160	1,883.20	128	1,506.60	3		165.00 +T+M
0679 Ligament augmentation procedure of knee • Versterkte knie ligament herstel	280	3,295.60	224	2,636.50	3		165.00 +T+M
0680 Digital joint ligament • Digitale gewrig ligament	165	1,942.10	132	1,553.60	3		165.00 +T+M
<b>3.3 Amputations • Amputasies</b>							
<b>3.3.1 Specific amputations • Spesifieke amputasies</b>							
0682 Fore-quarter amputation • Voorkwartamputasie	294	3,460.40	235.2	2,768.30	9		495.00 +T+M
0683 Through shoulder • Deur skouer	148	1,742.00	120	1,412.40	5		275.00 +T+M
0685 Upper arm or fore-arm • Bo-arm of voorarm	116	1,365.30	116	1,365.30	3		165.00 +T+M
0687 Partial amputation of the hand: One ray • Amputasie van gedeelte van hand: Een straal	102	1,200.50	102	1,200.50	3		165.00 +T+M

	Specialist Specialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
0691 Whole or part of finger (skin flap included) • Gedeelte van, of totale vinger (sluit vel flap in)	116.8	1,374.70	116.80	1,374.70	3	165.00	+T+M
0693 Hindquarter amputation I Agterkwart amputasie	420	4,943.40	336	3,954.70	6	330.00	+T+M
0695 Through hip joint region • Deur heupgewrigstreek	192	2,259.80	153.6	1,807.90	6	330.00	+T+M
0697 Through thigh • Deur dybeen	205	2,412.90	164	1,930.30	6	330.00	+T+M
0699 Below knee, through knee/Syme • Onder knie, deur knie of Syme	194	2,283.40	155.2	1,826.70	5	275.00	+T+M
0701 Trans-metatarsal or trans-tarsal • Transmetatarsaal of transtarsaal	142	1,671.30	120	1,412.40	3	165.00	+T+M
0703 Foot: One ray • Voet: Een straal	97	1,141.70	97	1,141.70	3	165.00	+T+M
0705 Toe (skin flap included) • Toon (vel flap ingesluit)	66	776.80	66	776.80	3	165.00	+T+M
<b>3.3.2 Post-amputation reconstruction • Rekonstruksie na amputasie</b>							
0706 Skin flap taken from a site remote from the injured finger or in cases of an advanced flap e.g. Cutler • Waar vel flap geneem word van 'n liggaamsdeel verwyder van die beseerde vinger of in gevalle van verplasing flap bv. Cutler <i>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</i>	75	882.80	75	882.80	3	165.00	+T+M
0707 Krukenberg reconstruction • Krukenbergrekonstruksie	206	2,424.60	164.8	1,939.70	3	165.00	+T+M
0709 Metacarpal transfer • Melakarpale verplanting	192	2,259.80	153.6	1,807.90	3	165.00	+T+M
0711 Pollicization of the finger (Prior permission must be obtained from the Commissioner at all times) • Pollisasie van vinger (Vooraf goedkeuring moet ten alle tye vanaf die Kommissaris verkry word)	282	3,319.10	225.6	2,655.30	3	165.00	+T+M
0712 Toe to thumb transfer (Prior permission must be obtained from the Commissioner at all times) • Toon na duim verplanting (Vooraf goedkeuring moet ten alle tye vanaf die Kommissaris verkry word)	800	9,416.00	640	7,532.80	3	165.00	+T+M
<b>3.4 Muscles, tendons and fasciae • Spiere, tendons en fasciae</b>							
<b>3.4.1 Investigations • Ondersoeke</b>							
0713 Electromyography • Elektromiografie	75	882.80	75	882.80	3	165.00	+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	670.90	57	670.90	3	165.00	+T
0715 Strength duration curve per session • Kragduur-kromme per sessie	10.5	123.60	10.5	123.60	3	165.00	+T
0717 Electrical examination of single nerve or muscle • Elektriese ondersoek van enkele senuwee of spier	9	105.90	9	105.90	3	165.00	+T
0721 Voltage integration during isometric contraction • Stroomspanningsintegrasie tydens isometriese kontrakasie	12	141.20	12	141.20	3	165.00	+T
0723 Tonometry with edrophonium • Tonometrie met edrophonium	8	94.20	8	94.20	3	165.00	+T
0725 Isometric tension studies with edrophonium • Isometriese spanningstudies met edrophonium <i>Cranial reflex study (both early and late responses) supra occulo-facial or corneo-facial or Flabello-facial • Kraniale reekstudie (vroë en laat reaksie) supra-occulofacias of corneo-facialis of Flabello-facialis</i>	10	117.70	10	117.70	3	165.00	+T
0727 Unilateral • Unilateraal	8	94.20	8	94.20	3	165.00	+T
0728 Bilateral • Bilateraal	14	164.80	14	164.80	3	165.00	+T
0729 Tendon reflex time • Tendon refleks-tyd	7	82.40	7	82.40	3	165.00	+T
0730 Limb-brain somatosensory studies (per limb) • Ledemaat-brein somatosensoriese studies (per ledemaat)	49	576.70	49	576.70	3	165.00	+T
0731 Vision and audiosensory studies • Visuele en audiosensoriese toetse	49	576.70	49	576.70			
0733 Motor nerve conduction studies (single nerve) • Bestudering van geleiding deur motoriese senuwee (enkel senuwee)	26	306.00	26	306.00			
0735 Examinations of sensory nerve conduction by sweep averages (single nerve) • Ondersoek van sensoriese senuwee-geleiding met golwingsgemiddeldes (enkele senuwee)	31	364.90	31	364.90	3	165.00	+T
0737 Biopsy for motor nerve terminals and end plates • Biopsie vir motorsenuwee eindpunte en eindplate	20	235.40	20	235.40	3	165.00	+T
0739 Combined muscle biopsy with end plates and nerve terminal biopsy • Gekombineerde spierbiopsie met eindplate en senuwee-eindpunt biopsie	34	400.20	34	400.20	8	440.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
0740 Muscle fatigue studies • Spieruitputtingsondersoek	20	235.40	20	235.40	3	165.00	+T
0741 Muscle biopsy • Spierbiopsie	20	235.40	20	235.40	8	440.00	+T
0742 Global fee for all muscle studies, including histochemical studies • Globale tarief vir alle spierstudies, histochemiese studies ingeslote <i>Biochemical estimations on muscle biopsy specimens • Biochemiese toetee op spierbiopsie-monsters</i>	262	3,083.70	--	--	--	--	--
4701 Creatine kinase • Kreatine kinase	20.25	238.30	--	--	--	--	--
4703 Adenylate kinase • Adenylate kinase	33.3	391.90	--	--	--	--	--
4705 Pyruvate kinase • Pyruvate kinase	5.7	67.10	--	--	--	--	--
4707 Lactate dehydrogenase • Laktate dehydrogenase	1.6	18.80	--	--	--	--	--
4709 Adenylate deaminase • Adenylate deaminase	9.9	116.50	--	--	--	--	--
4711 Phosphoglycerate kinase • Fosfoglykerate kinase	13.7	161.20	--	--	--	--	--
4713 Phosphoglycerate mutase • Fosfoglykerate mutase	25.9	304.80	--	--	--	--	--
4715 Enolase • Enolase	32.7	384.90	--	--	--	--	--
4717 Phosphofruktokinase • Fosofruktokinase	37.7	443.70	--	--	--	--	--
4719 Aldolase • Aldolase	15.75	185.40	--	--	--	--	--
4721 Glycerinaldehyde 3 Phosphate Dehydrogenase • Glykeraldehide 3 Fosfate Dehydrogenase	11.06	130.20	--	--	--	--	--
4723 Phosphorylase • Fosforilase	34.7	408.40	--	--	--	--	--
4725 Phosphoglucomutase • Fosfoglukomutase	40.3	474.30	--	--	--	--	--
4727 Phosphohexose Isomerase • Fosfohexose isomerase	28.8	339.00	--	--	--	--	--
<b>3.4.2 Decompression Operations • Dekompressie Operasies</b>							
0743 Major Compartmental Decompression • Ekstensiewe Kompartementeel Dekompressie	132	1,553.60	120	1,412.40	3	165.00	+T
0744 Fasciotomy only • Fasciotomie alleenlik	60	706.20	60	706.20	3	165.00	+T
<b>3.4.3 Muscle and tendon repair • Spier- en pees-herstel</b>							
0745 Biceps humeri • Bisepe humeri <i>Supra-spinatus • Supra-spinatus</i>	109	1,282.90	109	1,282.90	3	165.00	+T
0746 Removal of calcification in Rotator cuff • Verwydering van verkalking in Rotatorkraag	96	1,129.90	96	1,129.90	3	165.00	+T+M
0747 Rotator cuff • Rotatorkraag	134	1,577.20	120	1,412.40	4	220.00	+T
0748 Debridement rotator cuff • Debridement rotatorkraag	139.7	1,644.30	120	1,412.40	4	220.00	+T
0749 Scapulopexy - stand alone procedure • Skapulopeksie - alleenstaande prosedure	271.90	3,200.30	217.52	2,560.20	4	220.00	+T
0755 Infrapatellar or quadriceps tendon • Infrapatellere of kwadrisepe pees	128	1,506.60	120	1,412.40	3	165.00	+T
0757 Achilles tendon repair • Achilles pees herstel	197.6	2,325.80	158.08	1,860.60	4	220.00	+T
0759 Other single tendon • Ander enkele pees	77	906.30	77	906.30	3	165.00	+T
0763 Tendon or ligament injection • Pees- of ligamentinspuiting <i>Hand • Hand</i> <i>Flexor tendon suture • Fleksor peeshegting</i>	9	105.90	9	105.90	3	165.00	+T
0767 Primary (per tendon) • Primêr (per pees)	128	1,506.60	120	1,412.40	3	165.00	+T
0769 Secondary (per tendon) • Sekondêr (per pees) <i>Extensor tendon suture • Ekstensor pees hegting</i>	160	1,883.20	128	1,506.60	3	165.00	+T
0771 Primary (per tendon) • Primêr (per pees)	129.7	1,526.60	120	1,412.40	3	165.00	+T
0773 Secondary (per tendon) • Sekondêr (per pees)	80	941.60	80	941.60	3	165.00	+T
0774 Repair of Boutonnière deformity or Mallet Finger with graft • Herstel van Boutonnière-deformiteit of Mallet-vinger met peesverplanting	183.7	2,162.10	146.96	1,729.70	3	165.00	+T
<b>3.4.4 Tendon graft • Pees oorplanting</b>							
0775 Free tendon graft • Vrye peesoorplanting	160	1,883.20	128	1,506.60	3	165.00	+T
0776 Reconstruction of pulley for flexor tendon • Rekonstruksie van katrol van 'n fleksorpees <i>Finger • Vinger</i>	50	588.50	50	588.50	3	165.00	+T
0777 Flexor • Fleksor	192	2,259.80	153.6	1,807.90	3	165.00	+T
0779 Extensor • Ekstensor	122	1,435.90	120	1,412.40	3	165.00	+T
0780 Two stage flexor tendon graft using silastic rod • Fleksor pees oorplanting silastiese stafies in twee stadia	240	2,824.80	192	2,259.80	3	165.00	+T

	Specialist Specials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>3.4.5 Tenolysis • Tenolise</b>							
0781 Tendon freeing operation, except where specified elsewhere • Tenolise indien nie elders gespesifiseer nie	64	753.30	64	753.30	3		165.00 +T
0782 Carpal tunnel syndrome • Karpale tonnel-sindroom	98.7	1,161.70	98.7	1,161.70	3		165.00 +T
0783 De Quervain • De Quervain	38	447.30	38	447.30	3		165.00 +T
0784 Trigger finger • Snellervinger	38	447.30	38	447.30	3		165.00 +T
0785 Flexor tendon freeing operation following free tendon graft or suture • Fleksorpees bevryding na vrye pees oorplanting of hegting	186.8	2,198.60	149.44	1,758.90	3		165.00 +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	2,129.20	144.72	1,703.40	3		165.00 +T
0788 Intrinsic tendon release per finger • Intrinsieke tenolise per vinger	64	753.30	64	753.30	3		165.00 +T
0789 Central tendon tenotomy for Boutonnière deformity • Sentrale tendon tenotomie vir Boutonnière deformiteit	64	753.30	64	753.30	3		165.00 +T
<b>3.4.6 Tenodesis • Tenodese</b>							
0790 Digital joint • Digitale gewrig	90	1,059.30	90	1,059.30	3		165.00 +T
<b>3.4.7 Muscle, tendon and fascia transfer • Spier-, pees- en fascia-verplanting</b>							
0791 Single tendon transfer • Enkele peesverplanting	96	1,129.90	96	1,129.90	3		165.00 +T
0792 Multiple tendon transfer • Veelvuldige peesverplanting	128	1,506.60	120	1,412.40	3		165.00 +T
0793 Hamstring to quadriceps transfer • Hampese na kwadriseps-verplanting	141	1,659.60	120	1,412.40	3		165.00 +T
0794 Pectoralis major or Latissimus dorsi transfer to biceps tendon • Pectoralis major of Latissimus dorsi verplanting na besipstendon	320	3,766.40	256	3,013.10	5		275.00 +T
0795 Tendon transfer at elbow • Peesverplanting by elmboog <i>Hand tendons • Handpees</i>	116	1,365.30	116	1,365.30	3		165.00 +T
0803 Single tendon transfer • Een peesverplanting	96	1,129.90	96	1,129.90	3		165.00 +T
0809 Substitution for intrinsic paralysis of hand • Vervanging vir intrinsieke spierverlamming van hand	224	2,636.50	179.2	2,109.20	3		165.00 +T
0811 Opponens tendon transfer (including obtaining of graft) • Opponens tendonverplanting (sluit verkryging van verplanting in)	220.6	2,596.50	176.48	2,077.20	3		165.00 +T
<b>3.4.8 Muscle slide operations and tendon lengthening • Spierstropingsoperasies en peesverlenging</b>							
0812 Percutaneous Tenotomy: All sites • Perkutane Tenotomie: Alle areas	38	447.30	38	447.30	3		165.00 +T
0813 Torticollis • Tortikollis	96	1,129.90	96	1,129.90	5		275.00 +T
0815 Scalenotomy • Skalenotomie	132	1,553.60	120	1,412.40	5		275.00 +T
0817 Scalenotomy with excision of first rib • Skalenotomie met eksisie van eerste rib	190	2,236.30	152	1,789.00	3		165.00 +T+M
0822 Open release elbow (Mitals) - stand alone procedure • Elmboog loslating - oop prosedure (Mitals) - alleenstaande prosedure	278.20	3,274.40	222.56	2,619.50	3		165.00 +T+M
0823 Excision or slide for Volkmann's Contracture • Eksisie of prosedure vir Volkmann se Kontraktuur	192	2,259.80	153.6	1,807.90	3		165.00 +T
0825 Hip: Open muscle release • Heup: Ope spierloslating	116	1,365.30	116	1,365.30	7		385.00 +T
0829 Knee: Quadriceps plasty • Knie: Kwadrisepsplastiek	160	1,883.20	128	1,506.60	3		165.00 +T
0831 Knee: Open tenotomy • Knie: Oop tenotomie	141	1,659.60	120	1,412.40	3		165.00 +T
0835 Calf • Kuit	96	1,129.90	96	1,129.90	4		220.00 +T
0837 Open Elongation Tendon Achilles • Ope Verlenging Achillespees	96	1,129.90	96	1,129.90	4		220.00 +T
0838 Percutaneous "Hoke" elongation tendoachilles - stand alone procedure • Perkutane verlenging tendo achilles ("Hoke")-alleenstaande prosedure	79.30	933.40	79.30	933.40	4		220.00 +T
0845 Foot: Plantar fasciotomy • Voet: Plantare fasciotomie	70	823.90	70	823.90	3		165.00 +T

	Specialist Specialists		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>3.5 Bursae and ganglia • Bursas en ganglions</b>							
<i>Excision • Uitsnyding</i>							
0847	90	1,059.30	90	1,059.30	4	220.00	+T
	45	529.70	45	529.70	3	165.00	+T
0849	81.8	962.80	81.8	962.80	3	165.00	+T
0851	80.9	952.20	80.9	952.20	3	165.00	+T
0853	128	1,506.60	120	1,412.40	3	165.00	+T
0855							
0857	9	105.90	9	105.90	3	165.00	+T
<b>3.6 Miscellaneous • Diverse</b>							
0861	416	4,896.30	332.8	3,917.10	3	165.00	+T+M
<b>3.6.2 Removal of internal fixatives or prosthesis • Verwydering van prostese of inwendige hegmiddels</b>							
0883	32	376.60	32	376.60			As per bone specify + M
0884	64	753.30	64	753.30			Soos per been +M
0885	128	1,506.60	120	1,412.40			330.00 +T+M
0886	64	753.30	64	753.30	6		
<b>3.7 Plasters (not subject to rule G) • Gips (nie onderhewig aan reël G)</b>							
<i>Note: The initial application of a plaster cast is included in the scheduled fee</i>							
<i>• Opmerking: Die eerste aanwending van gips is by die oorspronklike gelde ingesluit</i>							
<i>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):</i>							
<i>Where extremity splints are applied for at least five weeks:</i>							
<i>A maximum of one application for an upper extremity injury</i>							
<i>A maximum of two applications for a lower extremity injury</i>							
<i>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):</i>							
<i>Waar ledemaatgipse vir ten minste 5 weke aanbly:</i>							
<i>Maksimum van een aanwending vir boonste ledemaatbesering</i>							
<i>'n Maksimum van twee aanwendings vir 'n onderste ledemaatbesering</i>							
<b>Extremity • Ledemate</b>							
0887	13	153.00	13	153.00	3	165.00	+T
0888	6.6	77.70	6.6	77.70	3	165.00	+T
0889	32	376.60	32	376.60	4	220.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>3.8 Specific areas • Spesifieke areas</b>							
<b>3.8.1 Foot and ankle • Voet en Enkel</b>							
0900	Excision tarsal coalition - stand alone procedure • Verwydering van tarsale koalisie - alleenstaande prosedure	141.5	1,665.50	120.00	1,412.40	3	165.00 +T+M
0901	Tenotomy single tendon • Tenotomie een pees	63.3	745.00	63.3	745.00	3	165.00 +T+M
0903	Hammer toe; one toe • Hamertoon; een toon	99.5	1,171.10	99.5	1,171.10	3	165.00 +T+M
0905	Fillet of toe or Ruiz-Mora procedure • Toonontbening of Ruiz-Mora prosedure	99.5	1,171.10	99.5	1,171.10	3	165.00 +T+M
0906	Arthrodesis Hallux • Artrodese Hallux	148	1,742.00	120	1,412.40	3	165.00 +T+M
0909	Excision arthroplasty • Eksisie artroplastie	145.2	1,709.00	120	1,412.40	3	165.00 +T+M
0910	Cheilectomy or metatarsophangeal implant Hallux • Cheilektomie of metatarsofalangiale vervang Hallux	183	2,153.90	146.4	1,723.10	3	165.00 +T+M
0911	Metatarsal osteotomy or Lapidus or similar or Chevron - stand alone procedure • Metatarsale osteotomie of Lapidus of derglike prosedure of Chevron - alleenstaande prosedure	189.2	2,226.90	151.36	1,781.50	3	165.00 +T+M
5730	Hallux valgus double osteotomy etc • Hallux valgus dubbele osteotomie ens.	182.60	2,149.20	146.08	1,719.40	3	165.00 +T+M
5731	Distal soft tissue procedure for Hallux Valgus • Distale sagteweefsel prosedure vir Hallux Valgus	173.6	2,043.30	138.88	1,634.60	3	165.00 +T+M
5732	Aitkin procedure or similar • Aitkin operasie of derglike ingreep	166.8	1,963.20	133.44	1,570.60	3	165.00 +T+M
5734	Removal bony prominence foot (bunionette not applicable on COID) • Verwyder benige prominensie aan voet (bunionette nie van toepassing op COID)	91	1,071.10	91	1,071.10	3	165.00 +T+M
5735	Repair angular deformity toe (lesser toes) • Herstel wanbelyning toon (kleiner tone)	97.2	1,144.00	97.2	1,144.00	3	165.00 +T+M
5736	Sesamoidectomy • Eksisie sesamoid been	97.8	1,151.10	97.8	1,151.10	3	165.00 +T+M
5737	Repair major foot tendons e.g. Tib Post • Heg groot pese in voet b.v. Tib post	147.30	1,733.70	120	1,412.40	3	165.00 +T
5738	Repair of dislocating peroneal tendons • Herstel ontwrigting peronius pese	173.2	2,038.60	138.56	1,630.90	3	165.00 +T
5740	Steindler strip - plantar fascia • Steindler stropping - plantare fascia	97.2	1,144.00	97.2	1,144.00	3	165.00 +T
5742	Tendon transfer foot • Pees verplanting voet	172	2,024.40	137.6	1,619.60	3	165.00 +T
5743	Capsulotomy metatarsophalangeal joints - foot/Kapsulotomie metatarsofalangeale gewigte - voet	86.8	1,021.60	86.8	1,021.60	3	165.00 +T
<b>3.8.3 Replantation • Herinplantings</b>							
0912	Replantation of amputated upper limb proximal to wrist joint • Replantasie van geamputeerde boonste ledemaat proximaal tot polsgewrig	730	8,592.10	584	6,873.70	3	165.00 +T+M
0913	Replantation of thumb • Replantasie van dum	670	7,885.90	536	6,308.70	3	165.00 +T+M
0914	Replantation of a single digit (to be motivated), for multiple digits, modifier 0005 applicable • Replantasie van 'n enkel vinger (moet gemotiveer word), vir veelvuldige vingers is wysiger 0005 toepaslik	580	6,826.60	464	5,461.30	3	165.00 +T+M
0915	Replantation operation through the palm • Replantasie-operasie deur die handpalm	1270	14,947.90	1016	11,958.30	3	165.00 +T+M
<b>3.8.4 Hands: (Note: Skin: See Integumentary system) • Hande: (Let wel: Vel: Sien Huidstelsel)</b>							
0919	Epidermoid cysts • Epidermoïde siste Removal of foreign bodies requiring incision • Verwydering van vreemde liggaampies wat insnyding vereis	35	412.00	35	412.00	3	165.00 +T+M
0922	Under local anaesthetic • Onder lokale verdowing	19	223.60	19	223.60	3	165.00 +T+M
0923	Under general or regional anaesthetic • Onder algemene of streeksnarkose Crushed hand injuries • Vergruilde handbeserings	32	376.60	32	376.60	3	165.00 +T+M
0924	Initial extensive soft tissue toilet under general anaesthetic (sliding scale) • Eerste ekstensiewe sagteweefsel toilet onder algemene narkose (glyskaal)	37 to/tot	435.50 to/oi	37 to/tot	435.50 to/tot	3	165.00 +T+M
0925	Subsequent dressing changes under general anaesthetic • Daaropvolgende verbandhennings onder algemene narkose	16	188.30	16	188.30	3	165.00 +T+M



	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	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	3,166.10	215.2	2,532.90	3		165.00 +T+M
<b>3.8.5 Spine • Werwelkolom</b>							
0927 Excision of one vertebral body, for a lesion within the body (no decompression) • Eksisie van een werwellicgaam vir 'n letsel in die werwel (geen dekompressie nie)	207	2,436.40	165.6	1,949.10	3		165.00 +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	494.30	42	494.30	3		165.00 +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	164.80	14	164.80	5		275.00 +T+M
0930 Posterior osteotomy of spine: One vertebral segment • Posterior spinale osteotomie: Een vertebrale segment	339	3,990.00	271.2	3,192.00	3		165.00 +T+M
0931 Posterior spinal fusion: One level • Posterior spinale fusie: Een vlak	385	4,531.50	308	3,625.20	3		165.00 +T+M
0932 Posterior osteotomy of spine: Each additional vertebral segment • Posterior spinale osteotomie: Elke bykomende segment	103	1,212.30	103	1,212.30	3		165.00 +T+M
0933 Anterior spinal osteotomy with disc removal: One vertebral segment • Anterior spinale osteotomie met diskus verwydering: Een bewegings segment	315	3,707.60	252	2,966.00	3		165.00 +T+M
0936 Anterior spinal osteotomy with disc removal: Each additional vertebral segment • Anterior spinale osteotomie met diskus verwydering: Elke bykomende bewegings segment	+103	1,212.30	+103	1,212.30	3		165.00 +T+M
0938 Anterior fusion base of skull to C2 • Anterior fusie skedelbasis tot C2	449	5,284.70	359.2	4,227.80	4		220.00 +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	1,883.20	128	1,506.60	3		165.00 +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	1,883.20	128	1,506.60	3		165.00 +T+M
0941 Anterior interbody fusion: One level • Anterior tussenwerwel fusie: Een vlak	360	4,237.20	288	3,389.80	3		165.00 +T+M
0942 Anterior interbody fusion: Each additional level • Anterior tussenwerwelfusie: Elke bykomende vlak	+ 102	1,200.50	+102	1,200.50	3		165.00 +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	2,824.80	192	2,259.80	3		165.00 +T+M
0944 Posterior fusion: Occiput to C2 • Posterior fusie: Occiput tot C2	390	4,590.30	312	3,672.20	4		220.00 +T+M
0946 Posterior spinal fusion: Each additional level • Posterior spinale fusie: Elke bykomende vlak	+111	1,306.50	+111	1,306.50	3		165.00 +T+M
0948 Posterior interbody lumbar fusion: One level • Posterior tussen werwel lumbale fusie: Een vlak	364	4,284.30	291.2	3,427.40	3		165.00 +T+M
0950 Posterior interbody lumbar fusion: Each additional interspace • Posterior tussen werwel lumbale fusie: Elke bykomende interspasie	+ 95	1,118.20	+ 95	1,118.20	3		165.00 +T+M
0959 Excision of coccyx • Uitsnyding van koksiks	96	1,129.90	96	1,129.90	3		165.00 +T+M
0960 Posterior non-segmental instrumentation • Posterior non-segment	167	1,965.60	133.6	1,572.50	5		275.00 +T+M
0961 Costo-transversectomy • Kosto-transversektomie	198	2,330.50	158.4	1,864.40	3		165.00 +T+M
0962 Posterior segmental instrumentation: 2 to 6 vertebrae • Posterior segmentale instrumentasie: 2 tot 6 werwels	176	2,071.50	140.8	1,657.20	5		275.00 +T+M
0963 Antero-lateral decompression of spinal cord or anterior debridement • Antero-laterale dekompressie van rugmurg of anterior debridement	326	3,837.00	260.8	3,069.60	3		165.00 +T+M
0964 Posterior segmental instrumentation: 7 to 12 vertebrae • Posterior segmentale instrumentasie: 7 tot 12 werwels	201	2,365.80	160.8	1,892.60	5		275.00 +T+M
0966 Posterior segmental instrumentation: 13 or more vertebrae • Posterior segmentale instrumentasie: 13 of meer werwels	245	2,883.70	196	2,306.90	5		275.00 +T+M
0968 Anterior instrumentation: 2 to 3 vertebrae • Anterior instrumentasie: 2 tot 3 werwels	159	1,871.40	127.2	1,497.10	5		275.00 +T+M
0969 Skull or skull-femoral traction including two weeks after-care • Skedel of skedelfemorale traksie plus twee weke nasorg	64	753.30	64	753.30	-		
0970 Anterior instrumentation: 4 to 7 vertebrae • Anterior instrumentasie: 4 tot 7 werwels	185	2,177.50	148	1,742.00	5		275.00 +T+M

