

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1247	Cardioversion for arrhythmias (any method) with doctor in attendance	04.00		65.000	496.60 (435.60)	65.000	496.60 (435.60)	6.000	287.70 (252.40) T
1248	Paracentesis of pericardium	04.00		50.000	382.00 (335.10)	50.000	382.00 (335.10)	9.000	431.60 (378.60) T
1271	Cardiological supervision of Dobutamine magnetic resonance stress testing	04.00		51.000	389.60 (341.80)	51.000	389.60 (341.80)		
MODIFIER GOVERNING PAEDIATRIC CARDIAC CATHETERISATION BY PAEDIATRIC CARDIOLOGISTS WITH A "33" PRACTICE NUMBER									
0073	When item 1288 (Cardiac catheterisation for congenital heart disease: All ages above 1 year old) or item 1289 (Paediatric cardiac catheterisation: Infants below the age of one year) is performed by paediatric cardiologists ('33'): fee for procedure + 100%								04.00
6.2 Invasive Cardiology									
6.2.1 Invasive cardiology: Cardiac catheterisation									
1249	Right and left cardiac catheterisation without coronary angiography (with or without biopsy)	04.00		140.000	1069.60 (938.20)			9.000	431.60 (378.60) T
1250	Endomyocardial biopsy	04.00		70.000	534.80 (469.10)	70.000	534.80 (469.10)	9.000	431.60 (378.60) T
1251	Transeptal puncture	04.00		70.000	534.80 (469.10)	70.000	534.80 (469.10)	9.000	431.60 (378.60) T
1252	Left heart catheterisation with coronary angiography (with or without biopsy)	04.00		140.000	1069.60 (938.20)			9.000	431.60 (378.60) T
1253	Right heart catheterisation (with or without biopsy)	04.00		70.000	534.80 (469.10)			9.000	431.60 (378.60) T
1254	Catheterisation of coronary artery bypass grafts and/or internal mammary grafts	04.00		40.000	305.60 (268.10)	40.000	305.60 (268.10)	9.000	431.60 (378.60) T
1255	Tilt test	04.00		31.300	239.10 (209.70)	31.300	239.10 (209.70)		
6.2.2 Invasive cardiology: Electrophysiological study									
1256	Ventricular stimulation study	04.00		160.000	1222.40 (1072.30)			9.000	431.60 (378.60) T
1257	Full electrophysiological study	04.00		300.000	2292.00 (2010.50)			9.000	431.60 (378.60) T
6.2.3 Invasive cardiology: Pacemakers									
1258	Pacemaker: Permanent - single chamber	04.00		155.000	1184.20 (1038.80)	124.000	947.40 (831.10)	9.000	431.60 (378.60) T
1259	Pacemaker: Permanent - dual chamber	04.00		230.000	1757.20 (1541.40)	184.000	1405.80 (1233.20)	9.000	431.60 (378.60) T
1260	AV nodal ablation	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)	9.000	431.60 (378.60) T
1261	Accessory pathway ablation	04.00		600.000	4584.00 (4021.10)	480.000	3667.20 (3216.80)	9.000	431.60 (378.60) T
1262	Electrophysiological mapping	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)		
1263	Insertion transvenous implantable defibrillator	04.00		212.000	1619.70 (1420.80)	169.600	1295.70 (1136.60)	15.000	719.30 (631.00) T

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1264	Test for implantable transvenous defibrillator	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	15.000	719.30 (631.00) T
1265	Renewal of pacemaker unit only, team fee	04.00		125.000	955.00 (837.70)	120.000	916.80 (804.20)	9.000	431.60 (378.60) T
1266	Resiting pacemaker generator	04.00		80.000	611.20 (536.10)	80.000	611.20 (536.10)		
1267	Repositioning of catheter electrode	04.00		50.000	382.00 (335.10)	50.000	382.00 (335.10)	9.000	431.60 (378.60) T
1268	Threshold testing: Own equipment	04.00		15.000	114.60 (100.50)				
1269	Threshold testing: Hospital equipment	04.00		11.000	84.00 (73.70)				
1270	Programming of atrio-ventricular sequential pacemaker	04.00		50.000	382.00 (335.10)	50.000	382.00 (335.10)		
1273	Insertion of temporary pacemaker (modifier 0005 not applicable)	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	9.000	431.60 (378.60) T
1275	Termination of arrhythmia - programmed stipulation and lead insertion of temporary pacer	04.00		200.000	1528.00 (1340.40)	160.000	1222.40 (1072.30)	9.000	431.60 (378.60) T
6.2.4	Invasive cardiology: Percutaneous transluminal angioplasty								
1276	Percutaneous transluminal angioplasty: First cardiologist: Single lesion	04.00		260.000	1986.40 (1742.50)	208.000	1589.10 (1393.90)	13.000	623.40 (546.80) T
1277	Percutaneous transluminal angioplasty: Second cardiologist: Single lesion	04.00		140.000	1069.60 (938.20)	120.000	916.80 (804.20)	13.000	623.40 (546.80) T
1278	Percutaneous transluminal angioplasty: First cardiologist: Second lesion	04.00		60.000	458.40 (402.10)	60.000	458.40 (402.10)	13.000	623.40 (546.80) T
1279	Percutaneous transluminal angioplasty: Second cardiologist: Second lesion	04.00		40.000	305.60 (268.10)	40.000	305.60 (268.10)	13.000	623.40 (546.80) T
1280	Percutaneous transluminal angioplasty: First cardiologist: Third or subsequent lesions (each)	04.00		60.000	458.40 (402.10)	60.000	458.40 (402.10)	13.000	623.40 (546.80) T
1281	Percutaneous transluminal angioplasty: Second cardiologist: Third or subsequent lesions (each)	04.00		40.000	305.60 (268.10)	40.000	305.60 (268.10)	13.000	623.40 (546.80) T
1282	Use of balloon procedures including: First cardiologist: Atrial septostomy; Pulmonary valve valvuloplasty; Aortic valve valvuloplasty; Coarctation dilation; Mitral valve valvuloplasty	04.00		260.000	1986.40 (1742.50)	208.000	1589.10 (1393.90)	15.000	719.30 (631.00) T
1283	Use of balloon procedure as in item 1282: Second cardiologist	04.00		140.000	1069.60 (938.20)	120.000	916.80 (804.20)	15.000	719.30 (631.00) T
1284	Atherectomy: Single lesion: First cardiologist	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)		
1285	Atherectomy: Single lesion: Second cardiologist	04.00		180.000	1375.20 (1206.30)	144.000	1100.20 (965.10)		
1286	Insertion of intravascular stent: First cardiologist	04.00		100.000	764.00 (670.20)	100.000	764.00 (670.20)		
1287	Insertion of intravascular stent: Second cardiologist	04.00		50.000	382.00 (335.10)	50.000	382.00 (335.10)		
	The insertion of a stent(s) (item 1286 & 1267) may only be charged once per vessel regardless of the number of stents inserted in this vessel.	09.01							

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1290	Use of balloon procedures including: First paediatric cardiologist (33): Atrial septostomy; Pulmonary valve valvuloplasty; Aortic valve valvuloplasty; Coarctation dilation; Mitral valve valvuloplasty; Closure atrial septal defect; Closure of patent ductus arteriosus	04.00		300.000	2292.00 (2010.50)			15.000	719.30 (631.00) T
1291	Use of balloon procedure as in item 1290: Second paediatric cardiologist (33)	04.00		160.000	1222.40 (1072.30)			15.000	719.30 (631.00) T