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
0972 Anterior instrumentation: 8 or more vertebrae • Anterior instrumentasie: 8 of meer werwels	206	2,424.60	164.8	1,939.70	5	275.00	+T+M
0974 Additional pelvic fixation of instrumentation other than sacrum • Bykomende pelvisse fiksasie, sakrum uitgesluit	108	1,271.20	108	1,271.20	5	275.00	+T+M
5750 Reinsertion of instrumentation • Herposisionering van instrumentasie	276	3,248.50	220.8	2,598.80	6	330.00	+T+M
5751 Removal of posterior non-segmental instrumentation • Verwydering van posterior non-segmentale instrumentasie	173	2,036.20	138.4	1,629.00	6	330.00	+T+M
5752 Removal of posterior segmental instrumentation • Verwydering van posterior segmentale instrumentasie	175	2,059.80	140	1,647.80	6	330.00	+T+M
5753 Removal of anterior instrumentation • Verwydering van anterior instrumentasie	204	2,401.10	163.2	1,920.90	6	330.00	+T+M
5755 Laminectomy for spinal stenosis (exclude diskectomy, foraminotomy and spondylolisthesis): One or two levels • Laminektomie vir spinale stenose (uitgesluit diskektomie, foraminotomie en spondylolistese): Een of twee vlakke	295	3,472.20	236	2,777.70	3	165.00	+T+M
5756 Laminectomy with full decompression for spondylolisthesis (Gill procedure) • Laminektomie met volle dekompresie vir spondylolistese (Gill prosedure)	304	3,578.10	243.2	2,862.50	3	165.00	+T+M
5757 Laminectomy for decompression without foraminotomy or diskectomy more than two levels • Laminektomie vir dekompresie sonder foraminotomie of diskektomie meer as twee vlakke	321	3,778.20	256.8	3,022.50	3	165.00	+T+M
5758 Laminectomy with decompression of nerve roots and disc removal: Each additional level • Laminektomie met dekompresie van senuewortels en diskus verwydering: Elke bykomende vlak	63	741.50	63	741.50	3	165.00	+T+M
5759 Laminectomy for decompression diskectomy etc., revision operation • Laminektomie vir dekompresie diskektomie ens., herhalings operasie	352	4,143.00	281.6	3,314.40	4	220.00	+T+M
5760 Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: One level • Laminektomie, fasektomie dekompresie van laterale reses stenose plus spinale stenose: Een vlak	301	3,542.80	240.8	2,834.20	3	165.00	+T+M
5761 Laminectomy, facetectomy, decompression for lateral recess stenosis plus spinal stenosis: Each additional level • Laminektomie, fasektomie, dekompresie van laterale reses stenose plus spinale stenose: Elke bykomende vlak	68	800.40	68	800.40	3	165.00	+T+M
5763 Anterior disc removal and spinal decompression cervical: One level • Anterior diskus verwydering en spinale dekompresie servikaal: Een vlak	344	4,048.90	275.2	3,239.10	3	165.00	+T+M
5764 Anterior disc removal and spinal decompression cervical: Each additional level • Anterior diskus verwydering en spinale dekompresie servikaal: Elke bykomende vlak	81	953.40	81	953.40	3	165.00	+T+M
5765 Vertebral corpectomy for spinal decompression: One level • Vertebrale korpektomie vir spinale dekompresie: Een vlak	466	5,484.80	372.8	4,387.90	3	165.00	+T+M
5766 Vertebral corpectomy for spinal decompression: Each additional level • Vertebrale korpektomie vir spinale dekompresie: Elke bykomende vlak	88	1,035.80	88	1,035.80	3	165.00	+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	835.70	71	835.70			
<b>3.9 Facial bone procedures • Gesigsbeenprosedures</b>							
<i>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</i>							
0987 Repair of orbital floor (blowout fracture) • Herstel van orbi-tale vloer (uitbars fraktuur)	184.6	2,172.70	147.68	1,738.20	4	220.00	+T+M
0988 Genioplasty • Genioplastie	263	3,095.50	210.4	2,476.40	4	220.00	+T+M
0989 Open reduction and fixation of central mid-third facial fracture with displacement • Oop reduksie en fiksering van fraktuur van sentrale middel-derde van aangesig	202.2	2,379.90	161.76	1,903.90	4	220.00	+T+M
0990 Le Fort I • Le Fort I	302	3,554.50	241.6	2,843.60	4	220.00	+T+M
0991 Le Fort II • Le Fort II	433	5,096.40	346.4	4,077.10	4	220.00	+T+M
0992 Le Fort III • Le Fort III	970	11,416.90	776	9,133.50	4	220.00	+T+M
0993 Le Fort I Osteotomy • Le Fort I Osteotomie	302	3,554.50	241.6	2,843.60	4	220.00	+T+M
0994 Palatal Osteotomy • Verhemelte Osteotomie	1103	12,982.30	882.4	10,385.80	4	220.00	+T+M

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
0995 Le Fort III Osteotomy (team fee) • Le Fort III Osteotomie (gelde vir span)	1654	19,467.60	1323.2	15,574.10	4	220.00	+T+M
0996 Fracture of maxilla without displacement • Fraktuur van maksilla sonder verplasing <i>Mandible: Fractured nose and zygoma • Mandibula: Frak-ture van neus en sigoma</i>		*		*			--
0997 Open reduction and fixation • Oop reduksie en fiksering	302	3,554.50	241.6	2,843.60	3	165.00	+T+M
0999 Closed reduction by inter-maxillary fixation • Geslote reduksie d.m.v. intermaksillere fiksering	184	2,165.70	147.2	1,732.50	3	165.00	+T+M
1001 Temporo-mandibular joint: Reconstruction for dysfunction • Temporo-mandibulere gewrig: Rekonstruksie weens abnormale funksie:	206	2,424.60	164.8	1,939.70	4	220.00	+T+M
1003 Manipulation: Immobilisation and follow-up of fractured nose • Manipulasie: Immobilisering en nabehandeling van gebreekte neus	35	412.00	35	412.00	3	165.00	+T+M
1005 Nasal fracture without manipulation • Neusfraktuur sonder manipulasie		*		*			--
1007 Mandibulectomy • Mandibulektomie	320	3,766.40	256	3,013.10	5	275.00	+T+M
1009 Maxillectomy • Maksillektomie	382.5	4,502.00	306	3,601.60	4	220.00	+T+M
1011 Bone graft to mandible • Beentransplantasie aan onderkaak	206	2,424.60	164.8	1,939.70	4	220.00	+T+M
1012 Adjustment of occlusion by ramisection • Regstel van afsluiting d.m.v. ramiseksie.	227	2,671.80	181.6	2,137.40	4	220.00	+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	1,541.90	120	1,412.40	3	165.00	+T+M
1017 Old fracture of arch of zygoma (after four weeks) with displacement requiring operative manipulation (not including associated fractures) • Ou fraktuur van sigoma (na vier weke) met verplasing wat operatiewe manipulasie benodig (gepaardgaande fraktuur uitgesluit)	262	3,083.70	209.6	2,467.00	3	165.00	+T+M
<b>4. RESPIRATORY SYSTEM • ASEMHALINGSTELSEL</b>							
<b>4.1 Nose and sinuses • Neus en sinusse</b>							
1018 Flexible nasopharyngolaryngoscope examination • Nasofaringeale en larinks ondersoek met buigbare teleskoop	51.94	611.30	--	--			--
1019 ENT endoscopy in rooms with rigid endoscope • ONK endoskopie in kamers met onbuigbare endoskoop	12	141.20	--	--			--
1020 Repair of perforated septum : Any method • Herstel van septum perforasie : enige metode	125	1,471.30	120	1,412.40	4	220.00	+T
1022 Functional reconstruction of nasal septum • Funksionele rekonstruksie van neusseptum	121.2	1,426.50	120	1,412.40	4	220.00	+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	353.10	30	353.10	4	220.00	+T
1025 Intranasal antrostomy (modifier 0005 to apply to opposite side of nose) • Intranasale antrostomie (wysiger 0005 van toepassing op teenoorgestelde kant van neus)	64.6	760.30	64.6	760.30	4	220.00	+T
1027 Dacryocystorhinostomy • Dakrosistorinostomie	210	2,471.70	168	1,977.40	5	275.00	+T
1029 Turbinectomy (modifier 0005 to apply to opposite side of nose) • Turbinektomie (wysiger 0005 van toepassing op teenoorgestelde kant van neus)	62.6	736.80	62.6	736.80	4	220.00	+T
1030 Endoscopic turbinectomy: laser or microdebrider • Endoskopiese turbinektomie: laser of mikrodebrider	90	1,059.30	90	1,059.30	5	275.00	+T
1034 Autogenous nasal bone transplant: Bone removal included • Outogene beentransplantasie van die neus: Verwydering van been ingeslote	100	1,177.00	100	1,177.00	4	220.00	+T
1035 Unilateral functional endoscopic sinus surgery (unilateral) • Funksionele endoskopiese sinus chirurgie (unilateraal)	140	1,647.80	120	1,412.40	4	220.00	+T
1036 Bilateral functional endoscopic sinus surgery • Bilaterale funksionele endoskopiese sinus chirurgie.	245	2,883.70	196	2,306.90	4	220.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<i>Diathermy to nose or pharynx exclusive of consultation fee, uni- or bilateral / Diatermie van neus of farinks, konsultasie-geelde uitgesluit, uni- of bilateraal</i>							
1037 Under local anaesthetic • Met plaaslike verdowing	8	94.20	8	94.20			
1039 Under general anaesthetic • Met algemene verdowing	35	412.00	35	412.00	4	220.00	+T
<i>Severe epistaxis, requiring hospitalisation / Erge epistakse wat hospitalisasie vereis</i>							
1041 Control severe epistaxis requiring hospitalisation: Anterior plugging (unilateral) • Erge epistakse kontrole wat hospitalisasie vereis: Anterior tamponade (unilateraal)	40	470.80	40	470.80	6	330.00	+T
1043 Control severe epistaxis requiring hospitalisation: Anterior and posterior plugging (unilateral) • Erge epistakse kontrole wat hospitalisasie vereis: Anterior en posterior tamponade (unilateraal)	60	706.20	60	706.20	6	330.00	+T
1045 Ligation anterior ethmoidal artery • Afbind van arteria etmoidales anterior	59	694.40	59	694.40	6	330.00	+T
1047 Cladwell-Luc operation (unilateral) • Cladwell-Luc operasie (unilateraal)	137.3	1,616.00	120	1,412.40	4	220.00	+T
1049 Ligation internal maxillary artery • Afbind van arteria maxillaris interna:	130	1,530.10	120	1,412.40	6	330.00	+T
1050 Vidian neurectomy (transantral or transnasal) • Neurektomie van nervus vidii (transantraal of transnasaal)	113	1,330.00	113	1,330.00	4	220.00	+T
1054 Antroscopy through the canine fossa (modifier 0005 to apply to opposite side of nose) • Antroskopies deur die caninus fossa (wysiger 0005 van toepassing op teenoorgestelde kant van neus)	37.3	439.00					
1055 External frontal ethmoidectomy • Eksterne fronto-etmoïdektomie	190.7	2,244.50	152.56	1,795.60	4	220.00	+T
1057 External ethmoidectomy and/or sphenoidectomy (unilateral) • Eksterne etmoïdektomie en/of sfoenoïdektomie (unilateraal)	164	1,930.30	131.2	1,544.20	4	220.00	+T
1059 Frontal osteomyelitis • Frontale osteomiëllitis	194	2,283.40	155.2	1,826.70	4	220.00	+T
1061 Lateral rhinotomy • Laterale rhinotomie	164	1,930.30	131.2	1,544.20	4	220.00	+T
1063 Removal of foreign bodies from nose at rooms • Verwydering van vreemde voorwerpe uit neus by spreekkamer	10	117.70	10	117.70			
1065 Removal of foreign body from nose under general anaesthetic • Verwydering van vreemde voorwerp uit die neus onder algemene narkose	35	412.00	35	412.00	4	220.00	+T
1067 Proof puncture, unilateral at rooms • Sinusspoeling, unilateraal by	10	117.70	10	117.70	4	220.00	+T
1069 Proof puncture, uni- or bilateral under general anaesthetic • Sinusspoeling, uni- of bilateraal onder algemene narkose	35	412.00	35	412.00	4	220.00	+T
1075 Multiple intranasal procedures: Not to exceed (see Modifier 0068) • Veevuldige intranasale prosedures: Maksimum bedrag (sien Wysiger 0068)	194	2,283.40	155.2	1,826.70	4	220.00	+T
1077 Septum abscess, at room, including after-care • Septumabses, by spreekkamer, nabehandeling ingesluit	8	94.20	8	94.20			
1079 Septum abscess, under general anaesthetic • Septumabses, onder algemene verdowing	35	412.00	35	412.00	4	220.00	+T
1081 Oro-antral fistula (without Caldwell-Luc) • Oro-antrale fistel (sonder Caldwell-Luc)	86	1,012.20	86	1,012.20	4	220.00	+T
1083 Choanal atresia: Intranasal approach • Atresie van agterste neusopening: Intranasale metode	113	1,330.00	113	1,330.00	5	275.00	+T
1084 Choanal atresia: Transpalatal approach • Atresie van agterste neusopening: Transpalatien metode	194	2,283.40	155.2	1,826.70	7	385.00	+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 piramide (osteotomie) en neuspunt	350	4,119.50	280	3,295.60	5	275.00	+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	2,471.70	168	1,977.40	5	275.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>Forehead rhinoplasty (all stages) • Voorhoof-rinoplastie (alle stadlums)</b>							
1089 Total • Volledig	552	6,497.00	441.6	5,197.60	5		275.00 +T
1091 Partial • Gedeeltelik	414	4,872.80	331.2	3,898.20	5		275.00 +T
<b>4.3 Larynx • Larinks</b>							
1117 Laryngeal intubation • Laringeale intubasie	10	117.70	10	117.70			
1118 Laryngeal stroboscopy with video capture • Laringeale stroboskopie met video vaslegging.	39	459.00	39	459.00	6		330.00 +T
<b>Laryngectomy • Laringektomie</b>							
1119 Without block dissection of the neck • Sonder blokdisseksie van die nek	430	5,061.10	344	4,048.90	7		385.00 +T
1127 Tracheostomy • Trageostomie	90	1,059.30	90	1,059.30	9		495.00 +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	3,465.10	235.52	2,772.10	8		440.00 +T
<b>Direct laryngoscopy • Direkte laringoskopie</b>							
1130 Diagnostic laryngoscopy including biopsy • Diagnostiese laringoskopie insluitende biopsie	41.4	487.30	41.4	487.30	6		330.00 +T
1131 Plus foreign body removal • Plus vreemde voorwerp verwydering	64.6	760.30	64.6	760.30	6		330.00 +T
<b>4.4 Bronchial procedure • Bronchiale prosedures</b>							
<b>Bronchoscopy • Brongoskopie</b>							
1132 Diagnostic bronchoscopy without removal of foreign object • Diagnostiese brongoskopie sonder verwydering van vreemde voorwerp	65	765.10	65	765.10	6		330.00 +T
1133 With removal of foreign body • Met verwydering van vreemde voorwerp	80	941.60	80	941.60	8		440.00 +T
1134 Bronchoscopy with laser • Brongoskopie met laser	75	882.80	--	--	8		440.00 +T
1136 Nebulisation (in rooms) • Nebuliserings (in kamers)	12	141.20	12	141.20	12		660.00 +T
1137 Bronchial lavage • Brongiale spoeling	--	--	--	--	8		440.00 +T
1138 Thoracotomy: for bronchopleural fistula (including ruptured bronchus, any cause) • Torakotomie: vir brongio-pleurale fistel (ruptuur van die brongus, alle oorsake, ingeslote)	350	4,119.50	280	3,295.60	12		660.00 +T
<b>4.5 Pleura • Pleura</b>							
1139 Pleural needle biopsy (not including aftercare); modifier 0005 not applicable • Naaldbiopsie van pleura (nasorg uitgesluit); wysiger 0005 nie van toepassing	50	588.50	50	588.50	3		165.00 +T
1141 Insertion of intercostal catheter (under water drainage) • Inplasing van tussenribse kateter (met onderwater-dreinasie)	50	588.50	50	588.50	6		330.00 +T
1143 Paracentesis chest: Diagnostic • Parasentese borskas: Diagnosties	8	94.20	8	94.20	3		165.00 +T
1145 Paracentesis chest: Therapeutic • Parasentese borskas: Terapeuties	13	153.00	13	153.00	3		165.00 +T
1147 Pneumothorax: Induction (diagnostic) • Pneumotoraks: Induksie (diagnosties)	25	294.30	25	294.30			--
1149 Pleurectomy • Pleurektomie	250	2,942.50	200	2,354.00	11		605.00 +T
1151 Decortication of lung • Dekortikasie van long	350	4,119.50	280	3,295.60	11		605.00 +T
1153 Chemical pleurodesis (instillation silver nitrate, tetracycline, talc, etc) • Chemiese pleurodesis (instillering silwernitrat, tetrasiklien, talk, ens)	55	647.40	55	647.40	3		165.00 +T
<b>4.6 Pulmonary procedures • Longprosedures</b>							
<b>4.6.1 Surgical • Chirurgies</b>							
1155 Needle biopsy lung (not including after-care); modifier 0005 not applicable • Naaldbiopsie long (nasorg uitgesluit); wysiger 0005 nie van toepassing nie	32	376.60	32	376.60	5		275.00 +T
1157 Pneumonectomy • Pneumonektomie	350	4,119.50	280	3,295.60	11		605.00 +T
1159 Pulmonary lobectomy • Pulmonêre lobektomie	389.5	4,584.40	311.6	3,667.50	11		605.00 +T
1161 Segmental lobectomy • Segmentale lobektomie	365	4,296.10	292	3,436.80	11		605.00 +T
<b>Excision tracheal stenosis • Eksisie van stenose van trachea</b>							
1163 Cervical • Servikaal	375	4,413.80	300	3,531.00	8		440.00 +T
1164 Intra-thoracic • Intratorakaaal	350	4,119.50	280	3,295.60	12		660.00 +T
1171 Drainage empyema (including six weeks after-treatment) • Dreinerings van empieem (insluitende ses weke nabehandeling)	170	2,000.90	136	1,600.70	11		605.00 +T
1173 Drainage of lung abscess (including six weeks after-treatment) • Dreinerings van longabses (insluitende ses weke nabehandeling)	170	2,000.90	136	1,600.70	11		605.00 +T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>Thoracotomy • Torakotomie</b>							
1175 Limited: For lung or pleural biopsy • Beperk: Vir biopsie van long of pleura	115	1,353.60	115	1,353.60	11	605.00	+T
1177 Major: Diagnostic • Groot: Diagnosties	215	2,530.60	172	2,024.40	11	605.00	+T
1179 Thoracoscopy • Torakoskopie	89	1,047.50	89	1,047.50	11	605.00	+T
<b>4.6.2 Pulmonary function tests • Longfunksietoetse</b>							
1186 Flow volume test: Inspiration/expiration • Vloeivolumetoets: Inspirasie/ekspirasie	30	353.10	30	353.10			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	588.50	50	588.50			Fees as for specialist: Gelde soos vir spesialis
1189 Forced expirogram only • Forseerde ekspiogram alleenlik	10	117.70	10	117.70			Fees as for specialist: Gelde soos vir spesialis
1191 N2 single breath distribution • N2 enkel asem verspreiding	10	117.70	10	117.70			Fees as for specialist: Gelde soos vir spesialis
1197 Compliance and resistance, using oesophageal balloon • Rekbaarheid en weerstand d.m.v. esofageale ballon	24	282.50	24	282.50			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 spirometrics • Verlengde na-blootstelling bepaling van brongospasme met spirometrie voor en na antigen, koue lug, meta choline of ander chemiese agent, of na oefening met opvolg spirometrie	55.89	657.80	55.89	657.80			--
1199 Pulmonary stress testing : For determination of VO2 max • Pulmonale inspanningstoets : vir bepaling van maksimum VO2	96.5	1,135.80	96.5	1,135.80			--
1201 Maximum inspiratory/expiratory pressure • Maksimum inspiratoriese/ekspiratoriese druk	5	58.90	5	58.90			Fees as for specialist: Gelde soos vir spesialis
	<b>Pulmonologists and Practitioners accredited to SATS/ Pulmonoloë en praktisyne geakrediteer deur SATS</b>		<b>Other Specialists and General practitioner / Ander Spesialiste en Algemene Praktisyne</b>		<b>Anaesthetic Narkose</b>		
	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	444.40		--			
1195 Thoracic gas volume • Intra torakale gas volume	37.93	446.40		--			
1196 Determination of resistance to airflow, oscillatory or plethysmographic methods • Bepaling van lugweg weerstand ossillasie of met pletismograaf	45.31	533.30		--			
1200 Carbon monoxide diffusing capacity, any method • Kool monoksied diffusie, enige metode	38.06	448.00		--			

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>4.7 Intensive care (in intensive care or high care unit): Respiratory, cardiac, general • Intensiewe sorg (in intensiewe of hoësoorgeenheid) : Respiratories, kardiaal, algemeen.</b>							
<b>4.7.1 Tariff items for intensive care • Tarief items vir intensiewe sorg</b>							
<b>Category 1: Cases requiring intensive monitoring (to include cases where physiological instability is anticipated, e.g. diabetic pre-coma, asthma, gastrointestinal 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</b>							
<b>Kategorie 1: Gevalle wat intensiewe monitering 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 gehef 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.</b>							
1204 Category 1: Per day • Kategorie 1: Per dag	30	353.10	30	353.10			Fees as for specialist- Gelde soos vir spesialis
<b>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.</b>							
<b>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, veel borskas, ens.) Ventilasië mag deel uitmaak van die aktiewe sisteem bystand nie</b>							
1205 Category 2: First day • Kategorie 2: Eerste dag	100	1,177.00	100	1,177.00			Fees as for specialist- Gelde soos vir spesialis
1206 Category 2: Subsequent days, per day • Kategorie 2: Daaropvolgende dae, per dag	50	588.50	50	588.50			Fees as for specialist- Gelde soos vir spesialis
1207 Category 2: After two weeks, per day • Kategorie 2: Na twee weke, per dag	30	353.10	30	353.10			Fees as for specialist- Gelde soos vir spesialis
<b>Category 3: Cases with multiple organ failure or Category 2 patients that may require multidisciplinary intervention</b>							
<b>Kategorie 3 :Gevalle met veelvuldige orgaan ineenstorting of Kategorie 2 pasiente wat multidisiplinere intervensie mag vereis</b>							
1208 Category 3: First day (principal practitioner) • Kategorie 3 :Eerste dag (hoof praktisyn)	137	1,612.50	120	1,412.40			Fees as for specialist- Gelde soos vir spesialis
1209 Category 3: First day (per involved practitioner) • Kategorie 3 :Eerste dag (per betrokke praktisyn)	58	682.70	58	682.70			Fees as for specialist- Gelde soos vir spesialis
1210 Category 3: Subsequent days (per involved practitioner) • Kategorie 3 :Opvolgende dae (per betrokke praktisyn)	50	588.50	50	588.50			Fees as for specialist- Gelde soos vir spesialis

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
1211 Cardio-respiratory resuscitation: Prolonged attendance in cases of emergency (not necessarily in ICU) 50,00 clinical procedure units (R478.50) per half hour or part thereof for the first hour per practitioner, thereafter 25,00 clinical procedure units (R239.30) per half hour up to a maximum of 150,00 clinical procedure units (R1435.50) per practitioner. Resuscitation fee includes all necessary additional procedures e.g. infusion, intubation, etc.   Kardio-respiratoriese resussitasie: Verlengde bystand in noodgevalle (nie noodwendig in intensiewe sorg eenheid nie ) 50,00 kliniese prosedure eenhede (R478.50) per halfuur of gedeelte daarvan vir die eerste uur per praktisyn, daarna 25,00 kliniese prosedure eenhede (R239.30) per halfuur met 'n maksimum van 150,00 kliniese prosedure eenhede (R1435.50) per praktisyn Resussitasiegelde sluit alle nodige bykomende prosedures in byvoorbeeld infuus, intubasie, ens.							
<b>VENTILATION • VENTILASIE</b>							
1212 First day • Eerste dag	75	882.80	75	882.80			Fees as for specialist- Gelde soos vir spesialis
1213 Subsequent days • Opgvolgende dae	50	588.50	50	588.50			Fees as for specialist- Gelde soos vir spesialis
1214 After two weeks, per day • Na twee weke, per dag	25	294.30	25	294.30			Fees as for specialist- Gelde soos vir spesialis
1215 Insertion of arterial pressure cannula • Inplasing van arteriële druk kannule	25	294.30	25	294.30			Fees as for specialist- Gelde soos vir spesialis
1216 Insertion of Swan Ganz catheter for haemodynamics monitoring • Inplasing van Swan Ganz kateter vir hemodinamiese monitoring	50	588.50	50	588.50			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	117.70	10	117.70			Fees as for specialist- Gelde soos vir spesialis
1218 Insertion of central venous line via subclavian or jugular veins • Inplasing van sentrale veneuse lyn via subklaviese of jugulêre venas	25	294.30	25	294.30			Fees as for specialist- Gelde soos vir spesialis
1219 Hyperalimentation (daily fee) • Hiperalimentasie (dagtarief)	15	176.60	15	176.60			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: Verhuringgelde: Per 24 uur (Gelde vir kasset word gehef volgens item 0201 per pasiënt)	30	353.10	30	353.10			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 gehef)	30	353.10	30	353.10			Fees as for specialist- Gelde soos vir spesialis
<b>4.8 Hyperbaric Oxygen Treatment • Hiperbariese Suurstofbehandeling</b>							
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 • Monitoring van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitoring tydens behandeling en opvolg ondersoek na behandeling in) : Lae druk tabel (1,5-1,8 ATA x 45-60 min): PROFESSIONELE KOMPONENT	30	353.10	30	353.10			
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): TEGNIESE KOMPONENT	101.13	1,190.30	101.13	1,190.30			



	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
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 • Monitoring van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitoring tydens behandeling en opvolg ondersoek na behandeling in): Routine HST tabel (2-2.5 ATA x 90-120 min) PROFESSIONELE KOMPONENT	60	706.20	60	706.20			
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): TEGNIESE KOMPONENT	131.26	1,544.90	131.26	1,544.90			
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 • Monitoring van 'n pasiënt by die hiperbariese kamer tydens hiperbariese terapie (sluit pre-hiperbariese evaluering, monitoring tydens behandeling en opvolg ondersoek na behandeling in) : Nood HST tabel (2.5-3 ATA x 90-120 min) PROFESSIONELE KOMPONENT	80	941.60	80	941.60			
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): TEGNIESE KOMPONENT	131.26	1,544.90	131.26	1,544.90			
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 • 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 TT5 (2.8 ATA x 135 min) PROFESSIONELE KOMPONENT	90	1,059.30	90	1,059.30			
4825 USN TT5 (2,8 ATA x 135 min): TECHNICAL COMPONENT • USN TT5 (2,8 ATA x 135 min): TEGNIESE KOMPONENT	214.18	2,520.90	214.18	2,520.90			
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	2,236.30	190	2,236.30			
4826 USN TT6 (2,8 ATA x 285 min): TECHNICAL COMPONENT • USN TT6 (2,8 ATA x 285 min): TEGNIESE KOMPONENT	386.42	4,548.20	386.42	4,548.20			
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	3,848.80	327	3,848.80			
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	8,013.60	680.85	8,013.60			
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	7,983.40	678.28	7,983.40			
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	7,907.70	671.85	7,907.70			

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
1215 Prolonged attendance <i>inside</i> 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 (as moontlik tyd aan in minute en nie per halfuur)							
<b>2. MEDIASTINAL PROCEDURES • MEDIASTINALE PROSEDURES</b>							
1223 Mediastinoscopy • Mediastinoskopie	95	1,118.20	95	1,118.20	5	275.00	+T
<b>3. CARDIOVASCULAR SYSTEM • KARDIO-VASKULêRE SISTEEM</b>							
MODIFIER GOVERNING FEES FOR AN ANAESTHESIOLOGIST OPERATING INTRA-AORTIC BALLOON PUMP (CARDIOVASCULAR SYSTEM) • WYSIGER VAN TOEPASSING OP GELDE VIR 'N ANESTESIOLOG VIR BEHEER VAN INTRA-AORTIESE BALLONPOMP (KARDIO-VASKULêRE SISTEEM)							
1230 Where an anaesthesiologist would be responsible for operating an intra-aortic balloon pump, a fee of 75,00 clinical procedure units (R615.80) is applicable. • Waar 'n anestesiooloog verantwoordelik is vir beheer van 'n intra-aortiese ballonpomp is 'n tarief van 75,00 kliniese prosedure eenhede (R615.80) van toepassing							
<b>3.1 General • Algemeen</b>							
<i>General practitioner's fee for the taking of an ECG only • Algemene praktisyn se gelde vir slegs die neem van 'n EKG</i>							
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 spesifiek van die EKG							
1228 Without effort: (1232) • Rustend: (1232)			4.5	53.00			-
1229 Without and with effort: 1/2 (item 1233) • Sonder en met inspanning: 1/2 (item 1233)			6.5	76.50			-
<i>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</i>							
<i>Physician's fee for interpreting an ECG • Internis se gelde vir vertolking van 'n EKG</i>							
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 Without effort • Rustend	6	70.60					-
1231 With and without effort • met en sonder inspanning	10	117.70					-
<i>Electrocardiogram • Elektrokardiogram</i>							
1232 Without effort • Rustend	9	105.90	9	105.90			-
1233 With and without effort • met en sonder inspanning	13	153.00	13	153.00			-
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 apparatuur	40	470.80	40	470.80			-
1235 Multi-stage treadmill • Meerfasige trapmeultoets	60	706.20	60	706.20			-
1241 X-ray screening (Chest) • X-straaldeurligting (Borskas)	4	47.10	4	47.10			-
1245 Angiography cerebral: First two series • Angiografie serebraal: Eerste twee reekse	34.3	403.70	34.3	403.70	4	220.00	+T
1246 Angiography peripheral: Per limb • Angiografie perifereer: Per ledemaat	25	294.30	25	294.30	4	220.00	+T
1248 Paracentesis of pericardium • Parasentese van perikardium	50	588.50	50	588.50	9	495.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>6.3 Cardiac surgery • Hartchirurgie</b>							
1311 Pericardial drainage • Dreinerings van perikardium	140	1,647.80	120	1,412.40	13	715.00	+T
<b>6.3.1 Open heart surgery • Opehart-chirurgie</b>							
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	235.40					
<b>6.4 Peripheral vascular system • Perifere vasculêre sisteem</b>							
<b>6.4.2 Arterio-venous-abnormalities • Arterio-veneuse-afwykings</b>							
1369 Fistula or aneurysm (as for grafting of various arteries) • Fistel of aneurisme (soos vir transplantasie van arteries)							
<b>6.4.3 Arteries • Arteries</b>							
<b>6.4.3.1 Aorta-iliac and major branches • Aorta-iliac en groot takke</b> <i>Abdominal aorta and iliac artery I: Abdominal aorta en arteria iliaca</i>							
1373 Ruptured • Geruptuur	600	7,062.00	480	5,649.60	15	825.00	+T
<b>6.4.3.2 Iliac artery • Arteria iliaca</b>							
1379 Prosthetic grafting and/or Thrombo-endarterectomy • Inplanting van prostese en/of Trombo-endarterektomie	300	3,531.00	240	2,824.80	13	715.00	+T
<b>6.4.3.3 Peripheral • Perifeer</b>							
1385 Prosthetic grafting • Inplanting van prostese <i>Vein grafting • Transplantasie vena</i>	255	3,001.40	204	2,401.10	5	275.00	+T
1387 Proximal to knee joint • Net bokant kniegewrig	300	3,531.00	240	2,824.80	5	275.00	+T
1388 Distal to knee joint • Tot onderkant kniegewrig	444	5,225.90	355.2	4,180.70	5	275.00	+T
1389 Endarterectomy when not part of another specified procedure • Endarterektomie wanneer nie 'n deel van 'n ander gespesifiseerde prosedure nie <i>Embolectomy • Embolektomie</i>	264	3,107.30	211.2	2,485.80	5	275.00	+T
1393 Peripheral embolectomy transfemoral • Perifere transfemorale embolektomie <i>Miscellaneous arterial procedures I: Diverse arteriële prosedures</i>	168	1,977.40	134.4	1,581.90	5	275.00	+T
1395 Arterial suture: Trauma • Hegting van arterie: Trauma	125	1,471.30	100	1,177.00	5	275.00	+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	3,107.30	211.2	2,485.80	15	825.00	+T
1397 Profundoplasty • Profundoplastie	210	2,471.70	168	1,977.40	5	275.00	+T
1399 Distal tibial (ankle region) • Tibiaal distaal (naby enkel)	456	5,367.10	364.8	4,293.70	5	275.00	+T
1401 Femoro-femoral • Femoro-femoraal	254	2,989.60	203.2	2,391.70	5	275.00	+T
1402 Carotid-subclavian • Carotis-subklavies	288	3,389.80	230.4	2,711.80	8	440.00	+T
1403 Axillo-femoral (Bifemoral + 50% of the fee) • Aksillo-femoraal (Bifemoraal + 50% van die fooi)	288	3,389.80	230.4	2,711.80	8	440.00	+T

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>6.4.4 Veins • Venas</b>							
1407	50	588.50	50	588.50	3		165.00 +T
1408	91	1,071.10	91	1,071.10	4		220.00 +T
<i>Ligation of inferior vena cava I- Afbinding van vena cava inferior</i>							
1410	180	2,118.60	144	1,694.90	8		440.00 +T
<i>"Umbrella" operation on inferior vena cava I- "Sambreël" operasie op vena cava inferior</i>							
1412	100	1,177.00	100	1,177.00	8		440.00 +T
Combined procedure for varicose veins: Ligation of saphenous vein stripping, multiple ligation including ligation of perforating veins as indicated • Gekombineerde prosedure vir spatate: Afbinding van vena saphena stropping, veelvuldige afbinding insluitende afbinding van perforerende venas soos aangedui							
1413	141	1,659.60	120	1,412.40	3		165.00 +T
1415	247	2,907.20	197.6	2,325.80	3		165.00 +T
1417	125	1,471.30	120	1,412.40	3		165.00 +T
Extensive sub-fascial ligation of perforating veins • Uitgebreide sub-fasiële afbinding van perforerende venas							
1419	31	364.90	31	364.90	3		165.00 +T
Lesser varicose vein procedure • Klein spatate prosedures							
<i>Compression sclerotherapy of varicose veins • Skleroserende inspuiting met kompresie vir spatate</i>							
1421	9	105.90	9	105.90			
Per injection to a maximum of nine injections per leg (excluding cost of material) • Per inspuiting tot 'n maksimum van nege inspuittings per been (koste van materiaal uitgesluit)							
<i>Thrombectomy I- Trombektomie</i>							
1425	240	2,824.80	192	2,259.80	11		605.00 +T
1427	175	2,059.80	140	1,647.80	6		330.00 +T
<b>7. LYMPHO RETICULAR SYSTEM • LIMFO RETIKULêRE STELSEL</b>							
<b>7.1 Spleen • Milt</b>							
1435	221.3	2,604.70	177.04	2,083.80	9		495.00 +T
<i>Splenectomy (trauma) • Splenektomie (trauma)</i>							
<i>Bone marrow biopsy I- Beenmurg biopsie</i>							
1457	13	153.00	13	153.00	3		165.00 +T
By trephine • Deur middel van trefien							
1458	8	94.20	8	94.20			
Simple aspiration of marrow by means of trocar or cannula • Eenvoudige aspirasie van murg trokar of kannula							
<b>8. DIGESTIVE SYSTEM • SPYSVERTERINGSTELSEL</b>							
<b>8.1 Oral cavity • Mondholte</b>							
1467	31	364.90	31	364.90	4		220.00 +T
Drainage of intra-oral abscess • Dreinerings van abses in die mondholte							
1483	138	1,624.30	120	1,412.40	4		220.00 +T
Alveolar periosteal or other flaps for arch closure • Alveolêre periosteale of ander flappe vir boog sluiting							
<b>8.2 Lips • Lippe</b>							
1485	27	317.80	27	317.80	4		220.00 +T
Local excision of benign lesion of lip • Lokale uitsnyding van goedaardige letsels van lip							
1499	105.6	1,242.90	105.6	1,242.90	4		220.00 +T
Lip reconstruction following an injury: Directed repair • Liprekonstruksie na besering: Direkte herstel							
<i>Lip reconstruction following an injury only I- Liprekonstruksie slegs na besering</i>							
1501	206	2,424.60	164.8	1,939.70	4		220.00 +T
Flap repair • Flapherstel							
1503	206	2,424.60	164.8	1,939.70	4		220.00 +T
Total reconstruction (first stage) • Totale rekonstruksie (eerste stadium)							
1504	104	1,224.10	104	1,224.10	4		220.00 +T
Subsequent stages (see item 0297) • Daaropvolgende stadiums (Sien item 0297)							

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>8.3 Tongue • Tong</b>							
1505	225	2,648.30	180	2,118.60	6	330.00	+T
1507	27	317.80	27	317.80	4	220.00	+T
<b>8.4 Palate, uvula and salivary gland • Verhemelte, uvula en</b>							
1526	358.5	4,219.50	286.8	3,375.60	5	275.00	+T
1531	25	294.30	25	294.30	4	220.00	+T
<b>8.5 Oesophagus • Esofagus</b>							
1545	47	553.20	47	553.20	4	220.00	+T
1550	70	823.90	70	823.90	4	220.00	+T
<i>Hiatus hernia and diaphragmatic hernia repair / Hiatus-breek en diafragmalesse breukherstel</i>							
1563	300	3,531.00	240	2,824.80	11	605.00	+T
1565	350	4,119.50	280	3,295.60	11	605.00	+T
<b>8.6 Stomach • Maag</b>							
1587							
	48.75	573.80	48.75	573.80	4	220.00	+T
1589	34	400.20	34	400.20	6	330.00	+T
1591	+25	294.30	+25	294.30	4	220.00	+T
1597	116	1,365.30	116	1,365.30	6	330.00	+T
1615	200	2,354.00	160	1,883.20	7	385.00	+T
1617	300	3,531.00	240	2,824.80	7	385.00	+T
1619	375	4,413.80	300	3,531.00	7	385.00	+T
<b>8.7 Duodenum • Duodenum</b>							
1626	120	1,412.40	120	1,412.40	6	330.00	+T
1627	8	94.20					

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>8.8 Intestines • Dermkanaal</b>							
1634	116	1,365.30	116	1,365.30	6	330.00	+T
1637	230	2,707.10	184	2,165.70	7	385.00	+T
1639	230	2,707.10	184	2,165.70	6	330.00	+T
1642	150	1,765.50	120	1,412.40			
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 gastrokopiese en kolonoskopiese ondersoek							
1643	90	1,059.30	90	1,059.30			
Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy), oesophagus through ileum: Doctor interpretation and report • Spysverteringssteisel beelding, intraluminaal (bv. video kapsule endoskopie), oesofagus deur tot ileum: Interpretasie en verslag deur die geneesheer wat die prosedure uitgevoer het.							
1645	116	1,365.30	116	1,365.30	6	330.00	+T
1647	258	3,036.70	206.4	2,429.30	6	330.00	+T
1657	325	3,825.30	260	3,060.20	6	330.00	+T
1661	135	1,589.00	120	1,412.40	6	330.00	+T
1663	390	4,590.30	312	3,672.20	6	330.00	+T
1665	196	2,306.90	156.8	1,845.50	6	330.00	+T
1667	150	1,765.50	120	1,412.40	5	275.00	+T
1668	375	4,413.80	300	3,531.00	6	330.00	+T
<b>8.10 Rectum and anus • Rektum en anus</b>							
1677	13	153.00	13	153.00	3	165.00	+T
Sigmoidoscopy: First and subsequent, with or without biopsy • Sigmoidoskopiese: Eerste en daaropvolgende met of sonder biopsie Repair of prolapsed rectum: Abdominal • Herstel van rektum prolaps: Abdominaal							
1688	445	5,237.70	356	4,190.10	8	440.00	+T
Total mesorectal excision with colo-anal anastomosis and defunctioning enterostomy or colostomy • Totale mesorektale uitsnyding met kolo-anale anastomose en enterostomie of kolostomie.							
1705	40	470.80	40	470.80	3	165.00	+T
Incision and drainage of submucous abscess • Insnyding en dreinerings van perianale abses							
1707	40	470.80	40	470.80	3	165.00	+T
Drainage of submucous abscess • Dreinerings van sub-mukusale abses							
1737	12.5	147.10	12.5	147.10	3	165.00	+T
Dilatation of ano-rectal structure • Dilatasie van ano-rektale struktuur							
1742	27	317.80					
Bio-feedback training for faecal incontinence during anorectal manometry performed by doctor • Bio-terugvoeropleiding vir fekale inkontinensie gedurende anorektale manometrie uitgevoer deur dokter							
<b>8.11 Liver • Lewer</b>							
1743	30.3	356.60	30.3	356.60	3	165.00	+T
Needle biopsy of liver • Naaldbiopsie van lewer							
1745	125	1,471.30	120	1,412.40	4	220.00	+T
Biopsy of liver by laparotomy • Biopsie van lewer deur laparotomie							
1747	179.1	2,108.00	143.28	1,686.40	7	385.00	+T
Drainage of liver abscess • Dreinerings van lewerabses							
1748	3	35.30	3	35.30			
Body composition measured by bio-electrical impedance • Liggaamsamestelling gemeet deur middel van bio-elektriese impedansie							

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>Hemi-hepatectomy I: Hemi-hepatektomie</b>							
1749	Right • Regs	564	6,638.30	451.2	5,310.60	9	495.00 +T
1751	Left • Links	521.1	6,133.30	416.88	4,906.70	9	495.00 +T
1752	Extended right or left hepatectomy • Uitgebreide linker of regter hepatektomie	445.0	5,237.70	356	4,190.10	9	495.00 +T
1753	Partial or segmental hepatectomy • Gedeeltelike of segmentale hepatektomie	378	4,449.10	302.4	3,559.20	9	495.00 +T
1757	Suture of liver wound or injury • Hegting van lewerwond of besering	214.2	2,521.10	171.36	2,016.90	9	495.00 +T
<b>8.12 Biliary tract • Galweë</b>							
1763	With exploration of common bile duct • Met eksplorاسie van choledochus	264.5	3,113.20	211.6	2,490.50	6	330.00 +T
1765	Exploration of common bile duct: Secondary operation • Eksplorاسie van choledochus: Sekondêre operاسie	327.7	3,857.00	262.16	3,085.60	6	330.00 +T
1767	Reconstruction of common bile duct • Rekonstruksie van choledochus	371.7	4,374.90	297.36	3,499.90	6	330.00 +T
<b>8.13 Pancreas • Pankreas</b>							
1778	Endoscopic Retrograde Cholangiopancreatography (ERCP) : Endoscopy + Catheterisation of pancreas duct or choledochus • Endoskopiese Retrograde Cholangiopankreatografie (ERCP) : Endoskopie + kateterisasie van pankreasbuis of choledochus	97	1,141.70	97	1,141.70	4	220.00 +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)	+10	117.70	+10	117.70	4	220.00 +T
<b>Pancreatic functions tests I: Pankreas funksietoets</b>							
1791	Local, partial or subtotal pancreatectomy • Lokale, gedeeltelike of subtotale pankreatektomie	351.3	4,134.80	281.04	3,307.80	8	440.00 +T
1793	Distal pancreatectomy with internal drainage • Distale pankreatektomie met interne dreinasie	377.4	4,442.00	301.92	3,553.60	8	440.00 +T
<b>8.14 Peritoneal cavity • Peritoniale holte</b>							
<b>Pneumo-peritoneum I: Pneumoperitoneum</b>							
1797	First • Eerste	13	153.00	13	153.00	4	220.00 +T
1799	Repeat • Daaropvolgende	6	70.60	6	70.60	4	220.00 +T
1800	Peritoneal lavage • Peritoneale uitspoeling	20	235.40	20	235.40		
1801	Diagnostic paracentesis: Abdomen • Diagnostiese parasentese: Buik	8	94.20	8	94.20		
1803	Therapeutic paracentesis: Abdomen • Terapeutiese parasentese: Buik	13	153.00	13	153.00		
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	529.70	45	529.70	5	275.00 +T
1809	Laparotomy • Laparotomie	196	2,306.90	156.8	1,845.50	4	220.00 +T
1811	Suture of burst abdomen • Hegting van gebarste abdomen	188.3	2,216.30	150.64	1,773.00	7	385.00 +T
1812	Laparotomy for control of surgical haemorrhage • Laparotomie vir beheer van chirurgiese bloeding	105	1,235.90	105	1,235.90	9	495.00 +T
1813	Drainage of sub-phrenic abscess • Dreinerling van sub-freniese abses	180	2,118.60	144	1,694.90	7	385.00 +T
<b>Drainage of other intraperitoneal abscess (excluding appendix abscess) • Dreinerling van ander intraperitoneale abses (appendiksabses uitgesluit)</b>							
1815	Drainage of other intraperitoneal abscess (excluding appendix abscess): Transabdominal • Dreinerling van ander intraperitoneale abses (appendiksabses uitgesluit): Transabdominaal	248.4	2,923.70	198.72	2,338.90	5	275.00 +T
1817	Transrectal drainage of pelvic abscess • Transrektale dreinerling van bekkenabses	75	882.80	75	882.80	4	220.00 +T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>9. HERNIAE • BREUKE</b>							
1819	Inguinal or femoral hernia • Inguinale of femorale breuk (trauma)	125	1,471.30	120	1,412.40	4	220.00 +T
1825	Recurrent inguinal or femoral hernia • Herhalende inguinale of femorale breuk	155	1,824.40	124	1,459.50	4	220.00 +T
1827	Strangulated hernia or femoral hernia • Gestranguleerde breuk of femorale breuk	238	2,801.30	190.4	2,241.00	7	385.00 +T
1831	Umbilical hernia • Naelbreuk	140	1,647.80	120	1,412.40	4	220.00 +T
1835	Incisional hernia • Snitbreuk	160	1,883.20	128	1,506.60	4	220.00 +T
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 wondgeas (mesh) of ander prostese vir snit- of ventrale breuk herstel (Hef saam met die toepaslike prosedure kode vir snit- of ventrale breuk herstel)	77	906.30	77	906.30	4	220.00 +T
<b>10. URINARY SYSTEM • URINEWEË</b>							
<b>10.1 Kidney • Nier</b>							
1839	Renal biopsy, per kidney, open • Nierbiopsie, per nier, oop	71	835.70	71	835.70	5	275.00 +T
1841	Renal biopsy (needle) • Nierbiopsie (naald)	30	353.10	30	353.10	3	165.00 +T
	<i>Peritoneal dialysis • Peritoneale dialise</i>						
1843	First day • Eerstedag	33	388.40	33	388.40		
1845	Every subsequent day • Elke daaropvolgende dag	33	388.40	33	388.40		
	<i>Haemodialysis • Hemodialise</i>						
1847	Per hour or part thereof • Per uur of gedeelte daarvan	21	247.20	21	247.20		
1849	Maximum: Eight hours • Maksimum: Agt uur	168	1,977.40	134.4	1,581.90		
1851	Thereafter per week • Daarna per week	55	647.40	55	647.40		
1852	Continuous haemodiafiltration per day in intensive or high care unit • Volgehoue haemodiafiltrasie per dag in intensiewe of hoë sorgseenheid	33	388.40	33	388.40		
	<i>Nephrectomy • Nefrektomie</i>						
1853	Primary nephrectomy • Primêre nefrektomie	225	2,648.30	180	2,118.60	5	275.00 +T
1855	Secondary nephrectomy • Sekondêre nefrektomie	267	3,142.60	213.6	2,514.10	5	275.00 +T
1863	Nephro-ureterectomy • Nefro-ureterektomie	305	3,589.90	244	2,871.90	5	275.00 +T
1865	Nephrotomy with drainage nephrostomy • Nefrotomie met dreineringsnefrostomie	189	2,224.50	151.2	1,779.60	6	330.00 +T
1873	Suture renal laceration (renorrhaphy) • Hegting renalelaserasie (renorrafie)	193	2,271.60	154.4	1,817.30	6	330.00 +T
1879	Closure renal fistula • Sluiting van nierfistel	189	2,224.50	151.2	1,779.60	5	275.00 +T
1881	Pyeloplasty • Piëloplastie	252	2,966.00	201.6	2,372.80	5	275.00 +T
1885	Pyelolithotomy • Piëlolitotomie	189	2,224.50	151.2	1,779.60	5	275.00 +T
1891	Perinephric abscess or renal abscess: Drainage • Perinefriesse abses of nierabses: Dreinasie	200	2,354.00	160	1,883.20	7	385.00 +T
<b>10.2 Ureter • Ureter</b>							
1897	Ureterorrhaphy: Suture of ureter • Ureterorrafie: Hegting van ureter	147	1,730.20	120	1,412.40	5	275.00 +T
1898	Ureterorrhaphy :Lumbar approach • Ureterorrafie :Deur middel van lendesnit	189	2,224.50	151.2	1,779.60	5	275.00 +T
1899	Ureteroplasty • Ureteroplastie	181	2,130.40	144.8	1,704.30	5	275.00 +T
1903	Ureterectomy only • Ureterektomie alleenlik	137	1,612.50	120	1,412.40	5	275.00 +T
1919	Closure of ureteric fistula • Sluiting van fistula van ureter	147	1,730.20	120	1,412.40	5	275.00 +T
1921	Immediate deligation of ureter • Onmiddellike losmaak van afbinding om ureter (deligasie)	147	1,730.20	120	1,412.40	5	275.00 +T



	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>10.3 Bladder • Blaas</b>							
1945	5	58.90	5	58.90	3		165.00 +T
							Installering van radio-opaak materiaal vir sistografie of uretrasistografie
1949	44	517.90	44	517.90	3		165.00 +T
							Cystoskopies/Hospitaal toerusting • Sistoskopies/Hospitaal toerusting
1951	10	117.70	10	117.70	3		165.00 +T
							And retrograde pyelography or retrograde ureteral catheterisation: Unilateral or bilateral • En retrograde pielograe of retrograde kateterisering van ureter: Unilateraal of bilateraal
1952	44	517.90	44	517.90	3		165.00 +T
							J J Stent catheter • J J Stent kateter
1954	35	412.00	35	412.00	3		165.00 +T
							Ureteroskopies • Ureteroskopie
1959	20	235.40	20	235.40	3		165.00 +T
							With manipulation of ureteral calculus • Met manipulasie van uretersteen
1961	20	235.40	20	235.40	3		165.00 +T
							With removal of foreign body or calculus from urethra or bladder • Met verwydering van vreemde voorwerp of kalkulus van uretra of blaas
1964	15	176.60	15	176.60	3		165.00 +T
							And control of haemorrhage and blood clot evacuation • En kontrolering van bloeding en bloedklont evakuasie
1976	80	941.60	80	941.60	3		165.00 +T
							Optic urethrotomy • Optiese uretrotomie
							Internal urethrotomy • Interne uretrotomie
1979	50	588.50	50	588.50	3		165.00 +T
							Female • Vroulik
1981	76.2	896.90	76.2	896.90	3		165.00 +T
							Male • Manlik
							Transurethral resection of bladderneck • Transureterale reseksie van blaasnek
1985	105	1,235.90	105	1,235.90	5		275.00 +T
							Female • Vroulik
1986	125	1,471.30	120	1,412.40	5		275.00 +T
							Male • Manlik
1987	80	941.60	80	941.60	3		165.00 +T
							Litholapaxy • Litolapaksie
1989	25	294.30	25	294.30	3		165.00 +T
							Cystometrogram • Sistometrogram
1991	40	470.80	40	470.80	3		165.00 +T
							Flometric bladder studies with videocystography • Vloei-metriese blaasstudies met videosistografie
1992	25	294.30	25	294.30	3		165.00 +T
							Without videocystography • Sonder videosistografie
1993	21	247.20	21	247.20	3		165.00 +T
							Voiding cysto-urethrogram • Urinerings sisto-urethrogram
1995	10	117.70	10	117.70	3		165.00 +T
							Percutaneous aspiration of bladder • Perkutane aspirasie van blaas
1996	6	70.60	6	70.60	3		165.00 +T
							Bladder catheterisation--male (not at operation) • Blaas kateterisasie--manlik (nie tydens operasie)
1997	3	35.30	3	35.30	3		165.00 +T
							Bladder catheterisation--female (not at operation) • Blaas kateterisasie--vroulik (nie tydens operasie)
1999	24	282.50	24	282.50	3		165.00 +T
							Percutaneous cystostomy • Perkutane sistostomie
2013	137	1,612.50	120	1,412.40	5		275.00 +T
							Diverticulectomy (independent procedure): Multiple or single • Divertikulektomie (onafhanklike prosedure): Veelvoudig of enkelvoudig
2015	67	788.60	67	788.60	5		275.00 +T
							Suprapubic cystostomy • Suprapubiese sistostomie
2035	118	1,388.90	118	1,388.90	5		275.00 +T
							Cutaneous vesicostomy • Kutane vesikostomie
2039	137	1,612.50	120	1,412.40	6		330.00 +T
							Operation for ruptured bladder • Operasie vir ruptuur van blaas
2047	105	1,235.90	105	1,235.90	5		275.00 +T
							Drainage of perivesical or prevesical abscess • Dreinerings van peri-vesikale of prevesikale abses
							Evacuation of clots from bladder • Verwydering van bloedklonte uit blaas
2049	132.10	1,554.80	120	1,412.40	3		165.00 +T
							Other than post-operative • Post-operatief uitgesluit
2050					4		220.00 +T
							Post-operative • Post-operatief
2051	12	141.20	12	141.20	3		165.00 +T
							Simple bladder lavage: Including catheterisation • Eenvoudige blaasspoeling: Kateterisasie ingesluit
2058							(code moved to consultation section / kode geskuif na konsultasie afdeling)
<b>10.4 Urethra • Uretra</b>							
							Dilatation of urethral structure: By passage of sound / Dilatasie van struktuur van uretra: deur middel van 'n sonde
2063	20	235.40	20	235.40	3		165.00 +T
							Initial (male) • Eerste (manlik)
2065	10	117.70	10	117.70	3		165.00 +T
							Subsequent (male) • Opvolg (manlik)
2067	20	235.40	20	235.40	3		165.00 +T
							By passage of filiform and follower (male) • D.m.v. 'n filiform en opvolger (manlik)
2071	139	1,636.00	120	1,412.40	4		220.00 +T
							Urethrorrhapty: Suture of urethral wound or injury • Urethrorrae: Hegting van wond of besering van uretra

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>Urethraplasty I: Uretraplastie</b>							
<b>Pendulous urethra I: Penduleuse uretra</b>							
2075	71	835.70	71	835.70	4		220.00 +T
2077	145	1,706.70	120	1,412.40	4		220.00 +T
2081	261.6	3,079.00	209.28	2,463.20	4		220.00 +T
<b>Reconstruction or repair of male anterior urethra (one stage) • Rekonstruksie of herstel van anterior manlike uretra (een stadium)</b>							
<b>Reconstruction or repair of prostatic or membranous urethra I: Rekonstruksie of herstel van prostatiese of membraneuse uretra</b>							
2083	168	1,977.40	134.4	1,581.90	6		330.00 +T
2085	168	1,977.40	134.4	1,581.90	6		330.00 +T
2086	294	3,460.40	235.2	2,768.30	6		330.00 +T
<b>If done in one stage • Indien dit 'n een stadium operasie is</b>							
<b>Total Urethrectomy I: Totale Urektomie</b>							
2095	128.8	1,516.00	120	1,412.40	5		275.00 +T
<b>Drainage of simple localised perineal urinary extravasation • Dreinerings van eenvoudige gelokaliseerde perineale urinêre ekstrasasie</b>							
2097	137	1,612.50	120	1,412.40	5		275.00 +T
<b>Drainage of extensive perineal and/or abdominal urinary extravasation • Dreinerings van uitgebreide perineale en/of abdominale urinêre ekstrasasie</b>							
2103	26.3	309.60	26.3	309.60	3		165.00 +T
<b>Simple urethral meatotomy • Eenvoudige uretrale meatotomie</b>							
<b>Incision of deep peri-urethral abscess/ Insnyding van diep pen-uretrale abses</b>							
2105	123.1	1,448.90	120	1,412.40	3		165.00 +T
2107	123.1	1,448.90	120	1,412.40	3		165.00 +T
2109	181	2,130.40	144.8	1,704.30	5		275.00 +T
<b>Badenoch pull-through for intractable structure or incontinence • Badenoch deurtrek operasie vir moeilike struktuur of inkontinensie</b>							
2111	108	1,271.20	108	1,271.20	5		275.00 +T
<b>External sphincterotomy • Eksterne sfinkterotomie</b>							
2115	168	1,977.40	134.4	1,581.90	5		275.00 +T
<b>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)</b>							
2116	101.5	1,194.70	101.50	1,194.70	3		165.00 +T
<b>Urethral meatoplasty • Uretrale meatoplastiek</b>							
2117	150.3	1,769.00	120.24	1,415.20	3		165.00 +T
<b>Closure of urethrostomy or urethrocutaneous fistula (independent procedure) • Sluiting van uretrotomie of uretrokutane fistel (onafhanklike prosedure)</b>							
<b>11. MALE GENITAL SYSTEM • MANLIKE GESLAGSTELSEL</b>							
<b>11.1 Penis • Penis</b>							
2141	101	1,188.80	101	1,188.80	3		165.00 +T
<b>Reconstructive operation for insertion of prosthesis • Rekonstruktiewe operasie vir inplaaas van prostese</b>							
2147	168	1,977.40	134.4	1,581.90	3		165.00 +T
<b>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</b>							
<b>11.2 Testis en epididymis • Testis en epididimis</b>							
<b>Orchidectomy (total or subcapsular) • Orgidektomie (totaal of subkapsulêr)</b>							
2191	98	1,153.50	98	1,153.50	3		165.00 +T
<b>Unilateral • Unilateraal</b>							
2193	147	1,730.20	120	1,412.40	3		165.00 +T
<b>Bilateral • Bilateraal</b>							
2213	110.3	1,298.20	110.3	1,298.20	4		220.00 +T
<b>Suture or repair of testicular injury • Hegting of herstel van besering van testis</b>							
2215	90	1,059.30	90	1,059.30	4		220.00 +T
<b>Incision and Drainage of testis or epididymis e.g. abscess or haematoma • Insnyding en dreinerings van testis of epididimis bv. abses of hematoom</b>							
2227	42.7	502.60	42.7	502.60	3		165.00 +T
<b>Incision and drainage of scrotal wall abscess • Insnyding en dreinerings van skrotumwandabses</b>							
<b>11.3 Prostate • Prostaat</b>							
2245	252	2,966.00	201.6	2,372.80	6		330.00 +T
<b>Trans-urethral resection of prostate • Trans-uretrale reseksie van prostaat</b>							