6.2.5	Invasive cardiology: Paediatric cardiac catheterisation								
1288	Cardiac catheterisation for congenital heart disease: All ages above 1 year old	04.00		210.000	1604.40 (1407.40)	168.000	1283.50 (1125.90)	12.000	575.40 (504.70) T
1289	Paediatric cardiac catheterisation: Infants below the age of one year	04.00		263.000	2009.30 (1762.50)	210.400	1607.50 (1410.10)	12.000	575.40 (504.70) T
6.3	Cardiac surgery								
1294	Patent ductus arteriosus	04.00		320.000	2444.80 (2144.60)	256.000	1955.80 (1715.60)	13.000	623.40 (546.80) T
1295	Pericardiectomy for constrictive pericarditis	04.00		400.000	3056.00 (2680.70)	320.000	2444.80 (2144.60)	15.000	719.30 (631.00) T
1297	Coarctation of aorta	04.00		425.000	3247.00 (2848.20)	340.000	2597.60 (2278.60)	15.000	719.30 (631.00) T
1299	Systemo-pulmonary anastomosis	04.00		425.000	3247.00 (2848.20)	340.000	2597.60 (2278.60)	15.000	719.30 (631.00) T
1301	Mitral valvotomy: Closed heart technique	04.00		350.000	2674.00 (2345.60)	280.000	2139.20 (1876.50)	15.000	719.30 (631.00) T
1302	Heart transplant	04.00		875.000	6685.00 (5864.00)	700.000	5348.00 (4691.20)	15.000	719.30 (631.00) T
1303	Harvesting donor heart	04.00		75.000	573.00 (502.60)	75.000	573.00 (502.60)	5.000	239.80 (210.40) T
1305	Operative implantation of cardiac pacemaker by thoracotomy	04.00		220.000	1680.80 (1474.40)	176.000	1344.60 (1179.50)	15.000	719.30 (631.00) T
1307	Re-exploration after cardiac surgery	04.00		215.000	1642.60 (1440.90)	172.000	1314.10 (1152.70)	15.000	719.30 (631.00) T
1308	Heart and lung transplant	04.00		1000.000	7640.00 (6701.80)	800.000	6112.00 (5361.40)	15.000	719.30 (631.00) T
1309	Harvesting donor heart and lungs	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1311	Pericardial drainage	04.00		140.000	1069.60 (938.20)	120.000	916.80 (804.20)	13.000	623.40 (546.80) T
6.3.1	Cardiac surgery: Open heart surgery								
1312	Evaluation of coronary angiogram by cardiothoracic surgeon	04.00		25.000	191.00 (167.50)				
1320	Repeat open heart surgery (additional fee above procedure fee)	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	15.000	719.30 (631.00) T
1321	Stand-by fee for coronary angioplasty	04.00		30.000	229.20 (201.10)	30.000	229.20 (201.10)	30.000	229.20 (201.10) G
1322	Attendance at other operations or monitoring at bedside, by physician e.g. heart block etc.: Per hour	04.00		20.000	152.80 (134.00)				

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6.3.1.1	Cardiac surgery: Open heart surgery: Congenital conditions								
1323	Atrial septal defect: Osteum secundum	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)	15.000	719.30 (631.00) T
1325	Atrial septal defect: Sinus venosus or osteum primum	04.00		563.000	4301.30 (3773.10)	450.400	3441.10 (3018.50)	15.000	719.30 (631.00) T
1327	Atrial septal defect: Ventricular septal defect	04.00		603.800	4613.00 (4046.50)	483.040	3690.40 (3237.20)	15.000	719.30 (631.00) T
1329	Atrial septal defect: Fallot's tetralogy	04.00		563.000	4301.30 (3773.10)	450.400	3441.10 (3018.50)	15.000	719.30 (631.00) T
1330	Atrial septal defect: Pulmonary stenosis	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)	15.000	719.30 (631.00) T
1331	Transposition of large vessels (venous repair)	04.00		563.000	4301.30 (3773.10)	450.400	3441.10 (3018.50)	15.000	719.30 (631.00) T
1332	Transposition of great arteries (arterial repair)	04.00		750.000	5730.00 (5026.30)	600.000	4584.00 (4021.10)	15.000	719.30 (631.00) T
1333	Ebstein's Anomaly	04.00		563.000	4301.30 (3773.10)	450.400	3441.10 (3018.50)	15.000	719.30 (631.00) T
1334	Aorto-coronary bypass operation as a MidCab procedure (thoracotomy with coronary grafting without bypass or hypothermal)	04.00		548.800	4192.80 (3677.90)	439.040	3354.30 (2942.40)	20.000	959.00 (841.20) T
1335	Total anomalous venous drainage	04.00		563.000	4301.30 (3773.10)	450.400	3441.10 (3018.50)	15.000	719.30 (631.00) T
1336	Aorto-coronary bypass operation as a OpCab procedure (sternotomy with coronary grafting without bypass or hypothermia)	04.00		658.900	5034.00 (4415.80)	527.120	4027.20 (3532.60)	20.000	959.00 (841.20) T
1337	Creation of atrial septal defect by thoracotomy with or without cardiac bypass	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)	15.000	719.30 (631.00) T
1338	Fontan type repair	04.00		750.000	5730.00 (5026.30)	600.000	4584.00 (4021.10)	15.000	719.30 (631.00) T
6.3.1.2	Cardiac surgery: Open heart surgery: Acquired conditions								
1339	Mitral valve replacement	04.00		657.000	5019.50 (4403.10)	525.600	4015.60 (3522.50)	15.000	719.30 (631.00) T
1340	Mitral valvuloplasty	04.00		688.000	5256.30 (4610.80)	550.400	4205.10 (3688.70)	15.000	719.30 (631.00) T
1341	Aortic valve replacement	04.00		623.800	4765.80 (4180.50)	499.040	3812.70 (3344.50)	15.000	719.30 (631.00) T
1342	Tricuspid annulo plasty	04.00		188.000	1436.30 (1259.90)	150.400	1149.10 (1008.00)	15.000	719.30 (631.00) T
1343	Double valve replacement	04.00		968.900	7402.40 (6493.30)	775.120	5921.90 (5194.60)	15.000	719.30 (631.00) T
1344	Acute dissecting aneurysm repair	04.00		750.000	5730.00 (5026.30)	600.000	4584.00 (4021.10)	15.000	719.30 (631.00) T
1345	Aortic arch aneurysm repair utilising deep hypothermal and circulatory arrest	04.00		1000.000	7640.00 (6701.80)	800.000	6112.00 (5361.40)	15.000	719.30 (631.00) T
1346	Aorta-coronary bypass operation (including interpretation of angiogram): Harvesting of saphenous veins: Unilateral (modifier 0005 not applicable)	04.00		100.000	764.00 (670.20)	100.000	764.00 (670.20)		

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1347	Aorta-coronary bypass operation (including interpretation of angiogram); Harvesting of saphenous veins: Bilateral (modifier 0005 not applicable)	04.00		175.000	1337.00 (1172.80)	140.000	1069.60 (938.20)		
1348	Aorta-coronary bypass operation (including interpretation of angiogram); Utilizing saphenous veins	04.00		750.000	5730.00 (5026.30)	600.000	4584.00 (4021.10)	15.000	719.30 (631.00) T
1349	Aorta-coronary bypass operation (including interpretation of angiogram); Additional arterial implant: Any artery	04.00		781.000	5966.80 (5234.00)	624.800	4773.50 (4187.30)	15.000	719.30 (631.00) T
1350	Aorta-coronary bypass operation (including interpretation of angiogram); Additional double arterial implant: Any artery	04.00		813.000	6211.30 (5448.50)	650.400	4969.10 (4358.90)	15.000	719.30 (631.00) T
1351	Aorta-coronary bypass operation with valve replacement or excision of cardiac aneurysm	04.00		875.000	6685.00 (5864.00)	700.000	5348.00 (4691.20)	15.000	719.30 (631.00) T