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>14 NERVOUS SYSTEM • SENUWEESTELSEL</b>							
<b>14.1 Diagnostic procedures • Diagnostiese prosedures</b>							
2709 Full spinogram including bilateral median and postdortibial studies • Volledige spinogram wat bilaterale medianus en tibialis postedor studies insluit	140	1,647.80					
2711 Electro-encephalography: taking of record • Elektro-enkefalografie : Neem van rekord	36.10	424.90	36.10	424.90			-
2712 Electro-encephalography—interpretation • Elektro-enkefalografie interpretasie	24	282.50	24	282.50			-
2713 Spinal (lumbar) puncture. Drainage of spinal fluid for diagnostic / therapeutic indications • Spinale (lumbal) punksie. Dreinasie van spinale vloeistof vir diagnostiese / terapeutiese indikasies	18.4	216.60	18.4	216.60			-
2714 Cisternal puncture and / or intrathecal injections • Sisternale punksie en / of intratekale inspuitings	15	176.60	15	176.60			-
2717 Electromyography :First • Elektromiografie :Eerste	75	882.80	75	882.80			
2718 Electromyography :Subsequent • Elektromiografie :Opvolg	75	882.80	75	882.80			
<i>Angiography Carotis • Angiografie Karotis</i>							
2725 Unilateral • Unilateraal	25	294.30	25	294.30	4		220.00 +T
2726 Bilateral • Bilateraal	44	517.90	44	517.90	4		220.00 +T
2727 Vertebral artery: Direct needling • Vertebrale arterie: Direkte benaalding	50	588.50	50	588.50	4		220.00 +T
2729 Vertebral catheterisation • Vertebrale kateterisasie	50	588.50	50	588.50	4		220.00 +T
<i>Air encephalography and Posterior fossa tomography • Lugenkefalografie en Posterior fossa tomografie</i>							
2731 Injection of air (independent procedure) • Inspuit van lug (alleenstaande prosedure)	14.5	170.70			4		220.00 +T
2737 Visual field charting on Bjerrum Screen • Gesigsveldbepaling d.m.v. Bjerrum se skerm	7	82.40	7	82.40			
<i>Ventricular needling without burring • Ventrikelpunksie, sonder boorgate</i>							
2739 Tapping only • Slegs aftapping	16	188.30	16	188.30	4		220.00 +T
2741 Plus introduction of air and/or contrast dye for ventriculography • Plus inspasing van lug en/of kontrasmiddel vir ventrikulografie	43	506.10	43	506.10	4		220.00 +T
<i>Subdural tapping • Subdurale aftapping</i>							
2743 First sitting • Eerste keer	15	176.60	15	176.60	4		220.00 +T
2745 Subsequent • Daaropvolgende keer	10	117.70	10	117.70	4		220.00 +T
<b>14.2 Introduction of burr holes for • Boorgate vir</b>							
2747 Ventriculography • Ventrikulografie	150	1,765.50	120	1,412.40	8		440.00 +T
2749 Catheterisation for ventriculography and/or drainage • Kateterisering vir ventrikulografie en/of dreinerings	150	1,765.50	120	1,412.40	8		440.00 +T
2753 Subdural haematoma • Subdurale hematoom	150	1,765.50	120	1,412.40	8		440.00 +T
2755 Subdural empyema • Subdurale empiem	150	1,765.50	120	1,412.40	8		440.00 +T
2757 Brain abscess • Breinabses	150	1,765.50	120	1,412.40	8		440.00 +T
<b>14.3 Nerve procedures • Senuwee prosedures</b>							
2765 Nerve conduction studies (see items 0733 and 3285) • Senuweegeleidingstudies (sien items 0733 en 3285)	26	306.00	26	306.00	4		220.00 +T
<b>14.3.1 Nerve repair of suture • Senuwee herstel van hegting</b>							
2767 Suture Brachial Plexus (see also items 2837 and 2839) • Hegting Brachiale Plexus (sien items 2837 en 2839)	300	3,531.00	240	2,824.80	6		330.00 +T
<i>Suture • Hegting</i>							
<i>Large nerve • Groot senuwee</i>							
2769 Primary • Primêr	134	1,577.20	120	1,412.40	5		275.00 +T
2771 Secondary • Sekondêr	202	2,377.50	161	1,895.00	5		275.00 +T
<i>Digital nerve • Digitale senuwee</i>							
2773 Primary • Primêr	65	765.10	65	765.10	3		165.00 +T
2775 Secondary • Sekondêr	96	1,129.90	96	1,129.90	3		165.00 +T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<i>Nerve graft • Senuwee-transplantaat</i>							
2777 Simple • Eenvoudig	202	2,377.50	161.6	1,902.00	4	220.00	+T
<i>Fascicular • Fassikulêr</i>							
2779 First fasciculus • Eerste fassikus	202	2,377.50	161.6	1,902.00	4	220.00	+T
2781 Each additional fasciculus • Elke bykomende fassikus	50	588.50	50	588.50	4	220.00	+T
2783 Nerve flap: To include all stages • Senuweeflap: Alle stadia ingesluit.	224	2,636.50	179.2	2,109.20	4	220.00	+T
2787 Grafting of facial nerve • Oorplanting van nervus facialis	215	2,530.60	172	2,024.40	5	275.00	+T
<b>14.3.2 Neuractomy • Neurektomie</b>							
2799 Intrathecal injections for pain • Intratekale inspuitings vir pyn	36	423.70	36	423.70	4	220.00	+T
2800 Plexus nerve block - as part of treatment (motivation to be supplied) • Pleksus senuweeblok - as deel van behandeling (motivering moet verskaf word)	36	423.70	36	423.70			As for specialists- Soos vir spesialiste
2801 Epidural injection, plexus nerve block or peripheral nerve block for pain (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	423.70	36	423.70			-
2802 Peripheral nerve block - as part of treatment (motivation to be supplied) • Perifere senuweeblok - as deel van behandeling (motivering moet verskaf word)	25	294.30	25	294.30			As for specialists- Soos vir spesialiste
<i>Alcohol injection in peripheral nerves for pain • Alkohol inspuiting in perifere senuwees vir pyn</i>							
2803 Unilateral • Unilateraal	20	235.40	20	235.40	3	165.00	+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 • Inplasing van inblywende senuwee kateter (sluit verwydering van kateter in) (nie vir bolus tegniek) Sleigs vir gebruik saam met items 2799, 2800, 2801 of 2802	10	117.70	10	117.70			As for specialists- Soos vir spesialiste
2805 Bilateral • Bilateraal	35	412.00	35	412.00	3	165.00	+T
2809 Peripheral nerve section for pain • Perifere senuwee-deursnyding vir pyn	45	529.70	45	529.70	3	165.00	+T
2815 Excision interdigital neuroma – Morton • Eksisie interdigitaal neurom – Morton	82.3	968.70	82.3	968.70	3	165.00	+T
2825 Excision: Neuroma: Peripheral • Eksisie: Neuroom: Perifere	109.5	1,288.80	109.5	1,288.80	3	165.00	+T
<b>14.3.3 Other nerve procedures • Ander senuwee prosedures</b>							
2827 Transposition of ulnar nerve • Transposisionering van nervus ulnaris	100	1,177.00	100	1,177.00	3	165.00	+T
<i>Neurolysis • Neurolise</i>							
2829 Minor • Klein	51	600.30	51	600.30	3	165.00	+T
2831 Major • Groot	132	1,553.60	120	1,412.40	3	165.00	+T
2833 Digital • Digitaal	96	1,129.90	96	1,129.90	3	165.00	+T
2835 Scaleneotomy • Skalenotomie	132	1,553.60	120	1,412.40	6	330.00	+T
2837 Brachial plexus, suture or neurolysis (item 2767) • Brachiaal pleksus, hegting of neurolise (item 2767)	300	3,531.00	240	2,824.80	6	330.00	+T
2839 Total brachial plexus exposure with graft, neurolysis and transplantation • Totale brachiaal pleksus blootlegging met oorplanting, neurolise en transplantaat	895.2	10,536.50	716.16	8,429.20	6	330.00	+T
2841 Carpal Tunnel • Karpaaltonnel	64	753.30	64	753.30	3	165.00	+T
<i>Lumbar sympathectomy • Lumbale simpatektomie</i>							
2843 Unilateral • Unilateraal	153	1,800.80	122.4	1,440.60	4	220.00	+T
2845 Bilateral • Bilateraal	268	3,154.40	214.4	2,523.50	6	330.00	+T
<i>Sympathetic block • Simpatiese senuweeblok:</i>							
<i>Other levels • Op enige vlak:</i>							
2849 Unilateral • Unilateraal	20	235.40	20	235.40	3	165.00	+T
2851 Bilateral • Bilateraal	35	412.00	35	412.00	3	165.00	+T

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>14.4 Skull procedures • Skedelprosedures</b>							
<i>Repair of depressed fracture of skull • Herstel van ingedrewe skedelfraktuur</i>							
<i>Without brain laceration • Sonder skeuring van harsings</i>							
2859	Major • Groot	200	2,354.00	160	1,883.20	8	440.00 +T
2860	Small • Klein	170	2,000.90	136	1,600.70	8	440.00 +T
<i>With brain lacerations • Met skeuring van harsings</i>							
2861	Small • Klein	200	2,354.00	160	1,883.20	8	440.00 +T
2862	Major • Groot	375	4,413.80	300	3,531.00	8	440.00 +T
2863	Cranioplasty • Kranioplastie	280	3,295.60	224	2,636.50	8	440.00 +T
2875	Theco-peritoneal C.S.F. shunt • Teko-peritoneale S.S.V. kortsluiting	280	3,295.60	224	2,636.50	8	440.00 +T
<b>14.6 Aneurysm repair • Aneurisme herstel</b>							
2876	Repair of aneurysm or arterio-venous anomalies (intracranial) • Herstel van aneurisme of arterio-veneuse-anomalieë (intrakraniaal)	700	8,239.00	560	6,591.20	15	825.00 +T
<b>14.7 Posterior fossa surgery • Posterior fossa chirurgie</b>							
<i>Neurectomy • Neurektomie</i>							
2879	Glosso-pharyngeal nerve • Glosso-faringeale senuwee	480	5,649.60	384	4,519.70	6	330.00 +T
<i>Eighth nerve • Agste kopsenuwee</i>							
2881	Intracranial • Intrakraniaal	480	5,649.60	384	4,519.70	8	440.00 +T
2887	Vestibular nerve • Vestibulêre senuwee	480	5,649.60	384	4,519.70	9	495.00 +T
<b>14.7.1 Supratentorial procedures • Supratentoriale prosedures</b>							
2899	Craniectomy for extra-dural haematoma or empyema • Kraniëktomie weens ekstradurale hematoom of empieën	375	4,413.80	300	3,531.00	11	605.00 +T
<b>14.8 Craniotomy for • Kraniotomie vir</b>							
2900	Extra-dural orbital decompression • Ekstradurale orbitale dekompresie	700	8,239.00	560	6,591.20	11	605.00 +T
2903	Abscess, glioma • Abses, glioom	450	5,296.50	360	4,237.20	11	605.00 +T
2904	Haematoma, foreign body: Cerebral or cerebellar • Hematoom, vreemde voorwerpe: Serebraal of serebellêr	450	5,296.50	360	4,237.20	11	605.00 +T
2905	Focal epilepsy: Excision of cortical scar • Fokale epilepsie: Uitsnyding van kortikale litteken	450	5,296.50	360	4,237.20	11	605.00 +T
2906	With anterior fossa meningocele and repair of bony skull defect • Met herstel anterior fossa meningoseel en sluiting van benige skedeldefek	375	4,413.80	300	3,531.00	11	605.00 +T
2909	CSF-leaks • SSV-lekkasie	450	5,296.50	360	4,237.20	11	605.00 +T
<b>14.8.1 Stereo-tactic cerebral and spinal cord procedures • Sterio-</b>							
2918	(code moved to consultation section / kode geskuif na konsultasie afdeling)						
<b>14.9 Spinal operations • Spinale operasies</b>							
<i>Chordotomy • Chordotomie</i>							
2923	Unilateral • Unilateraal	178	2,095.10	142.4	1,676.00	3	165.00 +T+M
2925	Open • Oop	350	4,119.50	280	3,295.60	3	165.00 +T+M
<i>Rhizotomy • Risotomie</i>							
2927	Extradural, but intraspinal • Extraduraal, maar intraspinaal	320	3,766.40	256	3,013.10	3	165.00 +T+M
2928	Intradural • Intraduraal	350	4,119.50	280	3,295.60	3	165.00 +T+M
<i>Extramedullary, but intradural • Ekstramedullêr, maar intraduraal</i>							
2940	Lumbar osteophyte removal • Lumbale osteofiet verwydering	187	2,201.00	149.6	1,760.80	3	165.00 +T+M
2941	Cervical or thoracic osteophyte removal • Servikale of torakale osteofiet verwydering	285	3,354.50	228	2,683.60	3	165.00 +T+M
<b>14.10 Arterial ligations • Arteriële afbinding</b>							
<i>Carotis • Karotis,</i>							
2951	Trauma • Trauma	120	1,412.40	120	1,412.40	8	440.00 +T

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>14.11 Medical Psychotherapy • Mediese Psigoterapie</b>							
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	235.40	16	188.30			
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	470.80	32	376.60			
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	706.20	48	565.00			
2958 Psychoanalytic therapy—per 60-minute session • Psigoanalitiese terapie—per 60-minute sessie	95.09	1,119.20	48	565.00			
<b>14.12 Physical treatment methods • Fisiese behandelingsmetodes</b>							
2970 Electro-convulsive treatment (ECT)—each time (see rule Va) • Elektrokonvulsiewe behandeling (EKB)—per keer (raadpleeg reël Va)	17	200.10	17	200.10	3		165.00 +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	70.60					
<b>14.13 Psychiatric examination methods • Psigiatriese</b>							
2972 Narco-analysis (maximum of 3 sessions per treatment)—per session • Narkoanalise (maksimum van 3 sessies per behandeling)—per sessie	24	282.50					
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	282.50					
<b>15. GENERAL • ALGEMEEN</b>							
3001 Implantation of pellets (excluding cost of material)(excluding aftercare) • Inplantasie van pellets (koste van materiaal uitgesluit) (nasorg uitgesluit)	3	35.30	3	35.30			
<b>16 EYE • OOG</b>							
<b>16.1 Procedures performed in rooms • Sprekkamerprosedures</b>							
16.1.1 Eye investigations -note: Not more than three (3) items in this section may be charged during one visit • Oogondersoeke - 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	82.40	7	82.40			
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	82.40	7	82.40			
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	82.40	7	82.40			

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
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	137.50	-				
3013 Ocular motility assessment: Comprehensive examination • Okulêre motiliteitsbepalings: Omvattende ondersoek	12	141.20	12	141.20			
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 uitloktometrie (een of albei oë)	7	82.40	7	82.40			
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	9	105.90	9	105.90			-
16.1.2 Special eye investigations • Spesiale oogondersoeke							
3015 Charting of visual field with manual perimeter • Kartering van gesigsveld met manuele perimeter	28	329.60	28	329.60			
3016 Retinal threshold test without storage facilities • Retina drempeltoets sonder bergingsfasiliteite	30	353.10	30	353.10			
3017 Retinal threshold test inclusive of computer disc storage for Delta or Statpak programs • Retina drempeltoets insluitende rekenaarskyfberging vir Delta of Statpak programme	74	871.00	74	871.00			
3018 Retinal threshold trend evaluation (additional to 3017) • Retina drempelverloop evaluasie (addisioneel tot 3017)	16	188.30	16	188.30			-
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	541.40	46	541.40			-
3025 Electronic tonography • Elektroniese tonografie	19	223.60	19	223.60			-
3027 Fundus photography • Fundusfotografie	21	247.20	21	247.20			-
3029 Anterior segment microphotography • Anterior-segment mikrofotografie	21	247.20	21	247.20			-
3031 Fluorescein angiography: One or both eyes (not to be used with item 3022) • Fluoresseëen angiografie: Een of beide oë (kan nie saam item 3022 gebruik word nie)	45	529.70	45	529.70	4	220.00	+T
3032 Eyelid and orbit photography • Ooglid en orbit fotografie	9	105.90	9	105.90			-
3033 Interpretation of item 3022, 3023 and 3031 referred by other clinician • Interpretasie van item 3022, 3023 en 3031 verwys deur ander geneesheer	15	176.60	15	176.60			-
3034 Determination of lens implant power per eye • Bepaling van lensimplantstuk sterkte per oog	15	176.60	15	176.60			-
3035 Where a minor procedure usually done in the consulting rooms requires a general anaesthetic or use of an operating theatre, an additional fee may be charged • Wanneer 'n klein prosedure wat gewoonlik in die spreekkamer uitgevoer word 'n algemene narkose of die gebruik van 'n teater vereis, kan bykomende gelde gehef word	22	258.90	22	258.90			As per procedure-Soos per prosedure
3036 Corneal topography: For pathological corneas only on special motivation. For refractive surgery - may be charged once pre-operative and once post-operative per sitting (for one or both eyes) • Kornea topografie: alleenlik vir patologiese korneas met spesiale motivering. Vir refraktêre chirurgie: mag een maal pre-operatief en een maal post-operatief gehef word per sitting (vir een of beide oë)	36	423.70	36	423.70			-
16.2 Retina							
3037 Surgical treatment of retinal detachment including vitreous replacement but excluding vitrectomy • Chirurgiese behandeling van retinaloslating insluitende vervanging van vitreous uitsluitende vitrektomie	306.9	3,612.20	245.52	2,889.80	6	330.00	+T
3039 Prophylaxis and treatment of retina and choroid by cryotherapy and/or diathermy and/or photocoagulation and/or laser per eye • Profylakse en behandeling van retina en choroid met krioterapie en/of diatermie en/of fotokoagulasie en/of laser per oog	105	1,235.90	105	1,235.90	6	330.00	+T
3041 Pan retinal photocoagulation (per eye), done in one sitting • Panretinale fotokoagulasie (per oog), in een sitting (Subsequent sittings: Modifier 0005) • (Daaropvolgende sittings: Wysiger 0005)	150	1,765.50	120	1,412.40	6	330.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
3044 Removal of encircling band and/or buckling material • Verwydering van omsirkelende bande en/of induik-materiaal	105	1,235.90	105	1,235.90	6	330.00	+T
<b>16.3 Cataract • Katarak</b>							
3045 Intra-capsular extraction • Intra-kapsulêre ekstraksie	210	2,471.70	168	1,977.40	7	385.00	+T
3047 Extra-capsular (including capsulotomy) • Ekstra-kapsulêr (kapsulotomie ingesluit)	210	2,471.70	168	1,977.40	7	385.00	+T
3049 Insertion of lenticulus in addition to 3045 or 3047 (cost of lens excluded) Modifier 0005 not applicable • Inplasing van lenticulus addisioneel tot 3045 of 3047 (koste van lens uitgesluit) (Wysiger 0005 nie van toepassing nie)	57	670.90	57	670.90	7	385.00	+T
3050 Repositioning of intra ocular lens • Herposisionering van intra okulêre lens	171.10	2,013.80	136.88	1,611.10	7	385.00	+T
3051 Needling or capsulotomy • Benaalding of kapsulotomie	130	1,530.10	120	1,412.40	4	220.00	+T
3052 Laser capsulotomy • Laser kapsulotomie	105	1,235.90	105	1,235.90	4	220.00	+T
3057 Removal of lenticulus • Verwydering van lenticulus	210	2,471.70	168	1,977.40	7	385.00	+T
3058 Exchange of intra ocular lens • Vervanging van Intra okulêre lens	236	2,777.70	188.8	2,222.20	7	385.00	+T
3059 Insertion of lenticulus when 3045 or 3047 was not executed (cost of lens excluded) • Inplasing van lenticulus wanneer 3045 of 3047 nie uitgevoer is nie (koste van lens uitgesluit)	210	2,471.70	168	1,977.40	7	385.00	+T
3060 Use of own surgical microscope for surgery or examination (not for slit lamp microscope) (for use by ophthalmologists only) • Gebruik van eie chirurgiese mikroskoop vir chirurgie of ondersoeke (nie vir spleetlamp mikroskoop nie) (slegs vir gebruik deur oftalmoloe)	4	47.10					
<b>16.4 Glaucoma • Glaukoom</b>							
3061 Drainage operation • Dreineringsoperasie	247.6	2,914.30	198.08	2,331.40	6	330.00	+T
3062 Implantation of aqueous shunt device/seton in glaucoma (additional to item 3061) • Inplanting van voorkamerklep/seton in gloukoom (Addisioneel tot item 3061)	60	706.20	60	706.20	6	330.00	+T
3063 Cyclortherapy or cyclodiathermy • Siklokrioterapie of siklodiatemie	105	1,235.90	105	1,235.90	6	330.00	+T
3064 Laser trabeculoplasty • Laser trabekuloplastie	105	1,235.90	105	1,235.90	6	330.00	+T
3065 Removal of blood anterior chamber • Verwydering van bloed van voorste	105	1,235.90	105	1,235.90	4	220.00	+T
3067 Goniotomy • Goniotomie	210	2,471.70	168	1,977.40	7	385.00	+T
<b>16.5 Intra-ocular foreign body • Vreemde voorwerp in oog</b>							
3071 Anterior to Iris • Anterior tot die Iris	127	1,494.80	120	1,412.40	4	220.00	+T
3073 Posterior to Iris (including prophylactic thermal treatment to retina) • Posterior tot die Iris (profilaktiese hittebehandeling van retina ingesluit)	210	2,471.70	168	1,977.40	6	330.00	+T
<b>16.6 Strabismus • Strabismus</b>							
(Whether operation performed on one eye or both) • (Hetsy operasie uitgevoer op een of albei oe)							
3075 Operation on one or two muscles • Operasie op een of twee spiere	175.6	2,066.80	140.48	1,653.40	5	275.00	+T
3076 Operation on three or four muscles • Operasie op drie of vier spiere	200	2,354.00	160	1,883.20	5	275.00	+T
3077 Subsequent operation one or two muscles • Daaropvolgende operasie een of twee spiere	120	1,412.40	120	1,412.40	5	275.00	+T
3078 Subsequent operation on three or four muscles • Daaropvolgende operasie op drie of vier spiere	150	1,765.50	120	1,412.40	5	275.00	+T



	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>16.7 Globe • Oogbol</b>							
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	941.60	80	941.60	4	220.00	+T
3081 Treatment of minor perforating injury. • Behandeling van minor perforasie besering.	161.6	1,902.00	129.28	1,521.60	6	330.00	+T
3083 Treatment of major perforating injury. • Behandeling van major perforasie besering.	267.5	3,148.50	214	2,518.80	6	330.00	+T
3085 Enucleation or Evisceration • Enukleasie of Eviserasie	105	1,235.90	105	1,235.90	5	275.00	+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	1,883.20	128	1,506.60	5	275.00	+T
3088 Hydroxyapatite insertion (Additional to item 3087) • Hidroksiapetite inplasing (Addisionele tot item 3087)	40	470.80	40	470.80	5	275.00	+T
3089 Subconjunctival injection if not done at time of operation • Subkonjunktivale inspuiting indien nie tydens operasie gedoen nie	10	117.70	10	117.70	5	275.00	+T
3091 Retrobulbar injection (if not done at time of operation) • Retrobulbêre inspuiting (indien nie gedoen tydens operasie)	16	188.30	16	188.30	4	220.00	+T
3092 External laser treatment for superficial lesions • Eksterne laser behandeling vir oppervlakkige letsels	53	623.80	53	623.80			
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	1,530.10	120	1,412.40	7	385.00	+T
3097 Anterior vitrectomy • Anterior vitrektomie	280	3,295.60	224	2,636.50	6	330.00	+T
3098 Removal of silicon from globe • Verwydering van silikon uit oogbol	280	3,295.60	224	2,636.50	6	330.00	+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	4,931.60	335.2	3,945.30	6	330.00	+T
3100 Lensectomy done at time of posterior vitrectomy • Lensektomie gedoen saam met posterior vitrektomie	30	353.10	30	353.10	7	385.00	+T
<b>16.8 Orbit • Oogkas</b>							
3101 Drainage of orbital abscess • Dreinerings van orbitale abses	105	1,235.90	105	1,235.90	5	275.00	+T
3104 Removal orbital prosthesis • Verwydering orbitale protese	212.7	2,503.50	170.16	2,002.80	5	275.00	+T
3105 Exenteration • Eksenterasie	275	3,236.80	220	2,589.40	5	275.00	+T
3107 Orbitotomy requiring bone flap • Orbitotomie wat beenflap vereis	393	4,625.60	314.40	3,700.50	5	275.00	+T
3108 Eye socket reconstruction • Oogkasrekonstruksie	206	2,424.60	164.8	1,939.70	5	275.00	+T
3109 Hydroxyapatite implantation in eye cavity when evisceration or enucleation was done previously • Hidroksiapetite inplanting wanneer eviserasie of enukleasie reeds voorheen gedoen is	300	3,531.00	240	2,824.80	5	275.00	+T
3110 Second stage hydroxyapatite implantation • Tweede stadium hidroksiapetite inplanting	110	1,294.70	110	1,294.70	5	275.00	+T
<b>16.9 Cornea • Kornea</b>							
3111 Contact lenses: Assessment involving preliminary fittings and tolerance visits • Kontaklenberaming: Aanvanklike passings en toleransie besoeke	*	*	*	*			
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	2,354.00	160	1,883.20			
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	1,953.80	132.8	1,563.10			
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, intraokulere chirurgie of korneale oorplanting.	135.2	1,591.30	120	1,412.40	6	330.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
*3117 Removal of foreign body: On the basis of fee per consultation • Verwydering van vreemde voorwerp op die basis van gelde per konsultasie		*		*	4	220.00	+T
3118 Curettage of cornea after removal of foreign body(aftercare excluded) • Kurettasie van kornea na verwydering van vreemde voorwerp (nasorg uitgesluit)	10	117.70	10	117.70			
3119 Tattooing • Tattoëring	26	306.00	26	306.00	4	220.00	+T
3121 Corneal graft (Lamellar or full thickness) • Korneale oorplanting (Lamellêrof volle dikte)	289	3,401.50	231.2	2,721.20	6	330.00	+T
3123 Insertion of intra-corneal or intrascleral prosthesis for refractive surgery • Inplaaas van intra/korneale of intrasklerale protese vir refraktiewe chirurgie	254	2,989.60	203.2	2,391.70	6	330.00	+T
3125 Keratectomy • Keratektomie	127	1,494.80	120	1,412.40	6	330.00	+T
3127 Cauterization of Cornea (by chemical, thermal or cryotherapy methods) • Kouterisasie van Kornea (deur chemiese, termale of krioterapie metodes)	10	117.70	10	117.70	4	220.00	+T
3130 Pterygium or conjunctival cyst. No conjunctival flap or graft used • Pterigium of konjunktivale kiste. Geen konjunktivale flap of oorplanting.	96.9	1,140.50	96.9	1,140.50	4	220.00	+T
3131 Paracentesis • Parasentese	53	623.80	53	623.80	4	220.00	+T
3136 Conjunctival flap or graft. Not for use with pterigium surgery • Konjunktivale flap of oorplanting. Nie vir gebruik tydens pterigium chirurgie nie.	95.7	1,126.40	95.7	1,126.40	6	330.00	+T
<b>16.10 Ducts • Bulse</b>							
3133 Probing and/or syringing, per duct • Sondering en/of deurspoeling per buis	10	117.70	10	117.70	4	220.00	+T
3135 Insert polythene tubes/stent: unilateral : Additional • Inplasing van politeenbuis of stent : Unilateraal : Addisioneel	13	153.00	13	153.00	4	220.00	+T
3137 Excision of lacrimal sac: Unilateral • Uitsnyding van traansak: Unilateraal	132	1,553.60	120	1,412.40	4	220.00	+T
3139 Dacryocystorhinostomy (single) with or without polythene tube • Dakriosistorinostomie (enkel) met of sonder politeenbuis	210	2,471.70	168	1,977.40	5	275.00	+T
3141 Sealing Punctum surgical/cautery per eye • Toemaak van punktum chirurgies of met kouterisasie. Per oog.	24.9	293.10	24.9	293.10	4	220.00	+T
3142 Sealing Punctum with plugs.Per eye. • Toemaak van punktum met proppie. Per oog	20	235.40	20	235.40	4	220.00	+T
3143 Three-snip operation • Driesnit-operasie Repair of canaliculus • Herstel van kanalikulus	10	117.70	10	117.70	4	220.00	+T
3145 Primary procedure • Primêre prosedure	132	1,553.60	120	1,412.40	4	220.00	+T
3147 Secondary procedure • Sekondêre prosedure	175	2,059.80	140	1,647.80	4	220.00	+T
<b>16.11 Iris • Iris</b>							
3149 Iridectomy or iridotomy by open operation as isolated procedure • Iridektomie of iridotomie met oop operasie as geïsoleerde prosedure	132	1,553.60	120	1,412.40	4	220.00	+T
3153 Iridectomy or iridotomy by laser or photocoagulation as isolated procedure (maximum one procedure) • Iridektomie of iridotomie met laser of fotokoagulase as geïsoleerde prosedur (maksimum een prosedure)	105	1,235.90	105	1,235.90	4	220.00	+T
3157 Division of anterior synechiae as isolated procedure • Verdelling van anterior sinegieë as geïsoleerde prosedure	132	1,553.60	120	1,412.40	4	220.00	+T
3158 Repair iris as in dialysis. Anterior chamber reconstruction. • Herstel van iris soos in dialise. Anterior segment rekonstruksie.	142.4	1,676.00	120	1,412.40	4	220.00	+T
<b>16.12 Lids • Ooglede</b>							
3161 Tarsorrhaphy • Tarsorrafie	47	553.20	47	553.20	4	220.00	+T
3165 Repair of skin laceration of the lid. Simple • Herstel van vellerasie van die ooglid. Eenvoudig.	27.3	321.30	27.3	321.30	4	220.00	+T
3176 Lid operation for facial nerve paralysis including tarsorrhaphy but excluding cost of material • Ooglidoperasie vir fasiate senuweeverlamming, tarsorrafie ingesluit maar koste van materiaal uitgesluit	187	2,201.00	149.6	1,760.80	4	220.00	+T
<b>16.12.1 Entropion or ectropion by • Entropion of ektriplon d.m.v.</b>							
3177 Cautery • Kouterisasie	10	117.70	10	117.70	4	220.00	+T
3179 Suture • Hegging	49.4	581.40	49.4	581.40	4	220.00	+T
3181 Open operation • Oop operasie	111.5	1,312.40	111.5	1,312.40	4	220.00	+T
3183 Free skin, mucosal grafting or flap • Vry vel, slymvlies oorplanting of flap	122.6	1,443.00	120	1,412.40	4	220.00	+T

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>16.12.2 Reconstruction of eyelid ● Rekonstruksie van ooglid</b>							
<i>Staged procedures for partial or total loss of eyelid ● Prosedures vir gedeeltelike of volledige verlies van ooglid</i>							
3185	259	3,048.40	207.2	2,438.70	4	220.00	+T
3187	206	2,424.60	164.8	1,939.70	4	220.00	+T
3189	136.5	1,606.60	120	1,412.40	4	220.00	+T
3172	125.80	1,480.70	120	1,412.40	4	220.00	+T
3191	150.2	1,767.90	120.16	1,414.30	4	220.00	+T
<b>16.12.3 Ptosis ● Ptose</b>							
3193	190	2,236.30	152	1,789.00	4	220.00	+T
<i>Ptosis: By lesser procedure e.g. sling operation ● Ptose: D.m.v. enige kleiner operasies, by draagbandoperasies</i>							
3195	137.6	1,619.60	120	1,412.40	4	220.00	+T
3197	166	1,953.80	132.8	1,563.10	4	220.00	+T
<b>16.13 Conjunctiva ● Konjunktiva</b>							
3199	132	1,553.60	120	1,412.40	4	220.00	+T
3200	47	553.20	47	553.20	4	220.00	+T
<b>16.14 General ● Algemeen</b>							
3196	12	141.20					
3198	284.13	3,344.20		-			
3201	109	1,282.90					
3202	109	1,282.90					
3203	120	1,412.40					-
<b>17 EAR ● OOR</b>							
<b>17.1 External Ear (Pinna) ● Eksterne Oor (Oorskulp)</b>							
<b>Major reconstruction of external ear ● Groot operasie vir rekonstruksie van</b>							
3271							-
<i>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)</i>							
<b>17.2 External ear canal ● Uitwendige gehoorgang</b>							
3204	21.58	254.00					
3205	21	247.20	21	247.20	4	220.00	+T

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<i>Meatus Atresia • Meatus-atresie</i>							
3215	Repair of stenosis of cartilaginous portion • Herstel van stenose van kraakbenige deel	164	1,930.30	131.2	1,544.20	4	220.00 +T
3219	Removal of osteoma from meatus: Solitary • Verwyder van enkele meatale osteoom	77	906.30	77	906.30	4	220.00 +T
3220	Debridement mastoidectomy cavity with the use of a microscope (excludes loupe) - not to be used combined with item 3206 • Debridement van mastoïdektomie holte met die gebruik van 'n mikroskoop (vergrootglas uitgesluit) - moet nie saam met item 3206 gebruik word nie	23.14	272.40	23.14	272.40		
3221	Removal of osteoma from meatus: Multiple • Verwydering van veelvuldige meatale osteome	215	2,530.60	172	2,024.40	4	220.00 +T
<b>7.3 Middle ear • Middelloor</b>							
3209	Bilateral myringotomy • Bilaterale miringotomie	46	541.40	46	541.40	4	220.00 +T
3211	Unilateral myringotomy with insertion ventilation tube • Unilaterale miringotomie met inplaaas van ventilasie buis	38	447.30	38	447.30	4	220.00 +T
3212	Bilateral myringotomy with insertion ventilation tube • Bilaterale miringotomie met inplaaas van ventilasiebuis	57	670.90	57	670.90	4	220.00 +T
3214	Reconstruction of middle ear ossicles (ossiculoplasty) • Rekonstruksie van middeloor ossikels (ossikulêre rekonstruksie)	255	3,001.40	204	2,401.10	5	275.00 +T
3237	Exploratory tympanotomy • Eksploratiewe timpanotomie	158.9	1,870.30	127.12	1,496.20	5	275.00 +T
3243	Miringoplasty • Miringoplastie	138	1,624.30	120	1,412.40	5	275.00 +T
3245	Functional reconstruction of tympanic membrane • Funktioniese rekonstruksie van timpaniese membraan	277	3,260.30	221.6	2,608.20	5	275.00 +T
3264	Tympanomastoidectomy • Timpanomastoïdektomie	375	4,413.80	300	3,531.00	5	275.00 +T
3265	Reconstruction of posterior canal wall, following radical mastoidectomy • Rekonstruksie van posterior wand van die kanaal, na radikale mastoïdektomie	320	3,766.40	256	3,013.10	5	275.00 +T
<b>17.4 Facial nerve • Fasiälissenuwee</b>							
<b>17.4.1 Facial nerve tests • Fasiälissenuweetoetse</b>							
3223	Percutaneous stimulation of the facial nerve • Perkutane stimulasie van die fasiälissenuwee	9	105.90	9	105.90	4	220.00 +T
3224	Electroneurography (ENOG) • Elektroneurografie (ENOG)	75	882.80	75	882.80	4	220.00 +T
<b>17.4.2 Facial nerve surgery • Fasiälissenuwee chirurgie</b>							
<b>EXPLORATION OF FACIAL NERVE • BLOOTLEGGING VAN NERVUS FASIALIS</b>							
3227	Exploration of tympano mastoid segment • Blootlegging van die timpanomastoïd segment	297	3,495.70	237.6	2,796.60	5	275.00 +T
3228	Grafting of the tympano mastoid segment (including item 3227) • Oorplanting van die timpanomastoïd segment (insluitende item 3227)	436	5,131.70	348.8	4,105.40	5	275.00 +T
3230	Extratemporal grafting of the facial nerve • Ekstratemporale oorplanting van die fasiälissenuwee	436	5,131.70	348.8	4,105.40	5	275.00 +T
3232	Facio-assessory or facio-hypoglossal anastomosis • Fasio-aksessortese of fasio-hipoglossale anastomose	124	1,459.50	120	1,412.40	6	330.00 +T
<b>17.5 Inner ear • Binne-oor</b>							
<b>17.5.1 Audiometry • Oudiometrie</b>							
3273	Pure tone audiometry (air conduction) • Suiwer toon oudiometrie	6.5	76.50	6.5	76.50		
3274	Pure tone audiometry (bone conduction with masking) • Suiwer toon oudiometrie (beengleiding met maskering)	6.5	76.50	6.5	76.50		
3275	Impedance audiometry (tympanometry) • Impedansie oudiometrie	6.5	76.50	6.5	76.50		
3277	Speech audiometry: Fee includes speech audiogram, speech reception threshold, discrimination score • Spraak oudiometrie: Gelde sluit in spraak audiogram, spraak ontvangsdrempel, diskrimineringsstelling	10	117.70	10	117.70		

	Specialist Spesialis		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
<b>17.5.2 Balance tests • Balanstoets</b>							
3260	71.48	841.30	71.48	841.30			
Computerized static posturography consists of standing a patient on a Piezo-electric platform which tests the vestibular and proprioceptive systems • Gerekenariseerde statiese bewegingsondersoeke met 'n pasiënt in 'n staande posisie op 'n Piezo-elektriese platform wat die vestibulêre en proprioseptiewe stelsels toets							
3251	10	117.70	10	117.70			
Minimal calorie test (excluding consultation fee) • Minimale kalorietoets (konsultasie uitgesluit)							
3253	25	294.30	25	294.30			
Electro-nystagmography for spontaneous and positional nystagmus • Elektronistagmografiese ondersoeke vir spontane en posisie nystagmus							
3255	70	823.90	70	823.90			
Calorie test done with electro-nystagmography • Kaloriese toets met elektro-nistagmografie							
3256	50	588.50	50	588.50			
Video nystagmoscopy (binocular) • Videonistagmoskopie (binokulêr)							
3258	14	164.80	14	164.80	4		220.00 +T
Otolith repositioning manoeuvre • Otoliet herposisionering maneuever							
<b>17.6 Microsurgery of the skull base • Mikrochirurgie van die skedelbasis</b>							
<b>17.6.1 Middle fossa approach (i.e. transtemporal or supralabyrinthine) • Middelfossatoegang (d.i. transtemporale of supralabirintien)</b>							
3229	420	4,943.40	336	3,954.70	5		275.00 +T
Facial nerve: Exploration of the labyrinthine segment • Fasiälissenuwee: Eksplorasie van die labirintiene segment							
5221	510	6,002.70	408	4,802.20	11		605.00 +T
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 eksplorasie van die labirintiene segment ingesluit)							
5222	620	7,297.40	496	5,837.90	11		605.00 +T
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)							
<b>17.6.2 Translabyrinthine approach • Translabirintiene toegang</b>							
5229	660	7,768.20	528	6,214.60	11		605.00 +T
Facial nerve surgery in the internal auditory canal, translabyrinthine (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)							
<b>17.6.7 Subtotal petrosotomy • Subtotale petrosektomie</b>							
5247	480	5,649.60	384	4,519.70	11		605.00 +T
Subtotal petrosotomy for CSF leak and / or for total obliteration of the mastoid cavity • Subtotale petrosektomie vir SSV-lek en / of obliterasie van die mastoïdholte							
<b>Confined to specialist in Physical Medicine • Beperk tot spesialiste in Fisiese Geneeskunde</b>					<b>Anaesthetic Narkose</b>		
	U/E	R	U/E	R	U/E	R	T/M
<b>18. PHYSICAL TREATMENT • FISIESE BEHANDELING</b>							
3279	0.75	3.80		-			-
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 pasiënt fisies onmoontlik is om na die spreekkamer te kom, en die apparaat na die pasiënt vervoer moet word)							
3280	13.5	158.90		-			-
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)							

	Specialist Spesials		General practitioner Huisarts		Anaesthetic Narkose		
	U/E	R	U/E	R	U/E	R	T/M
3281 Ultrasonic therapy • Ultrasoniese terapie	10	117.70					-
3282 Shortwave diathermy • Kortgolf diatermie	10	117.70					-
3284 Sensory nerve conduction studies • Bestudering van geleiding deur sensoriese senuwee	31	364.90					-
3285 Motor nerve conduction studies • Motoriese senuwee studies	26	306.00					-
3287 Spinal joint and ligament injection • Spinale gewrigs- en ligament inspuiting.	20	235.40	20	235.40			-
3288 Epidural injection • Epidurale inspuiting	36	423.70					-
3289 Multiple injections - First joint • Veevuldige inspuitings - eerste gewrig	7.5	88.30					-
3290 Each additional joint • Elke daaropvolgende gewrig	4.5	53.00					-
3291 Tendon or ligament injection • Pees of ligament inspuiting	9	105.90					-
3292 Aspiration of joint or interarticular injection • Aspirasie van gewrig of intra artikulêre inspuiting	9	105.90					-
3293 Aspiration or injection of bursa or ganglion • Aspirasie of inspuiting in die bursa of ganglion	9	105.90					-
3294 Paracervical (neck) nerve block • Paraservikale (nek) senuweeblok	20	235.40	20	235.40			-
3295 Paravertebral root block—unilateral • Paravertebrale wortelblok—unilateraal	20	235.40					-
3296 Paravertebral root block—bilateral • Paravertebrale wortelblok—bilateraal	30	353.10					-
3297 Manipulation of spine performed by a specialist in Physical Medicine. • Manipulasie van die spinale kolom deur spesialis in Fisiese Medisyne	14	164.80					-
3298 Spinal traction • Traksie van die spinale kolom	6	70.60			4		220.00 Hip+T
3299 Manipulation of large joints under general anaesthesia • Manipulasie van die groot gewrigte onder algemene narkose	14	164.80			3		165.00 knee+T
					3		165.00 Shoulder+T
3300 Manipulation of large joints without anaesthetic • Manipulasie van die groot gewrigte sonder narkose	*	*	*	*			-
3301 Muscle fatigue studies • Spier uitputting studies	20	235.40					-
3302 Strength duration curve per session • Kragduur-kromme per sessie.	10.5	123.60					-
3303 Electromyography • Elektromiografie	75	882.80					-
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: Sleigs gelde vir die behandeling is van toepassing: Sien reëls L en M)	10	117.70	10	117.70			-

	Specialist Radiologist		Other specialists		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
<b>19. RADIOLOGY • RADIOLOGIE</b>							
<b>19.1 Skeleton • Skelet</b>							
<b>19.1.1 Limbs • Ledemate</b>							
3305 Finger, toe • Vinger, toon	9.5	116.90	6.3	77.60	--	--	--
6500 Hand • Hand	11.6	142.80	7.7	94.80	--	--	--
6501 Wrist (specify region) • Polsgewrig (spesifiseer streek)	11.6	142.80	7.7	94.80	--	--	--
6503 Scaphoid • Skafoïed	11.6	142.80	7.7	94.80	--	--	--
6504 Radius and Ulna • Radius en ulna	11.6	142.80	7.7	94.80	--	--	--
6505 Elbow • Elmboog	11.6	142.80	7.7	94.80	--	--	--
6506 Humerus • Humerus	11.6	142.80	7.7	94.80	--	--	--
6507 Shoulder • Skouer	11.6	142.80	7.7	94.80	--	--	--
6508 Acromio-Clavicular joint • Akromio-klavikulêre gewrig	11.6	142.80	7.7	94.80	--	--	--
6509 Clavicle • Clavikel	11.6	142.80	7.7	94.80	--	--	--
6510 Scapula • Skapula	11.6	142.80	7.7	94.80	--	--	--
6511 Foot • Voet	11.6	142.80	7.7	94.80	--	--	--
6512 Ankle • Enkel	11.6	142.80	7.7	94.80	--	--	--
6513 Calcaneus • Kalkaneus	11.6	142.80	7.7	94.80	--	--	--
6514 Tibia and fibula • Tibia en fibula	11.6	142.80	7.7	94.80	--	--	--
6515 Knee • Knie	11.6	142.80	7.7	94.80	--	--	--
6516 Patella • Patella	11.6	142.80	7.7	94.80	--	--	--
6517 Femur • Femur	11.6	142.80	7.7	94.80	--	--	--
6518 Hip • Heup	11.6	142.80	7.7	94.80	--	--	--
6519 Sesamoid Bone • Sesamoïedbeen	11.6	142.80	7.7	94.80	--	--	--
3309 Smith-Petersen or equivalent controle, in theatre • Smith Petersen of ekwivalente kontrole, in teater	58	714.00	38.7	476.40	--	--	--
3311 Stress studies, e.g. joint • Spanningsopnames, bv. gewrig	11.6	142.80	7.7	94.80	--	--	--
3313 Full length study, both legs • Vollengte opnames, beide bene	23.2	285.60	15.5	190.80	--	--	--
3317 Skeletal survey • Skeletopname	42	517.00	28	344.70	--	--	--
3319 Arthrography per joint • Artografie per gewrig	23.1	284.40	15.4	189.60	--	--	--
3320 Introduction of contrast medium or air: Add • Insit van kontrasmedium of lug: Voeg by	20.7	254.80	13.8	169.90	--	--	--
<b>19.1.2 Spinal column • Werwelkolom</b>							
3321 Per region, cervical, sacral, coccygeal, one region thoracic • Per streek, bv. nek, sakrum, koksiks, een streek torakaal	16.6	204.30	11	135.40	--	--	--
3325 Stress studies • Spanningsopname	16.6	204.30	11	135.40	--	--	--
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	204.30	11	135.40	--	--	--
<i>Myelography • Myelografie</i>							
3333 Lumbar • Lumbaal	43.3	533.00	28.9	355.80	4	220.00	+T
3334 Thoracic • Torakaal	33.3	409.90	22.2	273.30	4	220.00	+T
3335 Cervical • Servikaal	53.3	656.10	35.5	437.00	4	220.00	+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	220.00	+T
3344 Introduction of contrast medium • Insit van kontrasmedium	28.1	345.90	18.7	230.20	--	--	--
3345 Discography • Diskografie	51.9	638.90	34.6	425.90	4	220.00	+T
3347 Introduction of contrast medium per disc level: Add • Insit van kontrasmedium per diskus vlak: Voeg by	42.3	520.70	28.2	347.10	--	--	--

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
<b>19.1.3 Skull ● Skedel</b>								
3349	Skull studies ● Skedelstudies	23.5	289.30	15.7	193.30			
3351	Paranasal sinuses ● Paranasale sinusse	16.5	203.10	11	135.40			
3353	Facial bones and/or orbits ● Aangesigsbene en/of oogholtes	18.9	232.70	12.6	155.10			
3355	Mandible ● Mandibula	14.1	173.60	9.4	115.70			
3357	Nasal bone ● Nasale been	11.7	144.00	7.8	96.00			
3359	Mastoid: Bilateral ● Mastroïed: Bilateriaal	27	332.40	18	221.60			
<i>Teeth ● Tande</i>								
3361	One quadrant ● Een kwadrant	5.5	67.70	3.7	45.50			
3363	Two quadrants ● Twee kwadrante	9.5	116.90	6.3	77.60			
3365	Full mouth ● Volle mond	16.5	203.10	11	135.40			
3366	Rotation tomography of the teeth and jaws ● Rotasietomografie van die kaak en tande	20	246.20	13.3	163.70			
3367	Temporo-mandibular joints: Per side ● Temporo-mandibulêre gewrigte: Per kant	16.5	203.10	11	135.40			
3369	Tomography: Per side ● Tomografie: Per kant	16.5	203.10	11	135.40			
3371	Localisation of foreign body in the eye ● Lokalisering van vreemde voorwerp in die oog	23.5	289.30	15.7	193.30			
3381	Ventriculography ● Ventrikulografie	40.9	503.50	27.3	336.10	4	220.00	+T
3385	Post-nasal studies: Lateral neck ● Post-nasale studies: Laterale nek	9.5	116.90	6.3	77.60			
3387	Maxillo-facial cephalometry ● Maksillofasiale kefalometrie	13.2	162.50	8.8	108.30			
3389	Dacrocystography ● Dakrosistografie	16.55	203.70	11	135.40	4	220.00	+T
3391	For introduction of contrast medium add ● Vir insit van kontrasmedium voeg by	16.55	203.70	11	135.40			
<b>19.2 Alimentary tract ● Spysverteringskanaal</b>								
3393	Bowel washout: Add ● Dermspoeling: Voeg by	7.2	88.60	4.8	59.10			
3395	Sialography (plus 80% for each additional gland) ● Sialografie (plus 80% vir elke bykomende klier)	19	233.90	12.7	156.30	4	220.00	+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	204.30	11	135.40			
3399	Pharynx and oesophagus ● Farinks en esofagus	19	233.90	12.7	156.30			
3403	Oesophagus, stomach and duodenum (control film of abdomen included) and limited follow through ● Esofagus, maag en duodenum (Oorsigfoto van die buik ingesluit) en beperkte deurvolging	30	369.30	20	246.20			
3405	Double contrast: Add ● Dubbel kontras: Voeg by	11	135.40	7.3	89.90			
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	369.30	20	246.20			
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 gastrointestinale kanaal deurvolging (insluitend kontrole film van die buik, esofagus, maag, duodenum en kolon)	43.3	533.00	28.9	355.80			
3409	Barium enema (control film of abdomen included) ● Barium kliesma (oorsigfoto van die buik ingesluit)	27.5	338.50	18.3	225.30			
3411	Air contrast study (add) ● Lug-kontrasstudie (voeg by)	29	357.00	19.3	237.60			
3416	Pancreas: E R C P hospital equipment: Choledogram and/ or pancreatography screening included ● Pankreas: E R C P hospitaal toerusting: Choledogram en/of pancreatografie deurligting ingesluit	23.3	286.80	15.5	190.80	4	220.00	+T
Note: For items 3415 and 3416: Endoscopy (See item 1778)								
Opmerking: Vir items 3415 en 3416: Endoskopie (sien item 1778)								



		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
3417	Gastric/oesophageal/duodenal intubation control • Gastriese/esofageale/duodenale intubasie-kontrole	8.8	108.30	5.9	72.60			
3419	Gastric/oesophageal intubation insertion of tube (add) • Gastriese/esofageale intubasie insit van buis (voeg by)	8.4	103.40	5.6	68.90			
3421	Duodenal intubation: Insertion of tube (add) • Duodenale intubasie: Insit van buis (voeg by)	16.5	203.10	11	135.40			
3423	Hypotonic duodenography (3403 and 3405 included) (add) • Hipotoniese duodenografie (3403 en 3405 ingesluit) (voeg by)	44	541.60	29.3	360.70			
<b>19.3 Biliary tract • Galweë</b>								
<i>Cholangiography • Cholangiografie</i>								
3427	Intravenous • Intraveneus	33	406.20	22	270.80			
3431	Operative: First series: Add item 3607 only when the Radiologist attends personally in the theatre • Operatief: Eerste reeks: Voeg item 3607 slegs by as die Radioloog self in die teater teenwoordig is	31.6	389.00	21	258.50			
3433	Post-operative: T-Tube • Post-operatief: T-Buis	25	307.80	16.7	205.60			
3435	Introduction of contrast medium (add) • Insit van kontrasmedium (voeg by)	8.4	103.40	5.6	68.90			
3437	Trans hepatic, percutaneous • Transhepaties, perkutaan	27.5	338.50	18.3	225.30			
3439	Introduction of contrast medium (add) • Insit van kontrasmedium (voeg by)	49.7	611.80	33.1	407.50			
3441	Tomography of biliary tract (add) • Tomografie van galweë (voeg by)	14.1	173.60	9.4	115.70			
<b>19.4 Chest • Borskas</b>								
3443	Larynx (Tomography included) • Larinks (Tomografie ingesluit)	18.8	231.40	12.5	153.90			
3445	Chest (item 3601 included) • Borskas (item 3601 ingesluit)	14.1	173.60	9.4	115.70			
3447	Chest and cardiac studies (item 3601 included) • Borskas en hartstudies (item 3601 ingesluit)	18.9	232.70	12.6	155.10			
3449	Ribs • Ribbes	18.5	227.70	12.3	151.40			
3451	Sternum or sternoclavicular joints • Sternum of sternoklavikulêre gewigte	18.9	232.70	12.6	155.10			
<i>Bronchography • Brongografie</i>								
3453	Unilateral • Unilateraal	18.9	232.70	12.6	155.10	8	440.00	+T
3455	Bilateral • Bilateraal	33.1	407.50	22.1	272.10	8	440.00	+T
3457	Introduction of contrast medium included • Insit van kontrasmedium ingesluit	53.6	659.80	35.7	439.50			
3461	Pleurography • Pleurografie	18.9	232.70	12.6	155.10	3	165.00	+T
3463	For introduction of contrast medium: Add • Vir insit van kontrasmedium: Voeg by	4.2	51.70	2.8	34.50			
3465	Laryngography • Laringografie	16.5	203.10	11	135.40			
3467	For introduction of contrast medium: Add • Vir insit van kontrasmedium: Voeg by	15	184.70	10	123.10			
3468	Thoracic Inlet • Toraksinlaat	9.5	116.90	6.3	77.60			
<b>19.5 Abdomen • Bulk</b>								
3477	Control films of the abdomen (not being part of examination for barium meal, barium enema, pyelogram, cholecystogram, cholangiogram etc.) • Oorsigfoto van die Bulk (wat nie deel vorm van bv bariummaal, bariumkiesma, piëlogram, cholesistogram of cholangiogram ensovoorts nie)	14.1	173.60	9.4	115.70			
3479	Acute abdomen or equivalent studies • Akute bulkstudies of ekwivalente opnames	23.5	289.30	15.7	193.30			

	Specialist Radiologist		Other specialists		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
<b>19.6 Urinary tract • Urinewee</b>							
<b>EXCRETORY UROGRAM • UITSKEIDINGSUROGRAM:</b>							
3487	37.6	462.90	25.1	309.00			-
	Control film included and bladder views before and after micturition (intravenous pyelogram) (item 0206 not applicable) • Oorsigfoto ingesluit, asook blaasopnames voor en na lediging (binnearse piëlogram) (item 0206 nie van toepassing nie)						
3493	18.3	225.30	12.2	150.20			-
	Waterload test: Add • Hidrasie-toets: Voeg by						
3497	29	357.00	19.3	237.60			-
	Cystography only or urethrography only (retrograde) • Sistografie alleen of uretrografie alleen (retrograad) <i>Cysto-urethrography • Sist-uretrografie</i>						
3499	47.8	588.40	31.9	392.70			-
	Retrograde • Retrograad						
3503	5.5	67.70	3.7	45.50			-
	Introduction of contrast medium: Add • Insit van kontrasmedium: Voeg by						
3505	27.5	338.50	18.3	225.30	3	165.00	+T
	Retrograde-prograde pyelography • Piëlografie retrograad-prograad						
3511	27.6	339.80	18.4	226.50			-
	Aspiration renal cyst • Aspirasie nier sist						
3513	14.1	173.60	9.4	115.70			-
	Tomography of renal tract: Add • Tomografie van nierweë: Voeg by						
<b>19.8.1 Vascular Studies • Vaskulêre Studies</b>							
3536	315	3,877.70					-
	Dedicated angiography suite: analogue monoplane unit. Once off charge per patient by owner of equipment • Toegewyde angiografie suite: Analoe enkelvlak eenheid: Eenmalige heffing per pasiënt deur eienaar van toerusting						
3537	617	7,595.30					-
	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						
3538	693	8,530.80					-
	Dedicated angiography suite: Analogue bi-plane unit: Once off charge per patient by owner of equipment • Toegewyde angiografie suite: Analoe dubbelvlak eenheid: Eenmalige heffing per pasiënt deur eienaar van toerusting						
3539	829	10,205.00					-
	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						
3545	27.5	338.50	16.5	203.10			-
	Venography: Per limb: • Venografie: Per ledemaat						
3548	272	3,348.30					-
	Analogue monoplane screening table • Analoe enkelvlak deurligtingstafel						
3550	530	6,524.30					-
	Digital monoplane screening table • Digitale enkelvlak deurligtingstafel						
3557	81	997.10	48.6	598.30	4	220.00	+T
	Catheterisation aorta or vena cava, any level, any route, with aortogram/cavogram • Kateterisasie aorta of vena cava, enige vlak, enige roete, met aortogram/cavogram						
3558	116	1,428.00	69.6	856.80	5	275.00	+T
	Translumbal aortic puncture, with full study • Translumbale aortiese punksie, met volle studie						
3559	95	1,169.50	57	701.70	4	220.00	+T
	Selective first order catheterisation, arterial or venous, with angiogram/venogram • Selektiewe eerste orde kateterisasie, arterieel of veneus, met angiogram/venogram						
3560	109	1,341.80	65.4	805.10	4	220.00	+T
	Selective second order catheterisation, arterial or venous, with angiogram/venogram • Selektiewe tweede orde kateterisasie, arterieel of veneus, met angiogram/venogram						
3562	122	1,501.80	73.2	901.10	4	220.00	+T
	Selective third order catheterisation, arterial or venous, with angiogram/venogram • Selektiewe derde orde kateterisasie, arterieel of veneus, met angiogram/venogram						