1352	Cardiac aneurysm	04.00		563.000	4301.30 (3773.10)	450.400	3441.10 (3018.50)	15.000	719.30 (631.00) T
1353	Ascending/descending thoracic aortic aneurysm repair	04.00		625.000	4775.00 (4188.60)	500.000	3820.00 (3350.90)	15.000	719.30 (631.00) T
1354	Arrhythmia surgery	04.00		688.000	5256.30 (4610.80)	550.400	4205.10 (3688.70)	15.000	719.30 (631.00) T
1355	Cardiac tumour	04.00		625.000	4775.00 (4188.60)	500.000	3820.00 (3350.90)	15.000	719.30 (631.00) T
1356	Insertion and removal of intra-aortic balloon pump (modifier 0005 not applicable)	04.00		188.000	1436.30 (1259.90)	150.400	1149.10 (1008.00)	15.000	719.30 (631.00) T
1358	Harvesting of radial artery	04.00		175.000	1337.00 (1172.80)	140.000	1069.60 (938.20)		
6.4	Peripheral vascular system								
MODIFIER GOVERNING THIS SECTION									
0072	Non invasive peripheral vascular tests: The number of tests in a single case is restricted to two (2) per diagnosis. Tests are not justified in cases of uncomplicated varicose veins								04.00
6.4.1	Peripheral vascular system: Investigations								
1357	Skin temperature test: Response to reflex heating	04.00		15.000	114.60 (100.50)	15.000	114.60 (100.50)		
1359	Skin temperature test: Response to reflex cooling	04.00		15.000	114.60 (100.50)	15.000	114.60 (100.50)		
1361	Cold sensitivity test	04.00		17.000	129.90 (113.90)	17.000	129.90 (113.90)		
1363	Oscillometry test	04.00		5.000	38.20 (33.50)	5.000	38.20 (33.50)		
1365	Sweating test	04.00		17.000	129.90 (113.90)	17.000	129.90 (113.90)		
1366	Transcutaneous oximetry. Transcutaneous oximetry - single site	04.00		26.300	200.90 (176.20)	26.300	200.90 (176.20)		
1367	Doppler blood tests	04.00		6.000	45.80 (40.20)	6.000	45.80 (40.20)		
5369	Doppler arterial pressures	04.00		6.000	45.80 (40.20)	6.000	45.80 (40.20)		
5371	Doppler arterial pressures with exercise	04.00		10.000	76.40 (67.00)	10.000	76.40 (67.00)		
5373	Doppler segmental pressures and wave forms	04.00		12.000	91.70 (80.40)	12.000	91.70 (80.40)		
5375	Venous doppler examination (both limbs)	04.00		9.000	68.80 (60.40)	9.000	68.80 (60.40)		
5377	Venous plethysmography	04.00		16.000	122.20 (107.20)	16.000	122.20 (107.20)		

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				RVU	Fee	RVU	Fee	RVU	Fee
5379	Supra-orbital doppler test	04.00		5,000	38.20 (33.50)	5,000	38.20 (33.50)		
5381	Carotid non-invasive complex tests	04.00		39,000	298.00 (261.40)	39,000	298.00 (261.40)		
6.4.2 Peripheral vascular system: Arterio-venous abnormalities									
1369	Fistula or aneurysm (as for grafting of various arteries)	04.00							
6.4.3 Arteries									
6.4.3.1 Peripheral vascular system: Arteries: Aorta-iliac and major branches									
1372	Abdominal aorta and iliac artery: Unruptured	04.00		540,000	4125.60 (3618.90)	432,000	3300.50 (2895.20)	15,000	719.30 (631.00) T
1373	Abdominal aorta and iliac artery: Ruptured	04.00		600,000	4584.00 (4021.10)	480,000	3667.20 (3216.80)	15,000	719.30 (631.00) T
1375	Grafting and/or thrombo-endarterectomy for thrombosis	04.00		444,000	3392.20 (2975.60)	355,200	2713.70 (2380.40)	15,000	719.30 (631.00) T
1376	Aorta bi-femoral graft, including proximal and distal endarterectomy and preparation for anastomosis	04.00		594,000	4538.20 (3980.90)	475,200	3630.50 (3184.80)	15,000	719.30 (631.00) T
6.4.3.2 Peripheral vascular system: Arteries: Iliac artery									
1379	Prosthetic grafting and/or thrombo-endarterectomy	04.00		300,000	2292.00 (2010.50)	240,000	1833.60 (1608.40)	13,000	623.40 (546.80) T
6.4.3.3 Peripheral vascular system: Arteries: Peripheral									
1385	Prosthetic grafting	04.00		255,000	1948.20 (1708.90)	204,000	1558.60 (1367.20)	5,000	239.80 (210.40) T
1387	Grafting vein: Vein grafting proximal to knee joint	04.00		300,000	2292.00 (2010.50)	240,000	1833.60 (1608.40)	5,000	239.80 (210.40) T
1388	Grafting vein: Distal to knee joint	04.00		444,000	3392.20 (2975.60)	355,200	2713.70 (2380.40)	5,000	239.80 (210.40) T
1389	Grafting vein: Endarterectomy when not part of another specified procedure	04.00		264,000	2017.00 (1769.30)	211,200	1613.60 (1415.40)	5,000	239.80 (210.40) T
1390	Grafting vein: Carotid endarterectomy	04.00		321,000	2452.40 (2151.20)	256,800	1962.00 (1721.10)	15,000	719.30 (631.00) T
1393	Embolectomy: Peripheral embolectomy transfemoral	04.00		168,000	1283.50 (1125.90)	134,400	1026.80 (900.70)	5,000	239.80 (210.40) T
1395	Miscellaneous arterial procedures: Arterial suture: Trauma	04.00		125,000	955.00 (837.70)	100,000	764.00 (670.20)	5,000	239.80 (210.40) 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 arteries are included because of popliteal artery. The vertebral and popliteal arteries are included because of the relevant inaccessibility of the arteries and difficult surgical exposure)	04.00		264,000	2017.00 (1769.30)	211,200	1613.60 (1415.40)	15,000	719.30 (631.00) T
1397	Profundoplasty	04.00		210,000	1604.40 (1407.40)	168,000	1283.50 (1125.90)	5,000	239.80 (210.40) T
1399	Distal tibial (ankle region)	04.00		456,000	3483.80 (3056.00)	364,800	2787.10 (2444.80)	5,000	239.80 (210.40) T
1401	Femoro-femoral	04.00		254,000	1940.60 (1702.30)	203,200	1552.40 (1361.80)	5,000	239.80 (210.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1402	Carotid-subclavian	04.00		288.000	2200.30 (1930.10)	230.400	1760.30 (1544.10)	8.000	383.60 (336.50) T
1403	Axillo-femoral: (Bifemoral + 50%)	04.00		288.000	2200.30 (1930.10)	230.400	1760.30 (1544.10)	8.000	383.60 (336.50) T
6.4.4 Peripheral vascular system: Veins									
1407	Ligation of saphenous vein	04.00		50.000	382.00 (335.10)	50.000	382.00 (335.10)	3.000	143.90 (126.20) T
1408	Placement of Hickman catheter or similar	04.00		91.000	695.20 (609.80)	91.000	695.20 (609.80)	4.000	191.80 (168.20) T
1410	Ligation of inferior vena cava: Abdominal	04.00		180.000	1375.20 (1206.30)	144.000	1100.20 (965.10)	8.000	383.60 (336.50) T
1412	Umbrella operation on inferior vena cava: Abdominal	04.00		100.000	764.00 (670.20)	100.000	764.00 (670.20)	8.000	383.60 (336.50) T
1413	Combined procedure for varicose veins: Ligation of saphenous vein stripping, multiple ligation including of perforating veins as indicated: Unilateral	04.00		141.000	1077.20 (944.90)	120.000	916.80 (804.20)	3.000	143.90 (126.20) T
1415	Combined procedure for varicose veins: Ligation of saphenous vein stripping, multiple ligation including of perforating veins as indicated: Bilateral	04.00		247.000	1887.10 (1655.40)	197.600	1509.70 (1324.30)	3.000	143.90 (126.20) T