		Specialist Radiologist		Other specialists		Anaesthetic		T/M
		U/E	R	U/E	R	U/E	R	
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 arteriovenuse malformasie (AVM)	143	1,760.30	85.8	1,056.20	5	275.00	+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	2,683.60	130.8	1,610.10	5	275.00	+T
3572	Transcatheter selective blood sampling, arterial or venous ● Transkateter selektiewe bloedmonsterneming, arterieel of veneus	54	664.70	32.4	398.80			
3574	Spinal angiogram (global fee) including all selective catheterisations ● Spinale angiogram (globale gelde) alle selektiewe kateterisasies ingesluit	800	9,848.00	480	5,908.80	5	275.00	+T
<b>19.8.2 Introduction of contrast medium ● Inplasing van kontrasmedium:</b>								
3563	Direct intravenous for limb: Add ● Direkte intraveneuse inplasing in ledemaat: Voeg by	11.1	136.60	7.4	91.10			
3564	Direct femoral arterial or venous or jugular venous puncture ● Direkte femorale arteriële of veneuse of jugulêre veneuse punksie	62	763.20	37.2	457.90			
3575	"Cut-downs" for venography: Add ● Insnyding vir venografie: Voeg by	16.55	203.70	11	135.40			
<b>19.9 Tomography And Cinematography ● Tomografie en Sinematografie</b>								
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%							

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
19.9.1	<b>Computed Tomography - Rekenaartomografie</b>							
6400	Plus Spiral CT • Plus Spirale RT	50	591.50			-	-	
6401	Plus 3D reconstruction • Plus 3D rekonstruksie	50	591.50			-	-	
6402	Plus high resolution study • Plus hoë resolusie studie	50	591.50			-	-	
6403	CT limb without contrast • RT ledemaat ongekontrasteerd	200	2,366.00			5	275.00	+T
6404	CT limb with contrast only • RT ledemaat met kontras alleenlik	200	2,366.00			5	275.00	+T
6405	CT Limb pre AND post contrast • RT ledemaat voor EN na kontras	250	2,957.50			5	275.00	+T
6406	CT joint without contrast • RT gewrig ongekontrasteerd	200	2,366.00			5	275.00	+T
6407	CT joint with contrast only • RT gewrig met kontras alleenlik	200	2,366.00			5	275.00	+T
6408	CT joint pre AND post contrast • RT gewrig voor EN na kontras	250	2,957.50			5	275.00	+T
6409	CT brain without contrast (including posterior fossa) • RT brein ongekontrasteerd (insluitend posterior fossa)	210	2,484.30			5	275.00	+T
6410	CT brain with contrast only (including posterior fossa) • RT brein met kontras alleenlik (insluitend posterior fossa)	210	2,484.30			5	275.00	+T
6411	CT brain pre AND post contrast (including posterior fossa) • RT brein voor EN na kontras (insluitend posterior fossa)	265	3,135.00			5	275.00	+T
6412	CT orbits complete study, axial OR coronal, without contrast • RT oogkaste volledige studie, aksiaal OF koronaal, ongekontrasteerd	160	1,892.80			5	275.00	+T
6413	CT orbits complete study, axial AND coronal, without contrast • RT oogkaste volledige studie, aksiaal EN koronaal, ongekontrasteerd	210	2,484.30			5	275.00	+T
6414	CT orbits complete study, axial OR coronal pre AND post contrast • RT oogkaste volledige studie, aksiaal OF koronaal voor EN na kontras	215	2,543.50			5	275.00	+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	3,135.00			5	275.00	+T
6416	CT paranasal sinuses limited study axial OR coronal • RT paranasale sinusse beperkte studie, aksiaal OF koronaal	50	591.50			5	275.00	+T
6417	CT paranasal sinuses limited study axial AND coronal • RT paranasale sinusse beperkte studie aksiaal EN koronaal	100	1,183.00			5	275.00	+T
6418	CT paranasal sinuses complete study, axial OR coronal, without contrast • RT paranasale sinusse volledige studie, aksiaal OF koronaal, ongekontrasteerd	160	1,892.80			5	275.00	+T
6419	CT paranasal sinuses complete study, axial AND coronal, without contrast • RT paranasale sinusse volledige studie, aksiaal EN koronaal, ongekontrasteerd	210	2,484.30			5	275.00	+T
6420	CT paranasal sinuses complete study, axial OR coronal, pre AND post contrast • RT paranasale sinusse volledige studie, aksiaal OF koronaal, voor EN na kontras	215	2,543.50			5	275.00	+T
6421	CT paranasal sinuses complete study, axial AND coronal, pre AND post contrast • RT paranasale sinusse volledige studie, aksiaal EN koronaal, voor EN na kontras	260	3,075.80			5	275.00	+T
6422	CT pituitary fossa, without contrast • RT pituitêre fossa, ongekontrasteerd	160	1,892.80			5	275.00	+T
6423	CT pituitary fossa, pre AND post contrast • RT pituitêre fossa, voor EN na kontras	210	2,484.30			5	275.00	+T
6424	CT internal auditory meati, without contrast • RT binneoorkanale, ongekontrasteerd	100	1,183.00			5	275.00	+T
6425	CT internal auditory meati, pre AND post contrast • RT binneoorkanale, voor EN na kontras	150	1,774.50			5	275.00	+T
6426	CT mastoids • RT mastoïede	100	1,183.00			5	275.00	+T
6427	CT ear structures, limited study v • RT oor struktuur, beperkte studie	100	1,183.00			5	275.00	+T

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	TM
6428	CT middle AND inner ear, complete study including reconstructions • RT middel- EN binne-oor, volledige studie insluitend rekonstruksies	310	3,667.30			5	275.00	+T
6429	CT facial bones • RT gesigsbene	210	2,484.30			5	275.00	+T
6430	CT neck soft tissue, without contrast • RT nek sagteweefsel, ongekontrasteerd	185	2,188.60			5	275.00	+T
6431	CT neck soft tissue with contrast only • RT nek sagteweefsel met kontras alleenlik	185	2,188.60			5	275.00	+T
6432	CT neck pre AND post contrast/ • C T nek voor EN na kontras	235	2,780.10			5	275.00	+T
6433	CT cervical spine without contrast • RT servikale werwels ongekontrasteerd	300	3,549.00			5	275.00	+T
6434	CT cervical spine pre AND post contrast • RT servikale werwels voor EN na kontras	350	4,140.50			5	275.00	+T
6435	CT cervical spine post myelogram • RT servikale werwels post mielogram	150	1,774.50			5	275.00	+T
6436	CT dorsal spine without contrast • RT torakale werwels ongekontrasteerd	300	3,549.00			5	275.00	+T
6437	CT dorsal spine pre AND post contrast • RT torakale werwels voor EN na kontras	350	4,140.50			5	275.00	+T
6438	CT dorsal spine post myelogram • RT torakale werwels post-mielogram	150	1,774.50			5	275.00	+T
6439	CT lumbar spine without contrast • RT lumbale werwels ongekontrasteerd	300	3,549.00			5	275.00	+T
6440	CT lumbar spine pre AND post contrast • RT lumbale werwels voor EN na kontras	350	4,140.50			5	275.00	+T
6441	CT lumbar spine post myelogram • RT lumbale werwels post-mielogram	150	1,774.50			5	275.00	+T
6442	CT pelvimetry (topogram only) • RT pelvimetrie (topogram alleenlik)	50	591.50			5	275.00	+T
6443	CT chest without contrast • RT borskas ongekontrasteerd	235	2,780.10			5	275.00	+T
6444	CT chest with contrast • RT borskas met kontras	235	2,780.10			5	275.00	+T
6445	CT chest pre AND post contrast • RT borskas voor EN na kontras	285	3,371.60			5	275.00	+T
6446	CT chest high resolution lungs, limited study • RT borskas hoë resoluie longe, beperkte studie	100	1,183.00			5	275.00	+T
6447	CT high resolution lungs, complete study • RT hoëresoluie longe, volledige studie	235	2,780.10			5	275.00	+T
6448	CT abdomen without contrast • RT buik ongekontrasteerd	215	2,543.50			5	275.00	+T
6449	CT abdomen with contrast • RT buik met kontras	215	2,543.50			5	275.00	+T
6450	CT abdomen pre AND post contrast • RT buik voor EN na kontras	265	3,135.00			5	275.00	+T
6451	CT abdomen triphasic study • RT buik trifasiese studie	315	3,726.50			5	275.00	+T
6452	CT pelvis without contrast • RT bekken ongekontrasteerd	215	2,543.50			5	275.00	+T
6453	CT pelvis with contrast • RT bekken met kontras	215	2,543.50			5	275.00	+T
6454	CT pelvis pre AND post contrast • RT bekken voor EN na kontras	265	3,135.00			5	275.00	+T
6455	CT abdomen AND pelvis without contrast • RT buik EN bekken ongekontrasteerd	315	3,726.50			5	275.00	+T
6456	CT abdomen AND pelvis with contrast • RT buik EN bekken met kontras	315	3,726.50			5	275.00	+T
6457	CT abdomen AND pelvis pre AND post contrast • RT buik EN bekken voor EN na kontras	365	4,318.00			5	275.00	+T
6458	CT chest, abdomen AND pelvis with contrast • RT borskas, buik EN bekken met kontras	545	6,447.40			5	275.00	+T

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
6459	CT base of skull to symphysis pubis with contrast • RT skedelbasis tot simfise pubis met kontras	735	8,695.10			5	275.00	+T
6460	CT for dental implants maxilla OR mandible • RT vir tandinplantings maksilla OF mandible	250	2,957.50			5	275.00	+T
6461	CT for dental implants maxilla AND mandible • RT vir tandinplantings maksilla EN mandible	500	5,915.00			5	275.00	+T
6462	CT angiography per limited region (including spiral, high resolution AND all reconstructions) • RT angiografie per beperkte gebied (insluitend spiral, hoë resoluësie EN alle rekonstruksies)	515	6,092.50			5	275.00	+T
6463	CT angiography per extensive region (including spiral, high resolution, 3D AND all other reconstructions) • RT angiografie per ekstensiewe gebied (insluitend spiral, hoë resoluësie, 3D en alle rekonstruksies)	615	7,275.50			5	275.00	+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	591.50			5	275.00	+T
6465	CT guidance for aspiration, biopsy or drainage • RT begeleiding vir aspirasie, biopsie of dreinasie	100	1,183.00			11	605.00	+T
6466	CT guidance for aspiration at time of CT diagnostic study • RT begeleiding vir aspirasie, ten tye van RT diagnostiese studie	50	591.50			5	275.00	+T
6467	CT stereotactic localisation for biopsy • RT stereotaktiese lokalisasie vir biopsie	150	1,774.50			11	605.00	+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	1,892.80					
6469	Quantitative CT for bone mineral density • Kwantitatiewe RT vir beendightheid	97	1,147.50					
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-straal-eenheid, met angiografie /intervensionele kapasiteit soos gebruik in hospitaal of teater, per halfuur.	47	578.60					
3597	Contrast media: General Rule Y applies (Please note: item 0201 is not applicable for contrast media) • Kontrasmiddels: Algemene Reël Y geld (Let wel: item 0201 is nie toepaslike vir kontrasmiddels nie)							
<b>19.10 Miscellaneous • Diverse</b>								
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	142.80	7.7	94.80			
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 halfuur: Voeg by	16	197.00	10.7	131.70			
3603	Sinography • Sinografie	27.7	341.00	18.4	226.50			
3600	Peripheral bone densitometry utilizing ionizing radiation • Perifere been digtheidstoeting met gebruik van ioniserende bestraling	13	160.00	13	160.00			
3604	Bone densitometry (to be charged once only for one or more levels done at the same session) • Beendighheidsmeting (word slegs eenmalig geëis vir een of meer vlakke gedoen tydens dieselfde sessie)	77	947.90	77	947.90			
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 gehêf word)	8.4	103.40	5.6	68.90			

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
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	203.10	11	135.40			
3613	Setting of sterile trays • Stel van steriele blaale	3.3	40.60	3.3	40.60			
5034	Fine needle aspiration or biopsy • Aspirasie of biopsie deur middel van 'n fyn naald	25	307.80	25	307.80	6	330.00	+T
<b>19.11</b>	<b>Ultrasonic investigations • Ultrasoniese ondersoeke</b>							
3612	Ultrasonic bone densitometry • Ultrasoniese beendighheidsmeting	19	233.90	19	233.90			
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	348.90	30	348.90	9	495.00	+T
3596	Intravascular ultrasound per case, arterial or venous, for intervention • Intravaskulêre ultraklank per geval, arterieel of veneus, vir intervensie	30	348.90	30	348.90			
3621	Cardiac examination (M. Mode) • Eggo kardiografie (M. Mode)	25	290.80	25	290.80			
3622	Cardiac examination: 2 Dimensional • Eggo kardiografie: 2 Dimensioneel	50	581.50	50	581.50			
3623	Cardiac examination+effort: Add • Eggo kardiografie +inspanning:Voeg by	10	116.30	10	116.30			
3624	Cardiac examination+contrast: Add • Eggo kardiografie +kontras: Voeg by	10	116.30	10	116.30			
3625	Cardiac examinations + doppler • Eggo kardiografie + doppler	50	581.50	50	581.50			
3626	Cardiac examinations + phonocardiography: Add • Eggo kardiografie + fonokardiografie: Voeg by	10	116.30	10	116.30			
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 vasculêre anatomie, para-aortiese area, urienwee, bekkenorgane.)	60	697.80	60	697.80			
5102	Ultrasound of joints (eg shoulder hip knee), per joint • Ultraklank van gewigte (bv. skouer, heup, knie) per gewig	50	581.50	50	581.50			
5103	Ultrasound soft tissue, any region • Ultraklank sagteweefsel, enige gebied	50	581.50	50	581.50			
3628	Renal tract • Urienwee	50	581.50	50	581.50			
3631	Ophthalmic examination • Oogondersoek	50	581.50	50	581.50			
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	581.50	50	581.50			

		Specialist Radiologist		Other specialists		Anaesthetic		T/M
		U/E	R	U/E	R	U/E	R	
3634	Peripheral vascular study, B mode only • Perifere vasculêre studie, B mode alleenlik	39	453.60	39	453.60			
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	1,488.60	120	1,395.60			
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 ekstrakraniale vasculêre strukture; karotisse, vertebrale en subklaviese vate. (Mag nie saam met items 5110, 5112, 5113, 5114 gehef word nie)	206	2,395.80	164.8	1,916.60			
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	1,360.70	117	1,360.70			
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	1,360.70	117	1,360.70			
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	2,070.10	142.4	1,656.10			
3635	Plus (+) Doppler • Plus (+) Doppler	39	453.60	39	453.60			
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 streekondersoek gevoeg word, maar mag nie by items 5110, 5111, 5112, 5113 of 5114 gevoeg word nie)	78	907.10	78	907.10			
19.12	<b>Portable unit examinations • Ondersoeke met mobiele eenheid</b>							
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	123.10	7	86.20			
3640	Theatre investigations (with fixed installation) • Teaterondersoeke (met vaste installasie)	4.5	55.40	3	36.90			
3641	Tracer test • Speurtoets	33.2	408.70	22.1	272.10			
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	204.30	11.1	136.60			
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	1,011.90	54.8	674.60			



		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
19.14	<b>Interventional radiological procedures •</b>							
	<b>Intervensionele radiologiese prosedures</b>							
5014	Atherectomy (per vessel) • Aterektomie (per vat)	341	4,197.70	204.6	2,518.60			-
5016	Aspiration thrombectomy (per vessel) • Aspirasie trombektomie (per vat)	219	2,695.90	131.4	1,617.50			-
5018	On-table thrombolysis/transcatheter infusion performed in angiography suite • Op-tafel trombolise/transkateter infuus uitgevoer in angiografie suite	178	2,191.20	106.8	1,314.70	5	275.00	+T
5022	Embolisation non-intracranial, per vessel • Embolisering nie-intrakraniaal, per vat	178	2,191.20	106.8	1,314.70	9	495.00	+T
5031	Antegrade ureteric stent insertion • Antegraad ureteriese stent inplasing	116	1,428.00	69.6	856.80	6	330.00	+T
5033	Percutaneous cystostomy in radiology suite • Perkutane sistostomie in radiologie suite	50	615.50	30	369.30			-
5035	Urethral balloon dilatation in radiology suite • Uretrale ballon dilatasie in radiologie suite	38	467.80	22.8	280.70			-
5036	Percutaneous Abdominal/Pelvic/Other drain insertion, any modality • Perkutane abdominale/pelwiese/ander dreineringsbuis invoering, enige modaliteit	57	701.70	34.2	421.00			-
5037	Urethral stenting in radiology suite • Uretrale stent inplasing in radiologie suite	171	2,105.00	102.6	1,263.00			-
5041	Balloon occlusion/Wada test • Ballon afsluiting/Wada toets	178	2,191.20	106.8	1,314.70	9	495.00	+T
5043	Intracranial angioplasty • Intrakraniale angioplastiek	341	4,197.70	204.6	2,518.60	13	715.00	+T
5045	Hepatic arterial infusion catheter insertion • Hepatiese arteriële infuus kateter inplasing	260	3,200.60	156	1,920.40	6	330.00	+T
5047	Combined internal/external biliary drainage • Gekombineerde interne/eksterne galdreinerings	171	2,105.00	102.6	1,263.00	9	495.00	+T
5049	Percutaneous gall bladder drainage • Perkutane galblaas dreinerings	116	1,428.00	69.6	856.80	9	495.00	+T
5072	Tunnelled/Subcutaneous arteria/venous line performed in radiology suite • Getonnel/subkutane arteriële/veneuse lyn uitgevoer in radiologie suite	137	1,686.50	82.2	1,011.90	5	275.00	+T
5074	IVC filter insertion jugular or femoral route • IVC filter inplasing jugulêre of femorale roete	260	3,200.60	156	1,920.40	9	495.00	+T
5076	Intravascular foreign body removal, arterial or venous, any route • Intravaskulêre vreemde voorwerp verwydering, arterieel of veneus, enige roete	341	4,197.70	204.6	2,518.60	9	495.00	+T
5078	Percutaneous sclerotherapy of an arteriovenous malformation (AVM) • Perkutane skleroterapie van 'n arteriovenouse malformasie (AVM)	117	1,440.30	70.2	864.20			-
5080	Transjugular intrahepatic portosystemic shunt • Transjugulêre intrahepatiese portosistemiese omlëiding	559	6,881.30	335.4	4,128.80	13	715.00	+T
5082	Transjugular liver biopsy • Transjugulêre lewer biopsie	116	1,428.00	69.6	856.80	9	495.00	+T
5088	Oesophageal stent insertion in radiology suite • Esofageale stent inplasing in radiologie suite	171	2,105.00	102.6	1,263.00	6	330.00	+T
5090	Trachial stent insertion • Tragiale stent inplasing	171	2,105.00	102.6	1,263.00	6	330.00	+T
5091	GIT Balloon dilatation under fluoroscopy • GIT ballon dilatasie onder fluoroskopie	111	1,366.40	66.6	819.80	6	330.00	+T
5092	Other GIT stent insertion • Ander GIT stent inplasing	171	2,105.00	102.6	1,263.00	6	330.00	+T
5093	Percutaneous gastrostomy in radiology suite • Perkutane gastrostomie in radiologie suite	143	1,760.30	85.8	1,056.20			-
5094	Cutting needle biopsy with image guidance • Insnydende naalbiopsie onder beeldende begeleiding	38	467.80	22.8	280.70			-
5095	Chest drain insertion in radiology suite • Borskas dreineringsbuis inplasing in radiologie suite	54	664.70	32.4	398.80			-

	Specialist Radiologist		Other specialists		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
19.15	<b>Magnetic Resonance Imaging • Magnetiese Resonansie Beelding:</b> <b>Magnetic Resonance Imaging: Per anatomical Region • Magnetiese Resonansie Beelding: Per anatomiese Liggaamsdeel</b> Note: See modifier 6101 for limited examinations Opmerking Sien wysiger 6101 vir beperkte ondersoeke						
6210	600	7,386.00	400	N/A	5	275.00	+T
6211	600	7,386.00	400	N/A	5	275.00	+T
6212	600	7,386.00	400	N/A	5	275.00	+T
6213	600	7,386.00	400	N/A	5	275.00	+T
	<b>CONTRAST MEDIUM • KONTRASMEDIUM</b>						
6260	Current price according to the regular price list published by the Radiological Society of SA • Huidige prys volgens die gereelde pryslys wat deur die Radiologiese Vereniging van SA gepubliseer word.						
LOW FIELD STRENGTH PERIPHERAL JOINT MAGNETIC							
6270	105	1,292.60	70	861.70	5	275.00	+T
	Low field strength peripheral joint examination (feet, knees, hands, and elbows), in dedicated limb units not able to perform body, spine or head examinations • Lae veld sterkte perifere gewrigsondersoeke (voete, knieë, hande, en elmboë) in toegewese ledemaateenhede wat nie in staat is om liggaam-, werwelkolom-, of kopondersoeke uit te voer nie						

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
20.	<b>Radiation Oncology • Stralingsonkologie</b>							
20.10	<b>Chemotherapy • Chemoterapie</b>							
	Note : When patients are not treated in chemotherapy facilities, items 0213, 0214 and 0215 are used in stead of 5790-5795 • Let wel : Indien patiente nie in chemoterapie fasiliteite behandel word nie, word items 0213,0214 en 0215 gebruik in plaas van 5790-5795.							
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), binnespiersse, 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	505.50	42.95	505.50			
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, binnespiersse, 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	288.20	24.49	288.20			
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 (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. 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 :	30.61	360.30	30.61	360.30			

	Specialist Radiologist		Other specialists		Anaesthetic		
	U/E	R	U/E	R	U/E	R	T/M
<p>n Fasiliteit waar onkologie medisyne self aangekoop, verkoop en geresepteer word tydens orale chemo- of hormonale terapie (per siklus), binnespiersse, 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 foci hef.</p>							
<p>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 foci 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 gehel word)</p>	159.47	1,877.00	127.58	1,501.60			
<p>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 •</p> <p>Infusie Chemoterapie fasiliteitsfoci: '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 foci hef.</p>	90.03	1,059.70	90.03	1,059.70			
<p>5795 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 fasiliteitsfoci: '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 foci hef.</p>	112.54	1,324.60	112.54	1,324.60			

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
20.11	<b>Radiation Therapy • Radioterapie</b>							
20.11.1	<b>Manuele Radiotherapy Planning Procedures • Manuele Bestralings Beplanningsprosedures.</b>							
5801	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	42.56	551.20					
5601	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	99.32	1,286.20					
5802	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	56.18	727.50					
5602	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	131.10	1,697.70					
5803	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Special Technique - PROFESSIONAL COMPONENT • Manuele Bestralingsbeplanning: Geen Simulasie, Beperkte Rekenaar Plan, Spesiale Tegniek - PROFESSIONELE KOMPONENT	76.62	992.20					
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	2,315.10					
20.11.2	<b>Conventional Radiotherapy Planning Procedures • Konvensionele Radioterapie Beplanningsprosedures</b>							
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	2,204.90					

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
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	5,144.60					
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	3,086.80					
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	7,202.50					
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	3,858.50					
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	9,003.10					
20.11.3	<b>Three Dimensional Radiotherapy Planning Procedures ● Drie Dimensionele Radioterapie Beplanningsprosedures</b>							
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	240.23	3,111.00					
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 (uitgesluit beeldingskoste vir CT en MRB)	977.20	12,654.70					
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	407.75	5,280.40					
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 (uitgesluit beeldingskoste vir CT en MRB)	1,368.07	17,716.50					

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
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	554.33	7,178.60					
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 (uitgesluit beeldingskoste vir CT en MRB)	1,710.09	22,145.70					
20.11.4	<b>Intensity Modulated Radiotherapy Planning Procedures • Intensiteits gemoduleerde bestraling</b>							
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	642.92	8,325.80					
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 (uitgesluit beeldingskoste vir CT en MRB)	1,916.81	24,822.70					
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) • Intensiteits Gemoduleerde Bestraling Beplanningsprosedures: Intensiteits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Alleenlik vir Skraag Volumes (nie vir gebruik saam met ander IMRT Beplanningskodes nie) - PROFESSIONELE KOMPONENT	232.18	3,006.70					
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) • Intensiteits Gemoduleerde Bestraling Beplanningsprosedures: Intensiteits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Alleenlik vir Skraag Volumes (nie vir gebruik saam met ander IMRT Beplanningskodes nie) - TEGNIESE KOMPONENT (uitgesluit beeldingskoste vir CT en MRB)	958.40	12,411.30					
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) • Intensiteits Gemoduleerde Bestraling Beplanningsprosedures: Intensiteits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Alleenlik vir Skraag Volumes (nie vir gebruik saam met ander IMRT Beplanningskodes nie) - TEGNIESE KOMPONENT	753.35	9,755.90					

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
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) • Intensiteits Gemoduleerde Bestraling Beplanningsprosedures: Intensiteits Gemoduleerde Bestralings Simulasie, Inverse Beplanning, Rekenaar Skandering met Magnetiese Resonansie of ander gelyksoortige Beeldfusie Tegnieke - TEGNIESE KOMPONENT (uitgesluit beeldingskoste vir CT en MRB)	2,174.48	28,159.50					
20.11.5	<b>Kilovolt Radiation Treatment • Kilovolt Bestralingsterapie</b>							
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	635.60					
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	1,483.00					
20.11.6	<b>Short course radiation treatment • Kort kursus bestralingsterapie</b>							
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	1,369.30					
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	3,195.20					
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	1,917.10					
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	4,473.10					
5837	Short Course Radiation Treatment: Short course Treatment, Special Technique - PROFESSIONAL COMPONENT • Kort Kursus Bestralingsterapie: Kort kursus Bestraling, Spesiale Tegnieke - PROFESSIONELE KOMPONENT	190.33	2,464.80					
5637	Short Course Radiation Treatment: Short course Treatment, Special Technique - TECHNICAL COMPONENT • Kort Kursus Bestralingsterapie: Kort kursus Bestraling, Spesiale Tegnieke - TEGNIESE KOMPONENT	444.11	5,751.20					



		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
20.11.7	<b>Weekly radiation treatment sessions • Weeklikse Bestralingsbehandelingsessies</b>							
20.11.7.1	<b>Conventional Techniques • Konvensionele tegnieke</b>							
5839	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Single Volume of Interest - PROFESSIONAL COMPONENT • Weeklikse Bestralingsterapieessies - Konvensionele Tegnieke: Weeklikse Bestralings, Enkel Volume van Belang - PROFESSIONELE KOMPONENT	193.86	2,510.50					
5639	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Single Volume of Interest - TECHNICAL COMPONENT • Weeklikse Bestralingsterapieessies - Konvensionele Tegnieke: Weeklikse Bestralings, Enkel Volume van Belang - TEGNIESE KOMPONENT	452.33	5,857.70					
5840	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Multiple Volumes of Interest - PROFESSIONAL COMPONENT • Weeklikse Bestralingsterapieessies - Konvensionele Tegnieke: Weeklikse Bestralings, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT	246.73	3,195.20					
5640	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Multiple Volumes of Interest - TECHNICAL COMPONENT • Weeklikse Bestralingsterapieessies - Konvensionele Tegnieke: Weeklikse Bestralings, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT	575.69	7,455.20					
5841	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Special Technique - PROFESSIONAL COMPONENT • Weeklikse Bestralingsterapieessies - Konvensionele Tegnieke: Weeklikse Bestralings, Spesiale Tegniek - PROFESSIONELE KOMPONENT	317.22	4,108.00					
5641	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Special Technique - TECHNICAL COMPONENT • Weeklikse Bestralingsterapieessies - Konvensionele Tegnieke: Weeklikse Bestralings, Spesiale Tegniek - TEGNIESE KOMPONENT	740.18	9,585.30					
20.11.7.2	<b>Advanced Techniques • Gevorderde tegnieke</b>							
5849	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Single Volume of Interest - PROFESSIONAL COMPONENT • Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Enkel Volume van Belang - PROFESSIONELE KOMPONENT	236.24	3,059.30					
5649	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Single Volume of Interest - TECHNICAL COMPONENT • Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Enkel Volume van Belang - TEGNIESE KOMPONENT	551.21	7,138.20					
5850	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Multiple Volumes of Interest - PROFESSIONAL COMPONENT • Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Veelvuldige Volumes van Belang - PROFESSIONELE KOMPONENT	330.73	4,283.00					

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
5650	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Multiple Volumes of Interest - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestralingsterapieessies - Veelvuldige Vin Kollimators, Veelvuldige Volumes van Belang - TEGNIESE KOMPONENT	771.71	9,993.60					
5851	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Special Technique - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Spesiale Tegnieke - PROFESSIONELE KOMPONENT	425.23	5,506.70					
5651	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Special Technique - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Veelvuldige Vin Kollimators, Spesiale Tegnieke - TEGNIESE KOMPONENT	992.19	12,848.90					
5854	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Intensity Modulated Radiotherapy - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Intensiteits Gemoduleerde Bestraling - TEGNIESE KOMPONENT	348.87	4,517.90					
5654	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Intensity Modulated Radiotherapy - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestraling, Intensiteits Gemoduleerde Bestraling - TEGNIESE KOMPONENT	814.03	10,541.70					
5855	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Total Body Radiotherapy or Similar - PROFESSIONAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestralings, Heelligaam Bestraling of Soortgelyk - PROFESSIONELE KOMPONENT	826.83	10,707.40					
5655	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Total Body Radiotherapy or Similar - TECHNICAL COMPONENT ● Weeklikse Bestralingsterapieessies - Gevorderde Tegnieke: Weeklikse Bestralings, Heelligaam Bestraling of Soortgelyk - TEGNIESE KOMPONENT	1,929.26	24,983.90					
20.11.8	<b>Stereotactic Radiation ● Stereotaktiese Bestraling</b>							
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	48,165.50					
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	112,386.10					
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	55,390.30					

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
5661	Stereotactic Radiation: Stereotactic Radiation, Fractionated, Full course, Global Fee - TECHNICAL COMPONENT ● Stereotaktiese Bestraling: Stereotaktiese Bestraling, Gefraksioneerd, Volle Kursus, Globale Fee - TEGNIESE KOMPONENT	9,980.23	129,244.00					
20.12	<b>Brachytherapy ● Bragiterapie</b>							
20.12.1	<b>Isotope/Applicator Therapy ● Isotope/Toedienenterapie</b>							
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- Toedienenterapie: 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	1,403.80					
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 intravenese, 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	2,807.60					
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 hoëdosis 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	7,785.00					
20.12.2	<b>Brachytherapy Implants ● Bragiterapie Implanterings</b>							
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	2,807.60					
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	10,189.10					

		Specialist Radiologist		Other specialists		Anaesthetic		
		U/E	R	U/E	R	U/E	R	T/M
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	13,585.50					
20.12.3	<b>Brachytherapy Treatment • Bragiterapie Behandeling</b>							
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	7,938.90					
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	5,386.70					
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	12,568.80					
20.12.4	<b>Brachytherapy Imaging • Bragiterapie Beelding</b>							
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	2,030.20					

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
<b>21. PATHOLOGY • PATOLOGIE</b>				
* 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.				
<b>21.1 Haematology • Hematologie</b>				
3705 Alkali resistant haemoglobin • Alkaliebestande hemoglobien	4.5	55.10	3	36.80
3709 Antiglobulin test (Coombs' or trypsinized red cells) • Antiglobulientoets (Coombsmetode of getripsineerde rooiselle)	3.65	44.70	2.45	30.00
3710 Antibody titration • Antiliggzaam-titrasie	7.2	88.20	4.8	58.80
3711 Arneth count • Arneth-telling	2.25	27.60	1.5	18.40
3712 Antibody identification Antiliggzaam identifikasie	8.45	103.50	5.65	69.20
3713 Bleeding time (does not include the cost of the simplate device) • Bloeytyd (sluit nie die koste van simplateapparaat in nie)	6.94	85.00	4.63	56.70
3715 Buffy Layer examination • "Buffy" laag ondersoek	19.9	243.80	13.27	162.60
3716 Mean Cell Volume • Gemiddelde Selvolume	2.25	27.60	1.5	18.40
3717 Bone marrow cytological examination only • Beenmurg sitologiese ondersoek alleen	19.9	243.80	13.27	162.60
3719 Bone marrow: Aspiration • Beenmurg: Aspirasie	8.4	102.90	5.6	68.60
3720 Bone marrow trephine biopsy • Beenmurg trefien biopsie	32.6	399.40	21.7	265.80
3721 Bone marrow aspiration and trephine biopsy (excluding histological examination) • Beenmurg aspirasie en trefien biopsie (sluit nie histologiese ondersoek in nie)	36.8	450.80	24.5	300.10
3722 Capillary fragility: Hess • Kapillêre breekbaarheid: Hess	2.02	24.70	1.35	16.50
3723 Circulating anticoagulants • Sirkulerende antistolmiddel	5.85	71.70	3.9	47.80
3724 Coagulation factor inhibitor assay • Koagulasiefaktor-inhibeerdersias	57.56	705.10	38.37	470.00
3726 Activated protein C resistance • Geaktiveerde proteïen C-weerstandigheid	26	318.50	17.3	211.90
3727 Coagulation time • Stollingstyd	3.16	38.70	2.11	25.80
3728 Anti-factor Xa Activity • Anti-faktor Xa aktiwiteit	53.6	656.60	35.73	437.70
3729 Cold agglutinins • Koue agglutiniene	3.6	44.10	2.4	29.40
3730 Protein S: Functional • Proteïen S: Funksioneel	37.5	459.40	25	306.30
3731 Compatability for blood transfusion • Verenigingbaarheid vir bloedtransfusie	3.6	44.10	2.4	29.40
3734 Protein C (chromogenic) • Proteïen C (chromogenies)	30.29	371.10	20.19	247.30
3739 Erythrocyte count • Eritrosietelling	2.25	27.60	1.5	18.40
3740 Factors V and VII: Qualitative • Faktore V en VII: Kwalitatief	7.2	88.20	4.8	58.80
3741 Coagulation factor assay: functional • stollingsfaktor-essai: funksioneel	9.45	115.80	6.3	77.20
3742 Coagulation factor assay: Immunological • Stollings faktor-essais: Immunologies	4.5	55.10	3	36.80
3743 Erythrocyte sedimentation rate • Eritrosiet-besinkingsnelheid	2.5	30.60	1.67	20.50
3744 Fibrin stabilising factor (urea test) • Fibrin-Stabiliserende faktor (ureum oplosbaarheidstoets)	4.5	55.10	3	36.80
3746 Fibrin monomers • Fibrin monomere	2.7	33.10	1.8	22.10
3748 Plasminogen Activator Inhibitor (PAI-I) • Plasminogeen aktivator inhibitor (PAI-I)	65.95	807.90	43.97	538.60
3750 Tissue Plasminogen Activator (tPA) • Weefsel plasminogeen aktivator (tPA)	67.79	830.40	45.19	553.60
3751 Osmotic fragility (screen) • Osmotiese breekbaarheid (sifting)	2.25	27.60	1.5	18.40
3753 Osmotic fragility (before and after incubation) • Osmotiese breekbaarheidstoets (voor en na inkubasie)	18	220.50	12	147.00

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
3754 ABO Reverse Group ● ABO Terugwaartse groep	5.5	67.40	3.67	45.00
3755 Full blood count (including items 3739. 3762. 3783. 3785. 3791 ) ● Volbloedtelling (insluitende items 3739. 3762. 3783. 3785. 3791)	10.5	128.60	7	85.80
3756 Full cross match ● Volledige kruisverenigbaarheid	7.2	88.20	4.8	58.80
3757 Coagulation factors (quantitative) ● Stollingsfaktore (kwantitatief)	32.2	394.50	21.47	263.00
3758 Factor VIII related antigen ● Faktor VIII verwante antigeen	60.46	740.60	40.31	493.80
3759 Coagulation factor correction study ● Stollingsfaktor-korreksiestudies	11.72	143.60	7.81	95.70
3761 Factor XIII related antigen ● faktor XIII verwante antigeen	61.11	748.60	40.74	499.10
3762 Haemoglobin estimation ● Hemoglobienbepaling	1.8	22.10	1.2	14.70
3763 Contact activated product essay ● Kontakgeaktiveerde produk-essay	16.2	198.50	10.8	132.30
3764 Grouping: A- B- and O-antigens ● Groepering: A- B- en O-antigene	3.6	44.10	2.4	29.40
3765 Grouping; Rh antigens ● Groepering: Rh antigene	3.6	44.10	2.4	29.40
3766 PIVKA ● PIVKA	43.49	532.80	28.99	355.10
3767 Euglobulin lysis time ● Euglobienlisetyd	25.58	313.40	17.05	208.90
3768 Haemoglobin A2 (column chromatography) ● Hemoglobien A2 (kolom)	15	183.80	10	122.50
3769 HB Electrophoresis ● Hemoglobien elektroforese	26.82	328.50	17.88	219.00
3770 Haemoglobin-S (solubility test) ● Hemoglobien-S (oplosbaarheidstoets)	3.6	44.10	2.4	29.40
3773 Ham's acidified serum test ● Ham se aangesuurde serumtoets	8	98.00	5.3	64.90
3775 Heinz bodies ● Heinz-liggaampies	2.25	27.60	1.5	18.40
3776 Haemosiderin in urinary sediment ● Haemosiderien in uriensediment	2.25	27.60	1.5	18.40
3777 Heparin estimation ● Heparienbepaling	24.39	298.80	16.26	199.20
3781 Heparin tolerance ● Heparien toleransie	7.2	88.20	4.8	58.80
3783 Leucocyte differential count ● Leukosiet differensiële telling	6.2	76.00	4.15	50.80
3785 Leucocytes: total count ● Leukosiet: totale telling	1.8	22.10	1.2	14.70
3786 QBC malaria concentration and fluorescent staining ● QBC malaria konsentraat en fluoressensie kleuring	25	306.30	16.7	204.60
3787 LE-cells ● LE-selle	8.3	101.70	5.55	68.00
3789 Neutrophil alkaline phosphatase ● Neutrofiel alkaliese fosfatas	28	343.00	18.7	229.10
3791 Packed cell volume: Haematocrit ● Gepakte selvolume: Hematokrit	1.8	22.10	1.2	14.70
3792 Plasmodium falciparum: Monoclonal immunological identification ● Plasmodium flaciparum: Monoklonaal immunologiese identifikasie	9	110.30	6	73.50
3793 Plasma haemoglobin ● Plasma-hemoglobien	6.75	82.70	4.5	55.10
3794 Platelet Sensitivities ● plaatjie sensitiviteit	18.64	228.30	12.43	152.30
3795 Platelet aggregation per aggregant ● Plaatjieklomping per klomp	12.14	148.70	8.09	99.10
3796 Platelet antibodies: agglutination ● Plaatjie-antiliggame: agglutinasie	5.4	66.20	3.6	44.10
3797 Platelet count ● Plaatjetelling	2.25	27.60	1.5	18.40
3799 Platelet adhesiveness ● Plaatjieklewerigheid	4.5	55.10	3	36.80
3801 Prothrombin consumption ● Protrombiënverbruik	5.85	71.70	3.9	47.80
3803 Prothrombin determination (two stages) ● Protrombiënbeplating (twee stadia)	5.85	71.70	3.9	47.80
3805 Prothrombin index ● Protrombiëndeks	6	73.50	4	49.00
3806 Therapeutic drug level: Dosage ● Geneesmiddelvlak: Dosering	4.5	55.10	3	36.80
3807 Recalcification time ● Herkalsifiseringtyd	2.25	27.60	1.5	18.40
3809 Reticulocyte count ● Retikulosietelling	3	36.80	2	24.50
3811 Sickling test ● Sekelseltoets	2.25	27.60	1.5	18.40
3814 Sucrose lysis test for PNH ● Sukrose-lisetoets vir PNH	3.6	44.10	2.4	29.40

	Pathologist/ Patoloog		Other specialists and general practitioners/ Ander Spesialiste en Huisartse	
	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	258.50	14.07	172.40
3820 Thrombo-Elastogram ● Trombo-Elastogram	26	318.50	17.33	212.30
3825 Fibrinogen titre ● Fibrinogeen-titer	3.6	44.10	2.4	29.40
3829 Glucose 6-phosphate-dehydrogenase: Qualitative ● Glukose 6-fosfaat- dehidrogenase: Kwalitatief	8	98.00	5.33	65.30
3830 Glucose 6-phosphate-dehydrogenase: quantitative ● Glukose 6-fosfaat- dehidrogenase: kwantitatief.	16	196.00	10.7	131.10
3832 Red cell pyruvate kinase: quantitative ● Rooisel piruvaat kinase: kwantitatief	16	196.00	10.7	131.10
3834 Red cell Rhesus phenotype ● Rooisel Rhesus fenotiepe	9.9	121.30	6.6	80.90
3835 Haemoglobin F in blood smear ● Hemoglobien F in bloedsmeer	5.85	71.70	3.9	47.80
3837 Partial thromboplastin time ● Gedeeltelike tromboplastientyd	5.85	71.70	3.9	47.80
3841 Thrombin time (screen) ● Trombientyd (sifting)	7.16	87.70	4.77	58.40
3843 Thrombin time (serial) ● Trombientyd (reeks)	7.65	93.70	5.1	62.50
3847 Haemoglobin H ● Hemoglobien H	2.25	27.60	1.5	18.40
3851 Fibrin degeneration products (diffusion plate) ● Fibrin degenerasieprodukte (diffusieplaat)	10.35	126.80	6.9	84.50
3853 Fibrin degeneration products (latex slide) ● Fibrin degenerasie produkte (latex plaatjie)	4.5	55.10	3	36.80
3854 XDP (Dimer test or equivalent latex slide test) ● XDP (Dimer-toets of ekwivalente latex-plaatjietoets)	8.5	104.10	5.67	69.50
3855 Hemagglutination inhibition ● Hemagglutinasie inhibisie	9.9	121.30	6.6	80.90
3858 Heparin Removal ● heparin verwydering	28.88	353.80	19.25	235.80
<b>21.2 Microscopic examinations ● Mikroskopiese ondersoeke</b>				
3863 Autogenous vaccine ● Outogene vaksien	12.6	154.40	8.4	102.90
3864 Entomological examination ● Entomologiese ondersoek	20.7	253.60	13.8	169.10
3865 Parasites in blood smear ● Parasiete in bloedsmeer	5.6	68.60	3.73	45.70
3867 Miscellaneous (body fluids, urine, exudate, fungi, Pusscrappings, etc.) ● Diverse (liggaamsvog, urien, eksudaat, Skimmels, etterskrappings, ens)	4.9	60.00	3.3	40.40
3868 Fungus identification ● Fungus identifikasie	8.3	101.70	5.5	67.40
3869 Faeces (including parasites) ● Fekalieë (parasiete ingesluit)	4.9	60.00	3.27	40.10
3873 Transmission electron microscopy ● Transmissie elektronmikroskopie	85	1,041.30	57	698.30
3874 Scanning electron microscopy ● Skanderings-elektronmikroskopie	100	1,225.00	67	820.80
3875 Inclusion bodies ● Insluitingsliggaampie	4.5	55.10	3	36.80
3878 Crystal identification polarised light microscopy ● Kristal identifikasie gepolariseerde ligmikroskopie	4.5	55.10	3	36.80
3879 Compylobacter in stool: fastidious culture ● Campylobacter in feces: puntenerige kweking	9.9	121.30	6.6	80.90
3880 Antigen detection with polyclonal antibodies ● Antigene bespeuring met poliklonale antiligggame	4.5	55.10	3	36.80
3881 Mycobacteria ● Mikobakterie	3	36.80	2	24.50
3882 Antigen detection with monoclonal antibodies ● Antigenebespeuring met monoklonale antiligggame	10.8	132.30	7.2	88.20
3883 Concentration techniques for parasites ● Konsentrasie tegnieke vir parasiete	3	36.80	2	24.50
3884 Dark field, phase- or interference contrast microscopy. Nomarski or Fontana ● Donkerveld, fase- of interferensie-kontrasmikroskopie	6.3	77.20	4.2	51.50
3885 Cytochemical stain ● Sitochemiese kleuring	5.45	66.80	3.65	44.70

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
<b>21.3 Bacteriology (culture and biological examination) • Bakteriologie (kweking en biologiese ondersoek)</b>				
3886 Antibiotic MIC per organism per antibiotic • Antibiotikum MIK per organisme per antibiotikum	43.2	529.20	28.6	350.40
3887 Antibiotic susceptibility test. per organism • Antibiotikum gevoeligheidstoets per organisme	8	98.00	5.33	65.30
3889 Clostridium difficile toxin: Monoclonal immunological • Clostridium difficile toksien: Monoklonaal immunologies.	12.4	151.90	8.27	101.30
3890 Antibiotic assay of tissues and fluids • Antibiotikum-essai vir weefsels en	13.9	170.30	9.27	113.60
3891 Blood culture: aerobic • Bloedkweking: aerobies	5.85	71.70	3.9	47.80
3892 Blood culture: anaerobic • Bloedkweking: anaerobies	5.85	71.70	3.9	47.80
3893 Bacteriological culture: miscellaneous • Bakteriologiese kweking: diverse	6.3	77.20	4.2	51.50
3894 Radiometric blood culture • Radiometriese bloedkweking	10.8	132.30	7.2	88.20
3895 Bacteriological culture: fastidious organisms • Bakteriologiese kweking: puntenerige organisme	9.9	121.30	6.6	80.90
3896 In vivo culture: bacteria • In vivo kweking: bakterie	16	196.00	10.65	130.50
3897 In vivo culture: virus • In vivo kweking: virus	16	196.00	10.65	130.50
3898 Bacterial exotoxin production (in vitro assay) • Bakteriiese eksotoksien produksie (in vitro essai)	4.5	55.10	3	36.80
3899 Bacterial exotoxin production (in vivo assay) • Bakteriiese eksotoksien produksie (in vivo essai)	20.7	253.60	13.8	169.10
3901 Fungal culture • Fungus-kweking	4.5	55.10	3	36.80
3903 Antibiotic level: biological fluids • Antibiotikum vlak: biologiese vog	11.7	143.30	7.8	95.60
3905 Identification of virus or rickettsia • Identifikasie van virus of rickettsia	20.7	253.60	13.8	169.10
3906 Identification: chlamydia • Identifikasie: chlamidia	16	196.00	10.65	130.50
3907 Culture for staphylococcus aureus • Kweking vir stafiliokokkus aureus	2.25	27.60	1.5	18.40
3908 Anaerobic culture: comprehensive • Anaerobiese kweking: omvattend	9.9	121.30	6.6	80.90
3909 Anaerobic culture: limited procedure • Anaerobiese kweking: beperkte prosedure	4.5	55.10	3	36.80
3915 Mycobacterium culture • Mikobakterie kweking	4.5	55.10	3	36.80
3917 Mycoplasma culture: limited • Mikoplasma kweking beperk	2.25	27.60	1.5	18.40
3918 Mycoplasma culture: comprehensive • Mikoplasma kweking: omvattend	9.9	121.30	6.6	80.90
3919 Identification of mycobacterium • Identifikasie van mikobakterie	9.9	121.30	6.6	80.90
3920 Mycobacterium: antibiotic sensitivity • Mikobakterie: antibiotikumsensitiwiteit	9.9	121.30	6.6	80.90
3921 Antibiotic synergistic study • Ondersoek vir sinergisme van antibiotiese	20.7	253.60	13.8	169.10
3922 Viable cell count • Lewendeseltelling	1.35	16.50	0.9	11.00
3923 Biochemical ident of bacterium: abridged • Biochemiese ident van bakterie	3.15	38.60	2.1	25.70
3924 Biochemical ident of bacterium: extended • Biologiese ident van bakterie: omvattend	12.5	153.10	8.33	102.00
3925 Serological ident of bacterium: abridged • Serologiese ident van bakterie: verkort	3.15	38.60	2.1	25.70
3926 Serological ident of bacterium: extended • Serologiese ident van bakterie: omvattend	10.2	125.00	6.8	83.30
3927 Grouping of streptococci • Streptokokkus groepering	7.3	89.40	4.85	59.40
3928 Antimicrobial substances • Antimikrobiiese substansies	3.8	46.60	2.5	30.60
3929 Radiometric mycobacterium identification • Radiometriese mikobakterie identifikasie	14	171.50	9.3	113.90
3930 Radiometric mycobacterium antibiotic sensitivity • Radiometriese mikobakterie antibiotiese sensitiwiteit	25	306.30	16.7	204.60



	Pathologist/ Patoloog		Other specialists and general practitioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
4652 Rapid automated bacterial identification per organism • Vinnige geoutomatiseerde bakteriële identifikasie per organisme	15	183.80	10	122.50
4653 Rapid automated antibiotic susceptibility per organism • Vinnige geoutomatiseerde antibiotikum gevoeligheid per organisme	17	208.30	11.33	138.80
4654 Rapid automated MIC per organism per antibiotic • Vinnige geoutomatiseerde MIK per organisme per antibiotikum	17	208.30	11.33	138.80
4655 Mycobacteria: MIC determination - E Test • Mikobakterie: MIK bepaling - E Toets	16.50	202.10	11.00	134.80
4656 Mycobacteria: Identification HPLC • Mikobakterie: Identifikasie HPLC	35.00	428.80	23.33	285.80
4657 Mycobacteria: Liquefied, concentrated, fluorochrome stain • Mikobakterie: Vervloeiide, gekonsentreerde flurochromiese kleuring	9.90	121.30	6.60	80.90
<b>21.4 Serology • Serologie</b>				
3933 IgE: Total; EMIT or ELISA • IgE: Totaal; EMIT of ELISA	11.7	143.30	7.8	95.60
3934 Auto antibodies by labelled antibodies • Auto-antiligggame deur gemerkte antiligggame	16	196.00	10.65	130.50
3938 Precipitin test per antigen • Presipitasie toets per antigeen	4.5	55.10	3	36.80
3939 Agglutination test per antigen • Agglutinasietoets per antigeen	5.5	67.40	3.67	45.00
3940 Haemagglutination test: per antigen • Haemagglutinasietoets: per antigeen	9.9	121.30	6.6	80.90
3941 Modified Coombs' test for brucellosis • Gewysigde Coombs-toets vir brucellose	4.5	55.10	3	36.80
3942 Hepatitis Rapid Viral Ab • Hepatitis Virus AI - spoedmetode	12.24	149.90	8.16	100.00
3943 Antibody titer to bacterial exotoxin • Antiligggame titer teen bakteriese eksotoksien	3.6	44.10	2.4	29.40
3944 IgE: Specific antibody titer: ELISA/EMIT: per Ag • IgE: spesifieke antiligggame titer: ELISA/EMIT: per Ag	12.4	151.90	8.27	101.30
3945 Complement fixation test • Komplementbindingstoets	5.85	71.70	3.9	47.80
3946 IgM: Specific antibody titer: ELISA or EMIT: per Ag • IgM: Spesifieke antiligggame titer: ELISA/EMIT: per Ag	14.05	172.10	9.37	114.80
3947 C-reactive protein • C-reaktiewe proteïen	3.6	44.10	2.4	29.40
3948 IgG: Specific antibody titer: ELISA/EMIT: per Ag • IgG: Spesifieke antiligggame titer: ELISA/EMIT: per Ag	12.95	158.60	8.63	105.70
3949 Qualitative Kahn. VDRL or other flocculation • Kwalitatiewe Kahn. VDRL of ander flokkulasie	2.25	27.60	1.5	18.40
3950 Neutrophil phagocytosis • Neutrofiel-fagositose	25.2	308.70	16.8	205.80
3951 Quantitative Kahn. VDRL or other flocculation • Kwantitatiewe Kahn. VDRL of ander flokkulasie	3.6	44.10	2.4	29.40
3952 Neutrophil chemotaxis • Neutrofiel-chemotakse	67.95	832.40	45.3	554.90
3953 Tube agglutination test • Buise agglutinasietoets	4.15	50.80	2.76	33.80
3955 Paul Bunnell: presumptive • Paul Bunnell: vermoedelik	2.25	27.60	1.5	18.40
3956 Infectious Mononucleosis latex slide test (Monospot or equivalent) • Infektiewe Mononukleose latex-plaatjetoets (Monospot of ekwivalent)	8.5	104.10	5.67	69.50
3957 Paul Bunnell: Absorption • Paul Bunnell: Absorpsie	4.5	55.10	3	36.80
4601 Panel typing: Antibody detection: Class 1 • Paneeltipering: Antiligggame opsporing: Klas 1	36	441.00	24	294.00
4602 Panel typing: Antibody detection: Class II • Paneeltipering: Antiligggame opsporing: Klas II	44	539.00	29.3	358.90
4607 Cross matching T-cells (per tray) • Kruispassing T-selle (per blad)	18	220.50	12	147.00
4608 Cross matching B-cells • Kruispassing B-selle	38	465.50	25.3	309.90
4609 Cross matching T- & B-cells • Kruispassing T- & B-selle	48	588.00	32	392.00
4610 Helicobacter pylori antigen test • Helikobakter pylori stoelgang antigeen	34.6	423.90	23.07	282.60
4613 Anti-Gm1 Antibody Assay • Anti Gm1 AI bepaling	75	918.80	50	612.50

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
4614 HIV Ab - Rapid Test ● MIV AI - spoedmetode	12	147.00	8	98.00
3959 Rose Waaler Agglutination test ● Rose Waaler agglutinasietoet.	4.5	55.10	3	36.80
3961 Slide agglutination test ● Voorwerpglas-agglutinasietoets	2.63	32.20	1.75	21.40
3962 Rebeck skin window ● Rebeck-huidvenster	5.4	66.20	3.6	44.10
3963 Serum complement level: each component ● Serum komplement vlak: per komponent	3.15	38.60	2.1	25.70
3967 Auto-antibody: Sensitised erythrocytes ● Outo-antiliggame:	4.5	55.10	3	36.80
3969 Western blot technique ● Western klad tegniek	74	906.50	49	600.30
3970 Epstein-Barr virus antibody titer ● Epstein-Barr virus antiliggaam titer	6.75	82.70	4.5	55.10
3971 Immuno-diffusion test: per antigen ● Immuno-diffusie toets: per antigeen	3.15	38.60	2.1	25.70
3973 Immuno electrophoresis: per immune serum ● Immuno-elektroforese: per immuunserum	9.45	115.80	6.3	77.20
3975 Indirect immuno-fluorescence test (Bacterial, viral, parasitic) ● Indirekte immuno fluoressensietoets (Bakterieel, viraal, parasitêr)	12	147.00	8	98.00
3977 Counter immuno-electrophoresis ● Kontra immuno-elektroferese	6.75	82.70	4.5	55.10
3978 Lymphocyte transformation ● Limfosien-transformasie	51.7	633.30	34.5	422.60
3980 Bilharzia Ag Serum/Urine ● Bilharzia Ag Serum/Urine	14.5	177.60	9.67	118.50
<b>21.5 Skin test ● Huidtoetse:</b>				
For skin-prick allergy tests, please refer to items 0218 to 0221 in the Integumentary Section				
<b>21.6 Biochemical tests: Blood ● Blochemiese toetse: Bloed</b>				
3991 Abnormal pigments: qualitative ● Abnormale pigmente: kwalitatief	4.5	55.10	3	36.80
3993 Abnormal pigments: quantitative ● Abnormale pigmente: kwantitatief	9	110.30	6	73.50
3995 Acid phosphatase ● Suurfosfatase	5.18	63.50	3.45	42.30
3996 Serum Amyloid A ● Serum Amiloied A	8.28	101.40	5.52	67.60
3997 Acid phosphatase fractionation ● Suurfosfatase fraksionasie	1.8	22.10	1.2	14.70
3998 Amino acits: Quantitative (Post derivatisation HPLC) ● Aminosure: Kwantitatief (Post derivatisering HDVC)	78.12	957.00	52.08	638.00
3999 Albumin ● Albumien	4.8	58.80	3.2	39.20
4000 Alcohol ● Alkohol	12.4	151.90	8.27	101.30
4001 Alkaline phosphatase ● Alkaliese fosfatase	5.18	63.50	3.45	42.30
4002 Alkaline Phosphatase-iso-enzymes ● Alkaliese fosfatase-iso-ensiem	11.7	143.30	7.8	95.60
4003 Ammonia: enzymatic ● Ammoniak: ensiematies	7.71	94.40	5.14	63.00
4004 Ammonia: monitor ● Ammoniak: monitor	4.5	55.10	3	36.80
4005 Alpha-1-antitrypsin ● Alfa-1-antitripsien	7.2	88.20	4.8	58.80
4006 Amylase ● Amilase	5.18	63.50	3.45	42.30
4007 Arsenic in blood, hair or nails ● Arseen in bloed, hare of naels	36.25	444.10	24.17	296.10
4008 Bilirubin - Reflectance ● Bilirubien reflektansie	4.77	58.40	3.18	39.00
4009 Bilirubin: total ● Bilirubien: totaal	4.77	58.40	3.18	39.00
4010 Bilirubin: conjugated ● Bilirubien: gekonjugeerd	3.62	44.30	2.41	29.50
4014 Cadmium: atomic absorp ● Kadmium: atoomabsorpsies	18.12	222.00	12.08	148.00
4016 Calcium: Ionized / Kalsium: Geïoniseerd	6.75	82.70	4.5	55.10
4017 Calcium: spectrophotometric ● Kalsium spektrofotometrie	3.62	44.30	2.41	29.50
4018 Calcium: atomic absorption ● Kalsium: atoomabsorpsie	7.25	88.80	4.83	59.20
4019 Carotene ● Karoteen	2.25	27.60	1.5	18.40
4023 Chloride ● Chloried	2.59	31.70	1.73	21.20