1417	Extensive sub-fascial ligation of perforating veins	04.00		125.000	955.00 (837.70)	120.000	916.80 (804.20)	3.000	143.90 (126.20) T
1419	Lesser varicose vein procedures	04.00		31.000	236.80 (207.70)	31.000	236.80 (207.70)	3.000	143.90 (126.20) T
1421	Compression sclerotherapy of varicose veins: Per injection to a maximum of nine (9) injections per leg (excluding cost of material)	04.00		9.000	68.80 (60.40)	9.000	68.80 (60.40)		
1425	Thrombectomy: Inferior vena cava (Trans-abdominal)	04.00		240.000	1833.60 (1608.40)	192.000	1466.90 (1286.80)	11.000	527.50 (462.70) T
1427	Thrombectomy: Iliio-femoral	04.00		175.000	1337.00 (1172.80)	140.000	1069.60 (938.20)	6.000	287.70 (252.40) T
6.4.5 Peripheral vascular system: Portal hypertension									
1429	Porto-caval shunt	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)	11.000	527.50 (462.70) T
6.5 Cardiac rehabilitation									
1431	Cardiac rehabilitation: Phase II: Exercise rehabilitation: Per patient per 60 minute session with a maximum of 5 patients per group	04.00		12.000	91.70 (80.40)	12.000	91.70 (80.40)		
1432	Cardiac rehabilitation: Phase III: Exercise rehabilitation: Per patient per 60 minute session with a maximum of 10 patients per group	04.00		6.000	45.80 (40.20)	6.000	45.80 (40.20)		
	Please note : a. A practitioner is only allowed to instruct one group at a time. b. Benefits are limited to 3 times per week for a period of 60 minutes with a maximum of 3 months.	04.00							
7 Lympho Reticular System									
7.1 Spleen									
1435	Splenectomy (In all cases)	04.00		221.300	1690.70 (1483.10)	177.040	1352.60 (1186.50)	9.000	431.60 (378.60) T
1436	Splenorthaphy	04.00		231.800	1771.00 (1553.50)	185.440	1416.80 (1242.80)	9.000	431.60 (378.60) T

Code	Description	Var	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
7.2	Lymph nodes and lymphatic channels								
1439	Excision of lymph node for biopsy: Neck or axilla	04.00		65.000	496.60 (435.60)	65.000	496.60 (435.60)	4.000	191.80 (168.20) T
1441	Excision of lymph node for biopsy: Groin	04.00		65.000	496.60 (435.60)	65.000	496.60 (435.60)	3.000	143.90 (126.20) T
1443	Simple excision of lymph nodes for tuberculosis	04.00		91.000	695.20 (609.80)	91.000	695.20 (609.80)	3.000	143.90 (126.20) T
1445	Radical excision of lymph nodes of neck: Total: Unilateral	04.00		315.000	2406.60 (2111.10)	252.000	1925.30 (1688.90)	5.000	239.80 (210.40) T
1447	Radical excision of lymph nodes of neck: Total: Suprahyoid unilateral	04.00		235.000	1795.40 (1574.90)	188.000	1436.30 (1259.90)	5.000	239.80 (210.40) T
1449	Radical excision of lymph nodes of axilla	04.00		160.000	1222.40 (1072.30)	128.000	977.90 (857.80)	4.000	191.80 (168.20) T
1450	Bone marrow transplantation: Cryopreservation of bone marrow or peripheral blood stem cells	04.00		58.000	443.10 (388.70)	58.000	443.10 (388.70)	5.000	239.80 (210.40) T
1451	Radical excision of lymph nodes of groin: Ilio-inguinal	04.00		175.000	1337.00 (1172.80)	140.000	1069.60 (938.20)	4.000	191.80 (168.20) T
1453	Radical excision of lymph nodes of groin: Inguinal	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T
1454	Bone marrow transplantation: Plasma/cell separation using designated cell separator equipment (per hour) (specify time used)	04.00		39.000	298.00 (261.40)	39.000	298.00 (261.40)	5.000	239.80 (210.40) T
1455	Retroperitoneal lymph adenectomy including pelvic, aortic and renal nodes	04.00		275.000	2101.00 (1843.00)	220.000	1680.80 (1474.40)	6.000	287.70 (252.40) T
1456	Bone marrow transplantation: Preparation for extra-corporeal equipment by the medical practitioner for plasma, platelet and leucocyte pheresis	04.00		42.000	320.90 (281.50)	42.000	320.90 (281.50)	5.000	239.80 (210.40) T
1457	Bone marrow biopsy: By trephine	04.00		13.000	99.30 (87.10)	13.000	99.30 (87.10)	3.000	143.90 (126.20) T
1458	Bone marrow biopsy: Simple aspiration of marrow by means of trocar or cannula	04.00		8.000	61.10 (53.60)	8.000	61.10 (53.60)		
1459	Staging laparotomy for lymphoma (including splenectomy)	04.00		245.000	1871.80 (1641.90)	196.000	1497.40 (1313.50)	7.000	335.70 (294.50) T
8	Digestive System								
MODIFIERS GOVERNING THIS SECTION									
0074	Endoscopic procedures performed with own equipment: The basic procedure fee plus 33.33% (1/3) of that fee ("+" codes excluded) will apply where endoscopic procedures are performed with own equipment.								04.00
0075	Endoscopic procedures performed in own procedure room: The fee plus 21,00 clinical procedure units will apply where endoscopic procedures are performed in rooms with own equipment. This fee is chargeable by medical practitioners who own or rent the facility. Please note: Modifier 0075 is not applicable to any of the items for diagnostic procedures in the otorhinolaryngology sections of the tariff.	04.00		21.000	160.44 (140.74)	21.000	160.44 (140.74)		
8.1	Oral cavity								
1461	All dental procedures	04.00						4.000	191.80 (168.20) T
1463	Surgical biopsy of tongue or palate: Under general anaesthetic	04.00		35.000	267.40 (234.60)	35.000	267.40 (234.60)	4.000	191.80 (168.20) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1465	Surgical biopsy of tongue or palate: Under local anaesthetic	04.00		15.000	114.60 (100.50)	15.000	114.60 (100.50)	4.000	191.80 (168.20) T
1467	Drainage of intra-oral abscess	04.00		31.000	236.80 (207.70)	31.000	236.80 (207.70)	4.000	191.80 (168.20) T
1469	Local excision of mucosal lesion of oral cavity	04.00		23.000	175.70 (154.10)	23.000	175.70 (154.10)	4.000	191.80 (168.20) T
1471	Resection of malignant lesion of buccal mucosa including radical neck dissection (Commando operation), but not including reconstructive plastic procedure	04.00		549.000	4194.40 (3679.30)	439.200	3355.50 (2943.40)	7.000	335.70 (294.50) T
1473	Complicated reconstruction following major ablative procedure for head and neck cancer	04.00		-	- q	-	- q	7.000	335.70 (294.50) T
1475	Cleft palate: Repair primary deformity with or without pharyngoplasty	04.00		215.000	1642.60 (1440.90)	172.000	1314.10 (1152.70)	6.000	287.70 (252.40) T
1477	Cleft palate: Secondary repair	04.00		174.200	1330.90 (1167.50)	139.360	1064.70 (933.90)	6.000	287.70 (252.40) T
1478	Velopharyngeal reconstruction with myoneuro-vascular transfer (dynamic repair)	04.00		240.000	1833.60 (1608.40)	192.000	1466.90 (1286.80)	6.000	287.70 (252.40) T
1479	Velopharyngeal reconstruction with or without pharyngeal flap (static repair)	04.00		227.000	1734.30 (1521.30)	181.600	1387.40 (1217.00)	6.000	287.70 (252.40) T
1480	Repair of oronasal fistula (large) e.g. distant flap	04.00		227.000	1734.30 (1521.30)	181.600	1387.40 (1217.00)	6.000	287.70 (252.40) T
1481	Repair of oronasal fistula (small) e.g. trapdoor: One stage or first stage	04.00		138.000	1054.30 (924.80)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1482	Repair of oronasal fistula (large): Second stage	04.00		138.000	1054.30 (924.80)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1483	Alveolar periosteal or other flaps for arch closure	04.00		138.000	1054.30 (924.80)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T
1486	Closure of anterior nasal floor	04.00		138.000	1054.30 (924.80)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
8.2	Lips								
1484	Cleft lip repair: Lip adhesion (cleft lip)	04.00		95.000	725.80 (636.70)	95.000	725.80 (636.70)	5.000	239.80 (210.40) T
1485	Local excision of benign lesion of lip	04.00		27.000	206.30 (181.00)	27.000	206.30 (181.00)	4.000	191.80 (168.20) T
1487	Resection for lip malignancy	04.00		91.000	695.20 (609.80)	91.000	695.20 (609.80)	4.000	191.80 (168.20) T
1489	Cleft lip repair: Repair unilateral cleft lip (with muscle reconstruction)	04.00		227.000	1734.30 (1521.30)	181.600	1387.40 (1217.00)	5.000	239.80 (210.40) T
1490	Cleft lip repair: Bilateral cleft lip repair (with muscle reconstruction): One of two stages	04.00		251.600	1922.20 (1686.10)	201.280	1537.80 (1348.90)	5.000	239.80 (210.40) T
1491	Cleft lip repair: Repair bilateral cleft lip (with muscle reconstruction): One stage	04.00		329.900	2520.40 (2210.90)	263.920	2016.30 (1768.70)	5.000	239.80 (210.40) T
1492	Cleft lip repair: Bilateral cleft lip repair: Second stage	04.00		227.000	1734.30 (1521.30)	181.600	1387.40 (1217.00)	5.000	239.80 (210.40) T
1493	Cleft lip repair: Total revision of secondary cleft lip deformities	04.00		251.600	1922.20 (1686.10)	201.280	1537.80 (1348.90)	5.000	239.80 (210.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1494	Cleft lip repair: Partial revision of secondary cleft lip deformity	04.00		91.000	695.20 (609.80)	91.000	695.20 (609.80)	5.000	239.80 (210.40) T
1495	Abbé or Estlander type flap (all stages included)	04.00		273.100	2086.50 (1830.30)	218.480	1669.20 (1464.20)	5.000	239.80 (210.40) T
1497	Vermilionectomy	04.00		94.900	725.00 (636.00)	94.900	725.00 (636.00)	4.000	191.80 (168.20) T
1499	Lip reconstruction following an injury: Direct repair	04.00		105.600	806.80 (707.70)	105.600	806.80 (707.70)	4.000	191.80 (168.20) T
1501	Lip reconstruction following an injury or tumour removal: Flap repair	04.00		206.000	1573.80 (1380.50)	164.800	1259.10 (1104.50)	4.000	191.80 (168.20) T
1503	Lip reconstruction following an injury or tumour removal: Total reconstruction (first stage)	04.00		206.000	1573.80 (1380.50)	164.800	1259.10 (1104.50)	4.000	191.80 (168.20) T
1504	Lip reconstruction following an injury or tumour removal: Subsequent stages (see item 0297)	04.00		104.000	794.60 (697.00)	104.000	794.60 (697.00)	4.000	191.80 (168.20) T
8.3	Tongue								
1505	Partial glossectomy	04.00		225.000	1719.00 (1507.90)	180.000	1375.20 (1206.30)	6.000	287.70 (252.40) T
1507	Local excision of lesion of tongue	04.00		27.000	206.30 (181.00)	27.000	206.30 (181.00)	4.000	191.80 (168.20) T
8.4	Palate, uvula and salivary glands								
1509	Wide excision of lesion of palate	04.00		100.000	764.00 (670.20)	100.000	764.00 (670.20)	5.000	239.80 (210.40) T
1511	Radical resection of palate (including skin graft)	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	7.000	335.70 (294.50) T
1513	Excision of ranula	04.00		85.600	654.00 (573.70)	85.600	654.00 (573.70)	5.000	239.80 (210.40) T
1515	Excision of sublingual salivary gland	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T
1517	Excision of submandibular salivary gland	04.00		146.000	1115.40 (978.40)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T
1519	Excision of submandibular salivary gland with suprahyoid dissection	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1521	Excision of submandibular salivary gland: With radical neck dissection	04.00		352.000	2689.30 (2359.00)	281.600	2151.40 (1887.20)	6.000	287.70 (252.40) T
1523	Local resection of parotid tumour	04.00		169.600	1295.70 (1136.60)	135.680	1036.60 (909.30)	5.000	239.80 (210.40) T
1525	Partial parotidectomy	04.00		310.000	2368.40 (2077.50)	248.000	1894.70 (1662.00)	5.000	239.80 (210.40) T
1526	Total parotidectomy with preservation of facial nerve	04.00		358.500	2738.90 (2402.50)	286.800	2191.20 (1922.10)	5.000	239.80 (210.40) T
1527	Total parotidectomy	04.00		358.500	2738.90 (2402.50)	286.800	2191.20 (1922.10)	5.000	239.80 (210.40) T
1529	Parotidectomy: Extracapsular	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)	5.000	239.80 (210.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1531	Drainage of parotid abscess	04.00		25.000	191.00 (167.50)	25.000	191.00 (167.50)	4.000	191.80 (168.20) T
1533	Closure of salivary fistula	04.00		91.000	695.20 (609.80)	91.000	695.20 (609.80)	4.000	191.80 (168.20) T
1535	Dilatation of salivary duct	04.00		10.000	76.40 (67.00)	10.000	76.40 (67.00)	4.000	191.80 (168.20) T
1537	Operative removal of salivary calculus	04.00		55.000	420.20 (368.60)	55.000	420.20 (368.60)	4.000	191.80 (168.20) T
1539	Salivary duct: Meatotomy	04.00		20.000	152.80 (134.00)	20.000	152.80 (134.00)	4.000	191.80 (168.20) T
1541	Branchial cyst and/or fistula: Excision	04.00		140.000	1069.60 (938.20)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1543	Excision of cystic hygroma	04.00		140.000	1069.60 (938.20)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1544	Ludwig's Angina: Drainage	04.00		42.000	320.90 (281.50)	42.000	320.90 (281.50)	9.000	431.60 (378.60) T
8.5	Oesophagus								
1545	Oesophagoscopy with rigid instrument: First and subsequent	04.00		47.000	359.10 (315.00)	47.000	359.10 (315.00)	4.000	191.80 (168.20) T
1549	Oesophagoscopy with dilatation of stricture	04.00		70.000	534.80 (469.10)	70.000	534.80 (469.10)	4.000	191.80 (168.20) T
1550	Oesophagoscopy with removal of foreign body	04.00		70.000	534.80 (469.10)	70.000	534.80 (469.10)	4.000	191.80 (168.20) T
1551	Oesophagoscopy with insertion of indwelling oesophageal tube	04.00		80.000	611.20 (536.10)	80.000	611.20 (536.10)	4.000	191.80 (168.20) T
1552	Injection and/or ligation of oesophageal varices (endoscopy inclusive)	04.00		80.000	611.20 (536.10)	80.000	611.20 (536.10)	4.000	191.80 (168.20) T