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
4029 Cholinesterase: serum or erythrocyte: each • Cholinesterase: serum of rooisel: elk	7.48	91.60	4.99	61.10
4030 Cholinesterase phenotype (Dibucaine or fluoride each) • Cholinesterase fenotipe (Dibucaine of fluoried elk)	9	110.30	6	73.50
4031 Total CO <sub>2</sub> • Totale CO <sub>2</sub>	5.18	63.50	3.45	42.30
4032 Creatinine • Kreatinien	3.62	44.30	2.41	29.50
4035 CSF-Albumin • SSV Albumien	9.45	115.80	6.3	77.20
4036 CSF-IgG Index • SSV IgG Indeks	22.05	270.10	14.7	180.10
4040 Homocysteine (random) • Homosistein (lukraak)	15.3	187.40	10.2	125.00
4041 Homocysteine (after Methionine load) • Homosistein (na Metionien-lading)	18.1	221.70	12.06	147.70
4042 D-Xylose absorption test: two hours • D-Xylose absorpsietoets twee uur	13.15	161.10	8.75	107.20
4045 Fibrinogen: quantitative • Fibrinogeen: kwantitatief	3.6	44.10	2.4	29.40
4047 Hollander test • Hollander se toets	24.75	303.20	16.5	202.10
4049 Glucose tolerance test (2 specimens) • Glukose toleransietoets (2 monsters)	8.97	109.90	5.98	73.30
4050 Glucose strip-test with photometric reading • Glukose strokietoets met fotometriese lesing	1.8	22.10	1.2	14.70
4051 Galactose • Galaktose	11.25	137.80	7.5	91.90
4052 Glucose tolerance test (3 specimens) • Glukose toleransietoets (3 monsters)	13.17	161.30	8.78	107.60
4053 Glucose tolerance test (4 specimens) • Glukose toleransietoets (4 monsters)	17.37	212.80	11.58	141.90
4057 Glucose Quantitative • Glukose Kwantitatief	3.62	44.30	2.41	29.50
4061 Glucose tolerance test (5 specimens) • Glukose toleransietoets (5 monsters)	21.56	264.10	14.37	176.00
4063 Fructosamine • Fruktosamine	7.2	88.20	4.8	58.80
4064 Glycated haemoglobin: chromatography / HbA1C • Geglikosileerde hemoglobien: chromatografie / HbA1C	14.25	174.60	9.5	116.40
4067 Lithium: flame ionisation • Litium: vlam ionisasie	5.18	63.50	3.45	42.30
4068 Lithium: atomic absorption • Litium: atoomabsorpsie	7.48	91.60	4.99	61.10
4071 Iron • Yster	6.75	82.70	4.5	55.10
4073 Iron-binding capacity • Ysterbindingsvermoë	7.65	93.70	5.1	62.50
4076 Blood gases: Astrup/pO <sub>2</sub> and ancillary tests - can only be charged to a maximum of 6 times per patient per day • Bloedgasse: Astrup/pO <sub>2</sub> en bykomende toetse - kan slegs tot 'n maksimum van 6 maal per pasient per dag gehew word	19.1	234.00	12.73	155.90
4078 Oximetry analysis: MetHb, COHb, O <sub>2</sub> Hb, RHb, SulfHb • Oksimetrie analyse: MetHb, COHb, O <sub>2</sub> Hb, RHb, SulfHb	6.75	82.70	4.5	55.10
4079 Ketones in plasma: qualitative • Ketone in plasma: kwalitatief	2.25	27.60	1.5	18.40
4081 Drug level-biological fluid: Quantitative • Middel vlak-biologiese vogel: kwantitatief	10.8	132.30	7.2	88.20
4085 Lipase • Lipase	5.18	63.50	3.45	42.30
4091 Lipoprotein electrophoresis • Lipoproteien-elektroferese	9	110.30	6	73.50
4093 Osmolality: serum or urine • Osmolaliteit: serum of urien	6.75	82.70	4.5	55.10
4094 Magnesium: spectrophotometric • Magnesium: spektrofotometries	3.62	44.30	2.41	29.50
4095 Magnesium: atomic absorption • Magnesium: atoomabsorpsie	7.25	88.80	4.83	59.20
4096 Mercury: atomic absorption • Kwik: atoomabsorpsie	18.12	222.00	12.08	148.00
4098 Copper: atomic absorption • Koper: atoomabsorpsie	18.12	222.00	12.08	148.00
4105 Protein electrophoresis • Proteien-elektroferese	9	110.30	6	73.50
4106 IgG sub-class 1.2. 3 or 4: Per sub-class • IgG subklas 1.2. 3 of 4: Per subklas	20	245.00	13.2	161.70
4109 Phosphate • Fosfaat	3.62	44.30	2.41	29.50

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
4111 Phospholipids • Fosfolipiede	3.15	38.60	2.1	25.70
4113 Potassium • Kalium	3.62	44.30	2.41	29.50
4114 Sodium • Natrium	3.62	44.30	2.41	29.50
4117 Protein: total • Proteïen: totaal	3.11	38.10	2.07	25.40
4121 pH. pCO <sub>2</sub> or pO <sub>2</sub> each • pH. pCO <sub>2</sub> of pO <sub>2</sub> : elk	6.75	82.70	4.5	55.10
4123 Pyruvic acid • Pirodruivesuur	4.5	55.10	3	36.80
4125 Salicylates • Sallsitate	4.5	55.10	3	36.80
4126 Secretin-pancreozymin responds • Sekretien-pankreasimien-respons	26.1	319.70	17.4	213.20
4127 Caeruloplasmin • Seruloplasmin	4.5	55.10	3	36.80
4128 Phenylalannine: Quantitative Fenielalanien: kwantitatief	11.25	137.80	7.5	91.90
4129 Glutamate dehydrogenase (GDH) • Glutamaat dehydrogenase (GDH)	5.4	66.20	3.6	44.10
4130 Aspartate amino transferase (AST) • Aspartaat amino transferase (AST)	5.4	66.20	3.6	44.10
4131 Alanine amino transferase (ALT) • Alanien amino transferase (ALT)	5.4	66.20	3.6	44.10
4132 Cretine kinase (CK) • Kreatien kinase (CK)	5.4	66.20	3.6	44.10
4133 Lactate dehydrogenase (LD) • Laktaat dehydrogenase (LD)	5.4	66.20	3.6	44.10
4134 Gamma glutamyl transferase (GGT) • Gamma glutamiel transferase (GGT)	5.4	66.20	3.6	44.10
4135 Aldolase • Aldolase	5.4	66.20	3.6	44.10
4136 Angiotensin converting enzyme (ACE) • Anglotensien omskakelingsensiem (ACE)	9	110.30	6	73.50
4137 Lactate dehydrogenase isoenzyme • Laktaat dehydrogenase isoensiem	10.8	132.30	7.2	88.20
4138 CK-MB: immunoinhibition/precipitation • CK-MB: immunoinhibisie / presipetasie	10.8	132.30	7.2	88.20
4139 Adenosine deaminase • Adenosien deaminase	5.4	66.20	3.6	44.10
4142 Red cell enzymes: each • Rooiselsensieme: elk	7.8	95.60	5.2	63.70
4143 Serum/plasma enzymes: each • Serum/plasma ensieme: elk	5.4	66.20	3.6	44.10
4144 Transferrin • Transferrien	11.7	143.30	7.8	95.60
4146 Lead: atomic absorption • Lood: atoomabsorpsie.	15	183.80	10	122.50
4151 Urea • Ureum	3.62	44.30	2.41	29.50
4154 Myoglobin quantitative: Monoclonal immunological • Mioglobien kwantitatief: Monoklonaal immunologies	12.4	151.90	8.27	101.30
4155 Uric acid • Uriensuur	3.78	46.30	2.52	30.90
4157 Vitamin A-saturation test • Vitamien A-versadigingstoets	15.3	187.40	10.2	125.00
4158 Vitamin E (tocopherol) • Vitamien E (tokoferol)	3.6	44.10	2.4	29.40
4159 Vitamin A • Vitamien A	6.3	77.20	4.2	51.50
4160 Vitamin C (ascorbic acid) • Vitamien C (askorbiensuur)	2.25	27.60	1.5	18.40
4171 Sodium + potassium + chloride + CO <sub>2</sub> + urea • Natrium + kalium + chloried + CO <sub>2</sub> + ureum	15.84	194.00	10.56	129.40
4172 ELIZA or EMIT technique • ELIZA of EMIT tegniek	12.42	152.10	8.28	101.40
4181 Quant protein estimation: Mancini method • Kwant proteïen bepaling: Mancini metode	7.76	95.10	5.17	63.30
4182 Quant protein estimation: nephelometer • Kwant proteïen bepaling: nefelometer	8.28	101.40	5.52	67.60
4183 Quant protein estimation: labelled antibody • Kwant proteïen bepaling: gemerkte antiliggzaam	12.42	152.10	8.28	101.40
4185 Lactose • Laktose	10.8	132.30	7.2	88.20
4187 Zinc: atomic absorption • Sink: atoomabsorpsie	18.12	222.00	12.08	148.00

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
<b>21.7 Biochemical tests: Urine • Biochemiese toets: uriene</b>				
4188 Urine dipstick, per stick (irrespective of the number of tests on stick) • Urien doopstrok, per strok (ongeg die aantal toetse op die strok)	1.5	18.40	1	12.30
4189 Abnormal pigments • Abnormale pigmente	4.5	55.10	3	36.80
4193 Alkapton test: homogentisic acid • Alkapton toets: homogentisien-suur	4.5	55.10	3	36.80
4194 Amino acids: quantitative (Post derivatisation HPLC) • Aminosure: kwantitatief (Post derivatisering HDVC)	78.12	957.00	52.08	638.00
4195 Amino laevulinic acid • Aminolevulien-suur	18	220.50	12	147.00
4197 Amylase • Amilase	5.18	63.50	3.45	42.30
4199 Ascorbic acid • Askorbiensuur	2.25	27.60	1.5	18.40
4201 Bence-Jones protein • Bence-Jones proteïen	2.7	33.10	1.8	22.10
4203 Phenol • Fenol	3.6	44.10	2.4	29.40
4204 Calcium: atomic absorption • Kalsium: atoomabsorpsie	7.25	88.80	4.83	59.20
4205 Calcium: spectrophotometric • Kalsium: spektrofotometries	3.62	44.30	2.41	29.50
4206 Calcium: absorption and excretion studies • Kalsium: absorpsie en ekskresie studies	25	306.30	16.7	204.60
4209 Lead: atomic absorption • Lood: atoom absorpsie	15	183.80	10	122.50
4211 Bile pigments: qualitative • Galpigmente: kwalitatief	2.25	27.60	1.5	18.40
4213 Protein: quantitative • Proteïen: kwantitatief	2.25	27.60	1.5	18.40
4216 Mucopolysaccharides: qualitative • Mukopolisakkariede: kwalitatief	3.6	44.10	2.4	29.40
4217 Oxalate/Citrate: enzymatic each • Oksalaat/Sitraat: ensiematies elk	9.38	114.90	6.25	76.60
4218 Glucose: quantitative • Glukose: kwantitatief	2.25	27.60	1.5	18.40
4219 Steroids: chromatography (each) • Steroïede: chromatografie (elk)	7.2	88.20	4.8	58.80
4221 Creatinine • Kreatinien	3.62	44.30	2.41	29.50
4223 Creatinine clearance • Kreatinien-opruiming	7.65	93.70	5.1	62.50
4227 Electrophoreses: qualitative • Elektroforese: kwalitatief	4.5	55.10	3	36.80
4229 Uric acid clearance • uriensuuropruiming	7.65	93.70	5.1	62.50
4231 Metabolites HPLC (High Pressure Liquid Chromatography)/Metaboliete HDVC (Hoë Druk Vloeistof Chromatografie)	37.50	459.40	25.00	306.30
4232 Metabolites (Gaschromatography/Mass spectrophotometry)/Metaboliete (Gaschromatografie/massa spektrofotometrie)	46.80	573.30	31.20	382.20
4233 Pharmacological/Drugs of abuse: Metabolites HPLC (High Pressure Liquid Chromatography)/Farmakologiese/Gewoontevormende middels: Metaboliete HDVC (Hoë Druk Vloeistof Chromatografie)	37.50	459.40	25.00	306.30
4234 Pharmacological/Drugs of abuse: Metabolites (Gaschromatography/Mass spectrophotometry)/Farmakologiese/Gewoontevormende middels: Metaboliete (Gaschromatografie/massa spektrofotometrie)	46.80	573.30	31.20	382.20
4237 5-Hydroxy-indole-acetic acid: screen test • 5-Hidroksie-indolasynsuur: siftingstoets	2.7	33.10	1.8	22.10
4239 5-Hydroxy-indole-acetic acid: quantitative • 5-Hidroksie-indolasynsuur: kwantitatief	6.75	82.70	4.5	55.10
4241 Indican or indole: qualitative • Indikan of indool: kwalitatief	3.15	38.60	2.1	25.70
4247 Ketones: excluding dip-stick method • Ketone: dompelstrokiemetode uitgesluit	2.25	27.60	1.5	18.40
4248 Reducing substances • Reduserende stowwe	1.8	22.10	1.2	14.70
4251 Metanephrines: column chromatography • metanefriene: kolom chromatografie	22.05	270.10	14.7	180.10

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
4253 Aromatic amines (gas chromatography/mass spectrophotometry) • Aromatiese amiene (gas chromatografie / massaspektrofotometrie)	27	330.80	18	220.50
4254 Nitrosonaphtol test for tyrosine • Nitroso-nafto-toets vir tirosien	2.25	27.60	1.5	18.40
4262 Micro Albumin-Qualitative • Mikroalbumien Kwalitatief	4.5	55.10	3	36.80
4263 pH: Excluding dip-stick method • pH: Dompelstrokiemetode uitgeslote	0.9	11.00	0.6	7.40
4265 Thin layer chromatography: one way • Dunlaag chromatografie: enkelrigting	6.75	82.70	4.5	55.10
4266 Thin layer chromatography: two way • Dunlaag chromatografie: tweerigting	11.25	137.80	7.5	91.90
4267 Total organic matter screen: Infrared • Totale organiese materiaal sifting: Infrarooi	31.25	382.80	20.83	255.20
4268 Organic acids: quantitative: GCMS • Organiese sure: kwantitatief: GCMS	109.38	1,339.90	72.92	893.30
4269 Phenylpyruvic acid: ferric chloride • Fenielpiroduiwesuur: ferrichloried	2.25	27.60	1.5	18.40
4271 Phosphate excretion index • Fosfaat uitskeidings indeks	22.05	270.10	14.7	180.10
4272 Porphobilinogen qualitative screen: urine • Porfobilinogeen kwalitatiewe sifting: urien	5	61.30	3.33	40.80
4273 Porphobilinogen/ALA: quantitative each • Porfobilinogeen/ALS kwantitatief elk	15	183.80	10	122.50
4283 Magnesium: spectrophotometric • Magnesium: spektrofotometries	3.62	44.30	2.41	29.50
4284 Magnesium: atomic absorption • Magnesium: atoomabsorpsie	7.25	88.80	4.83	59.20
4285 Identification of carbohydrate • Identifikasie van koolhidrate	7.65	93.70	5.1	62.50
4287 Identification of drug: qualitative • Identifikasie van geneesmiddel: kwalitatief	4.5	55.10	3	36.80
4288 Identification of drug: quantitative • Identifikasie van geneesmiddel: kwantitatief	10.8	132.30	7.2	88.20
4293 Urea clearance • Ureum opruiming	5.4	66.20	3.6	44.10
4297 Copper: spectrophotometric • Koper: spektrofotometries	3.62	44.30	2.41	29.50
4298 Copper: Atomic absorption • Koper: atoomabsorpsie	18.12	222.00	12.08	148.00
4300 Indican or Indole: Qualitative • Indikan of Indool: Kwalitatief	3.15	38.60	2.1	25.70
4301 Chloride • Chloried	2.59	31.70	1.73	21.20
4307 Ammonium chloride loading test • Ammoniumchloried-ladingstoets	22.05	270.10	14.7	180.10
4309 Urobilinogen: quantitative • Urobilinogeen: kwantitatief	6.75	82.70	4.5	55.10
4313 Phosphates • Fosfaat	3.62	44.30	2.41	29.50
4315 Potassium • Kalium	3.62	44.30	2.41	29.50
4316 Sodium • Natrium	3.62	44.30	2.41	29.50
4319 Urea • Ureum	3.62	44.30	2.41	29.50
4321 Uric acid • Uriensuur	3.62	44.30	2.41	29.50
4322 Fluoride • Fluoried	5.18	63.50	3.45	42.30
4323 Total protein and protein electrophoreses • Totale proteïen en proteïenelektroforese.	11.25	137.80	7.5	91.90
4325 VMA: quantitative • VMA: kwantitatief	11.25	137.80	7.5	91.90
4327 Immunofixation: Total Protein, IgG, IgA, IgM, Kappa, Lambda • Immunofiksasie: Totale proteïen, IgG, IgA, IgM, Kappa, Lambda	46.88	574.30	31.25	382.80
4335 Cystine: quantitative • Sistien: kwantitatief	12.6	154.40	8.4	102.90
4336 Dinitrophenal hydrazine test: ketoacids • Dinitrofenol-hidrasientoets vir ketosure	2.25	27.60	1.5	18.40
4337 Hydroxyproline: quantitative • Hidroksieprolien: kwantitatief	18.9	231.50	12.6	154.40

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
<b>21.8 Biochemical tests: Faeces • Biochemiese toetse: Fekalieë</b>				
4339 Chloride • Chloried	2.59	31.70	1.73	21.20
4343 Fat: qualitative • Vet: kwalitatief	3.15	38.60	2.1	25.70
4345 Fat: quantitative • Vet: kwantitatief	22.05	270.10	14.7	180.10
4347 pH • pH	0.9	11.00	0.6	7.40
4351 Occult blood: chemical test • Okkulte bloed: chemiese toets	2.25	27.60	1.5	18.40
4352 Occult blood (monoclonal antibodies) • Okkulte bloed (monoklonale antiligggame)	10	122.50	6.67	81.70
4357 Potassium • Kalium	3.62	44.30	2.41	29.50
4358 Sodium • Natrium	3.62	44.30	2.41	29.50
4361 Stercobilin • Sterkobilien	2.25	27.60	1.5	18.40
4363 Stercobilinogen: quantitative • Sterkobilinogeen: kwantitatief	6.75	82.70	4.5	55.10
<b>21.9 Biochemical tests: Miscellaneous • Biochemiese toetse: Diverse</b>				
4371 Amylase in exudate • Amilase in eksudaat	5.18	63.50	3.45	42.30
4374 Trace metals in biological fluid: Atomic absorption • Spooorelemente in biologiese vog: atoomabsorpsie	18.13	222.10	12.08	148.00
4375 Calcium in fluid: Spectrophotometric • Kalsium in vog: Spektrofotometries	3.62	44.30	2.41	29.50
4376 Calcium in fluid: Atomic absorption • Kalsium in vog: Atoomabsorpsie	7.25	88.80	4.83	59.20
4388 Gastric contents: Maximal stimulation • Maaginhoud: Maksimum stimulasietoets	27	330.80	18	220.50
4389 Gastric fluid: Total acid per specimen • Maagsap: Totale suur per monster	2.25	27.60	1.5	18.40
4391 Renal calculus: Chemistry • Niersteen: Chemiese ontleding	5.4	66.20	3.6	44.10
4392 Renal calculus: Crystallography • Niersteen: Kristallografie	16.25	199.10	10.8	132.30
4393 Saliva: Potassium • Speeksel: Kalium	3.62	44.30	2.41	29.50
4394 Saliva: Sodium • Speeksel: Natrium	3.62	44.30	2.41	29.50
4395 Sweat: Sodium • Sweet: Natrium	3.62	44.30	2.41	29.50
4396 Sweat: Potassium • Sweet: Kalium	3.62	44.30	2.41	29.50
4397 Sweat: Chloride • Sweet: Chloried	2.59	31.70	1.73	21.20
4399 Sweat collection by iontophoresis (excluding collection material) • Sweetkolleksie deur iontoforese (kolleksie materiaal uitgesluit)	4.5	55.10	3	36.80
4400 Tryptophane loading test • Triptofaanladingstoets	22.05	270.10	14.7	180.10
<b>21.10 Cerebrospinal fluid • Serebro spinale vog</b>				
4401 Cell count • Seltelling	3.45	42.30	2.3	28.20
4407 Cell count, protein, glucose and chloride • Seltelling, proteïen, glukose en chloried	7.65	93.70	5.1	62.50
4409 Chloride • Chloried	2.59	31.70	1.73	21.20
4415 Potassium • Kalium	3.62	44.30	2.41	29.50
4416 Sodium • Natrium	3.62	44.30	2.41	29.50
4417 Protein: Qualitative • Proteïen: Kwalitatief	0.9	11.00	0.6	7.40
4419 Protein: Quantitative • Proteïen: Kwantitatief	3.11	38.10	2.07	25.40
4421 Clucose • Glukose	3.62	44.30	2.41	29.50
4423 Urea • Ureum	3.62	44.30	2.41	29.50
4425 Protein electrophoresis • Proteïenelektroforese	12.6	154.40	8.4	102.90

	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
<b>21.12 Isotopes • Isotope</b>				
4458 Micro-albuminuria: radio-isotope method • Mikro-albuminurie: radio-isotoop metode	12.42	152.10	8.28	101.40
4459 Acetyl choline receptor antibody • Asetielcholien reseptor antiliggam	158.12	1,937.00	105.41	1,291.30
4463 C6 complement functional essay • C6 komplement funksionele bepaling	45	551.30	30	367.50
4466 Beta-2-microglobulin • Beta-2-mikroglobulien	12.42	152.10	8.28	101.40
4452 Bone-Specific Alk. Phosphatase • Been alkaliese fosfatase	20	245.00	13.33	163.30
4479 Vitamin B12-absorption: Shilling test • Vitamien B12-absorpsie: Shillingtoets	11.7	143.30	7.8	95.60
4480 Serotonin • Serotonien	18.75	229.70	12.5	153.10
4482 Free thyroxine (FT4) • Vry tiroksien (FT4)	17.48	214.10	11.65	142.70
4485 Insulin • Insulien	12.42	152.10	8.28	101.40
4491 Vitamin B12 • Vitamien B12	12.42	152.10	8.28	101.40
4493 Drug concentration: quantitative • Middekkonsentrasie: kwantitatief	12.42	152.10	8.28	101.40
4497 Carbohydrate deficient transferrin • Koolwaterstof-gebrekkige transferrien	29.06	356.00	19.37	237.30
4499 Cortisol • Kortisol	12.42	152.10	8.28	101.40
4500 DHEA sulphate • DHEA-sulfaat	12.42	152.10	8.28	101.40
4507 Thyrotropin (TSH) • Tirotropien (TSH)	19.6	240.10	13.07	160.10
4509 Free tri-iodothyronine (FT3) • Vry trijodotironien (FT3)	17.48	214.10	11.65	142.70
4511 Renin activity • Renien aktiwiteit	18.9	231.50	12.6	154.40
4516 Follitropin (FSH) • Follitropien (FSH)	12.42	152.10	8.28	101.40
4517 Lutropin (LH) • Lutropien (LH)	12.42	152.10	8.28	101.40
4522 Alpha-Feto protein • Alfa-fetoproteïen	12.42	152.10	8.28	101.40
4523 ACTH • AKTH	21.74	266.30	14.49	177.50
4524 Free PSA • Vry PSA	14.49	177.50	9.66	118.30
4527 Gastrin • Gastrien	12.42	152.10	8.28	101.40
4528 Ferritin • Ferritien	12.42	152.10	8.28	101.40
4530 Antiplatelet antibodies • Antiplaatjie antiliggam	15.3	187.40	10.2	125.00
4531 Hepatitis: per antigen or antibody • Hepatitis: per antigeen of antiliggam	14.49	177.50	9.66	118.30
4532 Transcobalamine • Transkobalamien	12.42	152.10	8.28	101.40
4533 Folic acid • Foliensuur	12.42	152.10	8.28	101.40
4536 Erythrocyte folate • Rooisel foliensuur	17.48	214.10	11.65	142.70
4537 Prolactin • Prolaktien	12.42	152.10	8.28	101.40



	Pathologist/ Patoloog		Other specialists and general practioners/ Ander Spesialiste en Huisartse	
	U/E	R	U/E	R
<b>21.13 After hour service and travelling fees (applicable to pathologists only)</b> <b>Buite normale werksure en reisgelde (slegs van toepassing op patoloë) +</b> <b>Miscellaneous/Diverse</b>				
4544 Attendance in theatre • Teenwoordigheid in teater	27	330.80	-	-
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	77.20	-	-
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		-	-	-
<b>22. ANATOMICAL PATHOLOGY • ANATOMIESE PATOLOGIE</b>				
<b>Exfoliative cytology • Eksfoliatiewe sitologie</b>				
<i>Sputum and all body fluids • Sputum en alle liggaamsvog</i>				
4561 First unit • Eerste eenheid	13.4	162.00	8.9	107.60
4563 Each additional unit • Elke addisionele eenheid	7.8	94.30	5.2	62.90
4564 Performance of fine-needle aspiration for cytology • Uitvoer van fynnaald aspirasie vir sitologie	15	181.40		
4567 Histology per sample/specimen each • Histologie per monster, elk	20	241.80	13.3	160.80
4571 Histology per additional block each • Histologie per blok, elk	11.6	140.20	7.7	93.10
4575 Histology and frozen section in laboratory • Histologie en bevrore snit in laboratorium	22.7	274.40	15.1	182.60
4577 Histology and frozen section in theatre • Histologie en bevrore snit in operasiesaal	49	592.40	32.7	395.30
4578 Second and subsequent frozen sections, each • Tweede en daaropvolgende bevrore snitte, elk.	20	241.80	13.4	162.00
4579 Attendance in theatre—no frozen section performed • Teenwoordigheid in teater – sonder dat bevrore snit uitgevoer is	26.3	318.00	17.5	211.60
4582 Serial step sections (including 4567) • Seriesneë (ingeslote 4567)	23.3	281.70	15.6	188.60
4584 Serial step sections per additional block each • Seriesneë, per bykomende blok elk	13.5	163.20	9	108.80
4587 Histology consultation • Histologie konsultasie	10.1	122.10	6.7	81.00
4589 Special stains • Spesiale kleuring	6.7	81.00	4.5	54.40
4591 Immuno-fluorescence/studies • Immuno-fluoresiën/studies	20.7	250.30	13.8	166.80
4593 Electron microscopy • Elektron-mikroskopiese ondersoek	94	1,136.50	63	761.70
4650 Autogenous vaccine • Outogene vaksien	8	96.70	5.33	64.40
4651 Entomological examination • Entomologiese ondersoeke	13.9	168.10	8.67	104.80

**IV. TRAVELLING EXPENSES • REISKOSTE**  
**REFER TO GENERAL RULE 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 // ndien 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 or item 5003 • Koste van openbare vervoer en reistyd of 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 Specialist 18,00 clinical procedure units per hour or part thereof • 18,00 kliniese prosedure eenhede per uur of deel daarvan vir 'n Spesialis.
- 5007 General Practitioner: 12,00 clinical procedure units per hour or part thereof • Huisarts: 12,00 kliniese prosedure eenhede per uur of deel daarvan.
- 5009 After hours: Specialist: 27,00 clinical procedure units per hour or part thereof • Na ure: Spesialis: 27,00 kliniese prosedure eenhede per uur of deel daarvan.
- 5011 After hours: General Practitioners: 18,00 clinical procedure units per hour or part thereof • Na ure: Huisarts: 18,00 kliniese prosedure eenhede per uur of deel daarvan.
- 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.