1553	Subsequent injection and/or ligation of oesophageal varices (endoscopy inclusive)	04.00		65.000	496.60 (435.60)	65.000	496.60 (435.60)	4.000	191.80 (168.20) T
1554	Per-oral small bowel biopsy	04.00		25.000	191.00 (167.50)	25.000	191.00 (167.50)	4.000	191.80 (168.20) T
1555	Repair of tracheal oesophageal fistula and oesophageal atresia	04.00		400.000	3056.00 (2680.70)	320.000	2444.80 (2144.60)	15.000	719.30 (631.00) T
1557	Oesophageal dilatation	04.00		40.000	305.60 (268.10)	40.000	305.60 (268.10)	4.000	191.80 (168.20) T
1559	Oesophagectomy: Two stage	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)	11.000	527.50 (462.70) T
1560	Oesophagectomy: Three stage	04.00		550.000	4202.00 (3686.00)	440.000	3361.60 (2948.80)	11.000	527.50 (462.70) T
1561	Thoraco-abdominal oesophagogastrrectomy	04.00		500.000	3820.00 (3350.90)	400.000	3056.00 (2680.70)	11.000	527.50 (462.70) T
1563	Hiatus hernia and diaphragmatic hernia repair: With anti-reflux procedure	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)	11.000	527.50 (462.70) T
1565	Hiatus hernia and diaphragmatic hernia repair: With Collis Nissen oesophageal lengthening procedure	04.00		350.000	2674.00 (2345.60)	280.000	2139.20 (1876.50)	11.000	527.50 (462.70) T

Code	Description	Var	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1566	Private fee: Gastroplasty	04.00		325.000	2483.00 (2178.10)	260.000	1986.40 (1742.50)	8.000	383.60 (336.50) T
1567	Bochdalek hernia repair in newborn	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	14.000	671.30 (588.90) T
1568	Hiatus hernia and diaphragmatic repair: Revision after previous repair	04.00		375.000	2865.00 (2513.20)	300.000	2292.00 (2010.50)	11.000	527.50 (462.70) T
1569	Heller's operation	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	14.000	671.30 (588.90) T
1575	Insertion of indwelling oesophageal tube by laparotomy	04.00		142.000	1084.90 (951.70)	120.000	916.80 (804.20)	6.000	287.70 (252.40) T
1578	Oesophageal motility (4 channel + pneumograph)	04.00		100.000	764.00 (670.20)	100.000	764.00 (670.20)	4.000	191.80 (168.20) T
1579	Oesophageal substitution (without oesophagectomy) using colon, small bowel or stomach	04.00		400.000	3056.00 (2680.70)	320.000	2444.80 (2144.60)	11.000	527.50 (462.70) T
1580	Oesophageal motility (6 Channel + pneumograph + pH pull-through)	04.00		110.000	840.40 (737.20)	110.000	840.40 (737.20)	4.000	191.80 (168.20) T
1581	Removal of benign oesophageal tumours	04.00		285.000	2177.40 (1910.00)	228.000	1741.90 (1528.00)	11.000	527.50 (462.70) T
1582	Oesophageal motility (4 or 6 channel + pneumograph - ECG + provocative tests for oesophageal spasm vs. myocardial ischaemia)	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T
1583	Excision of intrathoracic oesophageal diverticulum	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	11.000	527.50 (462.70) T
1584	24 Hour oesophageal pH studies: Hire fee (item 0201 applicable for pro-rata of probe: 50 examinations per glass electrode pH probe and 10 examinations per antimony pH probe)	04.00		55.000	420.20 (368.60)	55.000	420.20 (368.60)		
1585	24 Hour oesophageal pH studies: Interpretation	04.00		27.000	206.30 (181.00)	27.000	206.30 (181.00)		
8.6	Stomach								
1587	Upper gastro-intestinal endoscopy: Hospital equipment	04.00		48.750	372.50 (326.80) Z	48.750	372.50 (326.80) Z	4.000	191.80 (168.20) T
1588	Plus polypectomy: ADD to gastro-intestinal endoscopy (Item 1587)	04.00	+	25.000	191.00 (167.50) Z	25.000	191.00 (167.50) Z	4.000	191.80 (168.20) T
1589	Endoscopic control of gastrointestinal haemorrhage from upper gastrointestinal tract, intestines or large bowel by injection, ligation or application of energy device (endoscopic haemostasis) to be added to gastroscopy (item 1587) or colonoscopy (item 1653)	04.00	+	34.000	259.80 (227.90)	34.000	259.80 (227.90)	6.000	287.70 (252.40) T
1591	Plus removal of foreign bodies (stomach): ADD to gastro-intestinal endoscopy (Item 1587)	04.00	+	25.000	191.00 (167.50) Z	25.000	191.00 (167.50) Z	4.000	191.80 (168.20) T
1593	Augmented histamine test: Gastric intubation with x-ray screening	04.00		5.000	38.20 (33.50)	5.000	38.20 (33.50)		
1597	Gastrostomy or Gastrostomy	04.00		147.500	1126.90 (988.50)	120.000	916.80 (804.20)	6.000	287.70 (252.40) T
1598	Gastrostomy with suture repair of bleeding ulcer	05.03		251.200	1919.20 (1683.50) Z	200.960	1535.30 (1346.80) Z	6.000	287.70 (252.40) T
1599	Pyloromyotomy (Rammstedt)	04.00		116.000	886.20 (777.40)	116.000	886.20 (777.40)	6.000	287.70 (252.40) T
1601	Local excision of ulcer or benign neoplasm	04.00		195.600	1494.40 (1310.90)	156.480	1195.50 (1048.70)	6.000	287.70 (252.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1603	Vagotomy: Abdominal	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	6.000	287.70 (252.40) T
1604	Vagotomy: Thoracic	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	11.000	527.50 (462.70) T
1605	Truncal or selective with drainage procedures	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	6.000	287.70 (252.40) T
1607	Vagotomy and antrectomy	04.00		320.000	2444.80 (2144.60)	256.000	1955.80 (1715.60)	6.000	287.70 (252.40) T
1609	Highly selective vagotomy	04.00		250.000	1910.00 (1675.40)	200.000	1528.00 (1340.40)	6.000	287.70 (252.40) T
1611	Pyloroplasty	04.00		180.200	1376.70 (1207.60)	144.160	1101.40 (966.10)	6.000	287.70 (252.40) T
1613	Gastroenterostomy	04.00		203.600	1555.50 (1364.50)	162.880	1244.40 (1091.60)	6.000	287.70 (252.40) T
1615	Suture of perforated gastric or duodenal ulcer or wound or injury	04.00		200.000	1528.00 (1340.40)	160.000	1222.40 (1072.30)	7.000	335.70 (294.50) T
1617	Partial gastrectomy	04.00		328.300	2508.20 (2200.20)	262.640	2006.60 (1760.20)	7.000	335.70 (294.50) T
1619	Total gastrectomy	04.00		384.430	2937.00 (2576.30)	307.540	2349.60 (2061.10)	7.000	335.70 (294.50) T
1621	Revision of gastrectomy or gastro-enterostomy	04.00		375.000	2865.00 (2513.20)	300.000	2292.00 (2010.50)	7.000	335.70 (294.50) T
1625	Gastro-esophageal operation for portal hypertension (Tanner)	04.00		375.000	2865.00 (2513.20)	300.000	2292.00 (2010.50)	11.000	527.50 (462.70) T
8.7	Duodenum								
1626	Endoscopic examination of the small bowel beyond the duodenojejunal flexure with biopsy with or without polypectomy with or without arrest of haemorrhage (enteroscopy)	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	6.000	287.70 (252.40) T
1627	Duodenal intubation (under X-ray screening)	04.00		8.000	61.10 (53.60)				
1629	Duodenal intubation with biliary drainage after gall bladder stimulation	04.00		21.000	160.40 (140.70)				
1631	Duodenal intubation: Under 3 years of age	06.04		15.000	114.60 (100.50)				
8.8	Intestines								
1632	H2 breath test (intestines)	04.00		9.000	68.80 (60.40)	9.000	68.80 (60.40)		
1633	Complete test using lactose or lactulose	04.00		27.000	206.30 (181.00)	27.000	206.30 (181.00)		
1634	Enterotomy or Enterostomy	04.11		202.600	1547.90 (1357.80)	162.080	1238.30 (1086.20)	6.000	287.70 (252.40) T
1635	Intestinal obstruction of the newborn	04.00		240.000	1833.60 (1608.40)	192.000	1466.90 (1286.80)	7.000	335.70 (294.50) T
1637	Operation for relief of intestinal obstruction	04.00		240.000	1833.60 (1608.40)	192.000	1466.90 (1286.80)	7.000	335.70 (294.50) T
1639	Resection of small bowel with enterostomy or anastomosis	04.00		244.900	1871.00 (1641.20)	195.920	1496.80 (1313.00)	6.000	287.70 (252.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1641	Entero-enterostomy or entero-colostomy for bypass	04.00		213.100	1628.10 (1428.20)	170.480	1302.50 (1142.50)	6.000	287.70 (252.40) T
1642	Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy): Hire fee (item 0201 applicable for video capsule - disposable single patient use) (Please note: All patients should have had a normal gastroscopy and colonoscopy)	05.03		150.000	1146.00 (1005.30) Z	120.000	916.80 (804.20) Z		
1643	Gastrointestinal tract imaging, intraluminal (e.g. video capsule endoscopy), oesophagus through ileum: Doctor interpretation and report	05.03		90.000	687.60 (603.20) Z	90.000	687.60 (603.20) Z		
1645	Suture of intestine (small or large): Perforated ulcer, wound or injury	04.00		185.200	1414.90 (1241.10)	148.160	1131.90 (992.90)	6.000	287.70 (252.40) T
1647	Closure of intestinal fistula	04.00		258.000	1971.10 (1729.00)	206.400	1576.90 (1383.20)	6.000	287.70 (252.40) T
1649	Excision of Meckel's diverticulum	04.00		179.800	1373.70 (1205.00)	143.840	1098.90 (963.90)	6.000	287.70 (252.40) T
1651	Excision of lesion of mesentery	04.00		171.600	1311.00 (1150.00)	137.280	1048.80 (920.00)	4.000	191.80 (168.20) T
1652	Laparotomy for mesenteric thrombosis	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)	8.000	383.60 (336.50) T
1653	Total colonoscopy: With hospital equipment (including biopsy)	04.00		90.000	687.60 (603.20) Z	90.000	687.60 (603.20) Z	4.000	191.80 (168.20) T
1654	Plus removal of polyps: ADD to colonoscopy (item 1653)	04.00	+	30.000	229.20 (201.10) Z	30.000	229.20 (201.10) Z	4.000	191.80 (168.20) T
1656	Left-sided colonoscopy	04.00		60.000	458.40 (402.10) Z	60.000	458.40 (402.10) Z	4.000	191.80 (168.20) T
1657	Right or left hemicolectomy or segmental colectomy	04.00		325.000	2483.00 (2178.10)	260.000	1986.40 (1742.50)	6.000	287.70 (252.40) T
1658	Reconstruction of colon after Hartman's procedure	04.00		359.400	2745.80 (2408.60)	287.520	2196.70 (1926.90)	6.000	287.70 (252.40) T
1661	Colotomy: Including removal of tumour or foreign body	04.00		205.700	1571.50 (1378.50)	164.560	1257.20 (1102.80)	6.000	287.70 (252.40) T
1663	Total colectomy	04.00		390.000	2979.60 (2613.70)	312.000	2383.70 (2091.00)	6.000	287.70 (252.40) T
1665	Colostomy or ileostomy isolated procedure	04.00		233.800	1786.20 (1566.80)	187.040	1429.00 (1253.50)	6.000	287.70 (252.40) T
1666	Continent ileostomy pouch (all types)	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)	6.000	287.70 (252.40) T
1667	Colostomy: Closure	04.00		179.100	1368.30 (1200.30)	143.280	1094.70 (960.30)	5.000	239.80 (210.40) T
1668	Revision of ileostomy pouch	04.00		375.000	2865.00 (2513.20)	300.000	2292.00 (2010.50)	6.000	287.70 (252.40) T
1669	Total proctocolectomy and ileostomy	04.00		480.000	3667.20 (3216.80)	384.000	2933.80 (2573.50)	7.000	335.70 (294.50) T
1670	Proctocolectomy, ileostomy and ileostomy pouch	04.00		540.000	4125.60 (3618.90)	432.000	3300.50 (2895.20)	7.000	335.70 (294.50) T
1671	Colomyotomy (Reilly operation)	04.00		185.000	1413.40 (1239.80)	148.000	1130.70 (991.80)	6.000	287.70 (252.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
8.9	Appendix								
1673	Drainage of appendix abscess	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
1675	Appendicectomy	04.00		160.000	1222.40 (1072.30)	128.000	977.90 (857.80)	4.000	191.80 (168.20) T
8.10	Rectum and anus								
1676	Flexible sigmoidoscopy (including rectum and anus): Hospital equipment.	04.00		48.750	372.50 (326.80) Z	48.750	372.50 (326.80) Z	3.000	143.90 (126.20) T
1677	Sigmoidoscopy: First and subsequent, with or without biopsy	04.00		13.000	99.30 (87.10)	13.000	99.30 (87.10)	3.000	143.90 (126.20) T
1678	Plus polypectomy: ADD to sigmoidoscopy (Item 1676)	04.00	+	25.000	191.00 (167.50) Z	25.000	191.00 (167.50) Z	3.000	143.90 (126.20) T
1679	Sigmoidoscopy with removal of polyps, first and subsequent	04.00		30.000	229.20 (201.10)	30.000	229.20 (201.10)	3.000	143.90 (126.20) T
1681	Proctoscopy with removal of polyps: First time	04.00		21.000	160.40 (140.70)	21.000	160.40 (140.70)	3.000	143.90 (126.20) T
1683	Proctoscopy with removal of polyps: Subsequent times	04.00		15.000	114.60 (100.50)	15.000	114.60 (100.50)	3.000	143.90 (126.20) T
1685	Endoscopic fulguration of tumour	04.00		50.000	382.00 (335.10)	50.000	382.00 (335.10)	4.000	191.80 (168.20) T
1687	Anterior resection of rectum performed for carcinoma of rectum including excision of any part of proximal colon necessary	04.00		381.300	2913.10 (2555.40)	305.040	2330.50 (2044.30)	6.000	287.70 (252.40) T
1688	Total mesorectal excision with colo-anal anastomosis and defunctioning enterostomy or colostomy	04.00		445.000	3399.80 (2982.30)	356.000	2719.80 (2385.80)	8.000	383.60 (336.50) T
1689	Perineal resection of rectum	04.00		141.000	1077.20 (944.90)	120.000	916.80 (804.20)	5.000	239.80 (210.40) T
	Please note: Items 1691 and 1692: Abdominal and/or perineal assistant's fee to be charged additionally.	04.00							
1691	Abdomino-perineal resection of rectum: Abdominal surgeon	04.00		409.300	3127.10 (2743.10)	327.440	2501.60 (2194.40)	7.000	335.70 (294.50) T
1692	Abdomino-perineal resection of rectum: Perineal surgeon	04.00		158.500	1210.90 (1062.20)	126.800	968.80 (849.80)		
1693	Abdomino-perineal resection of rectum: Local excision of rectal tumour (posterior approach)	04.00		200.000	1528.00 (1340.40)	160.000	1222.40 (1072.30)	4.000	191.80 (168.20) T
1695	Abdomino-perineal resection of rectum: Combined abdomino-anal pull-through procedure for Hirschsprung's disease, rectal agenesis or tumour	04.00		400.000	3056.00 (2680.70)	320.000	2444.80 (2144.60)	7.000	335.70 (294.50) T
1697	Repair of prolapsed rectum: Abdominal: Roscoe Graham Moskovitz	04.00		300.000	2292.00 (2010.50)	240.000	1833.60 (1608.40)	6.000	287.70 (252.40) T
1699	Repair of prolapsed rectum: Abdominal: Ivalon sponge	04.00		200.000	1528.00 (1340.40)	160.000	1222.40 (1072.30)	6.000	287.70 (252.40) T
1701	Repair of prolapsed rectum: Abdominal: Perineal	04.00		150.000	1146.00 (1005.30)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T
1703	Repair of prolapsed rectum: Abdominal: Thierisch suture	04.00		35.000	267.40 (234.60)	35.000	267.40 (234.60)	4.000	191.80 (168.20) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1705	Incision and drainage of peri-anal abscess	04.00		40.000	305.60 (268.10)	40.000	305.60 (268.10)	3.000	143.90 (126.20) T
1707	Drainage of submucous abscess	04.00		40.000	305.60 (268.10)	40.000	305.60 (268.10)	3.000	143.90 (126.20) T
1709	Drainage of ischio-rectal abscess	04.00		87.000	664.70 (583.10)	87.000	664.70 (583.10)	3.000	143.90 (126.20) T
1711	Excision of pelvi-rectal fistula	04.00		200.000	1528.00 (1340.40)	160.000	1222.40 (1072.30)	5.000	239.80 (210.40) T
1713	Excision of fistula-in-ano	04.00		105.000	802.20 (703.70)	105.000	802.20 (703.70)	3.000	143.90 (126.20) T
1715	Operation for fissure-in-ano	04.00		66.800	510.40 (447.70)	66.800	510.40 (447.70)	3.000	143.90 (126.20) T
1719	Rubber band ligation of haemorrhoids: Per haemorrhoid	04.00		10.000	76.40 (67.00)	10.000	76.40 (67.00)	3.000	143.90 (126.20) T
1721	Sclerosing injection for haemorrhoids: Per injection	04.00		5.000	38.20 (33.50)	5.000	38.20 (33.50)		
1723	Haemorrhoidectomy	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	3.000	143.90 (126.20) T
1725	Drainage of external thrombosed pile	04.00		12.500	95.50 (83.80)	12.500	95.50 (83.80)	3.000	143.90 (126.20) T
1727	Multiple procedures (haemorrhoids, fissure, etc.)	04.00		90.000	687.60 (603.20)	90.000	687.60 (603.20)	3.000	143.90 (126.20) T
1728	Biopsy of ano-rectal wall, for congenital megacolon	05.03		60.600	463.00 (406.10) Z	60.600	463.00 (406.10) Z	5.000	239.80 (210.40) T
1729	Excision of anal skin tags	04.00		25.000	191.00 (167.50)	25.000	191.00 (167.50)	3.000	143.90 (126.20) T
1731	Operation for low imperforate anus	04.00		105.000	802.20 (703.70)	105.000	802.20 (703.70)	6.000	287.70 (252.40) T
1733	Anoplasty: Y-V-plasty	04.00		41.000	313.20 (274.70)	41.000	313.20 (274.70)	3.000	143.90 (126.20) T
1735	Anal sphincteroplasty for incontinence	04.00		120.000	916.80 (804.20)	120.000	916.80 (804.20)	3.000	143.90 (126.20) T
1737	Dilation of ano-rectal stricture	04.00		12.500	95.50 (83.80)	12.500	95.50 (83.80)	3.000	143.90 (126.20) T
1739	Closure of recto-vesical fistula	04.00		241.000	1841.20 (1615.10)	192.800	1473.00 (1292.10)	5.000	239.80 (210.40) T
1741	Closure of recto-urethral fistula	04.00		241.000	1841.20 (1615.10)	192.800	1473.00 (1292.10)	5.000	239.80 (210.40) T
1742	Bio-feedback training for faecal incontinence during anorectal manometry performed by doctor	04.00		27.000	206.30 (181.00)	27.000	206.30 (181.00)		
8.11	Liver								
1743	Needle biopsy of liver	04.00		30.300	231.50 (203.10)	30.300	231.50 (203.10)	3.000	143.90 (126.20) T
1745	Biopsy of liver by laparotomy	04.00		125.000	955.00 (837.70)	120.000	916.80 (804.20)	4.000	191.80 (168.20) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1747	Drainage of liver abscess or cyst	04.00		179.100	1368.30 (1200.30)	143.280	1094.70 (960.30)	7.000	335.70 (294.50) T
1748	Body composition measured by bio-electrical impedance	04.00		3.000	22.90 (20.10)	3.000	22.90 (20.10)		
1749	Hemi-hepatectomy: Right	04.00		564.000	4309.00 (3779.80)	451.200	3447.20 (3023.90)	9.000	431.60 (378.60) T
1751	Hemi-hepatectomy: Left	04.00		521.100	3981.20 (3492.30)	416.880	3185.00 (2793.90)	9.000	431.60 (378.60) T
1752	Extended right or left hepatectomy	04.00		570.900	4361.70 (3826.10)	456.720	3489.30 (3060.80)	9.000	431.60 (378.60) T
1753	Partial or segmental hepatectomy	04.00		378.000	2887.90 (2533.20)	302.400	2310.30 (2026.60)	9.000	431.60 (378.60) T
1754	Hepatico-jejunostomy	04.00		369.200	2820.70 (2474.30)	295.360	2256.60 (1979.50)	9.000	431.60 (378.60) T
1755	Liver transplant	04.00		1400.80 0	10702.10 (9387.80)	1120.64 0	8561.70 (7510.30)	15.000	719.30 (631.00) T
1756	Harvesting donor hepatectomy	04.00		616.200	4707.80 (4129.60)	492.960	3766.20 (3303.70)	5.000	239.80 (210.40) T
1757	Suture of liver wound or injury	04.00		214.200	1636.50 (1435.50)	171.360	1309.20 (1148.40)	9.000	431.60 (378.60) T
8.12	Biliary tract								
1759	Cholecystostomy	04.00		171.600	1311.00 (1150.00)	137.280	1048.80 (920.00)	6.000	287.70 (252.40) T
1761	Cholecystectomy	04.00		225.000	1719.00 (1507.90)	180.000	1375.20 (1206.30)	6.000	287.70 (252.40) T
1762	Cholecystectomy and operative cholangiogram	04.00		255.000	1948.20 (1708.90)	204.000	1558.60 (1367.20)	6.000	287.70 (252.40) T
1763	With exploration of common bile duct	04.00		264.500	2020.80 (1772.60)	211.600	1616.60 (1418.10)	6.000	287.70 (252.40) T
1765	Exploration of common bile duct: Secondary operation	04.00		327.700	2503.60 (2196.10)	262.160	2002.90 (1756.90)	6.000	287.70 (252.40) T
1767	Reconstruction of common bile duct	04.00		371.700	2839.80 (2491.10)	297.360	2271.80 (1992.80)	6.000	287.70 (252.40) T
1768	Resection bile duct tumour with reconstruction	04.00		327.700	2503.60 (2196.10)	262.160	2002.90 (1756.90)	6.000	287.70 (252.40) T
1769	Cholecysto-enterostomy or gastrostomy	04.00		236.300	1805.30 (1583.60)	189.040	1444.30 (1266.90)	6.000	287.70 (252.40) T
1772	Endoscopic placement of a nasobiliary drainage tube: ADD to ERCP (item 1778)	06.04	+	25.600	195.60 (171.60)	25.600	195.60 (171.60)	6.000	287.70 (252.40) T
1773	Transduodenal sphincteroplasty	04.00		225.000	1719.00 (1507.90)	180.000	1375.20 (1206.30)	6.000	287.70 (252.40) T
1774	Balloon dilatation of common bile duct strictures	04.00		125.000	955.00 (837.70)	100.000	764.00 (670.20)	6.000	287.70 (252.40) T
1775	Excision choledochal cyst with reconstruction	04.00		327.700	2503.60 (2196.10)	262.160	2002.90 (1756.90)	6.000	287.70 (252.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
1777	Porto-enterostomy for biliary atresia	04.00		400.000	3056.00 (2680.70)	320.000	2444.80 (2144.60)	11.000	527.50 (462.70) T
8.13	Pancreas								
1778	Endoscopic Retrograde Cholangiopancreatography (ERCP): Endoscopy + catheterisation of pancreas duct or choledochus	04.00		105.900	809.10 (709.70)	105.900	809.10 (709.70)	4.000	191.80 (168.20) T
1779	Endoscopic retrograde removal of stone(s) as for biliary and/or pancreatic duct. ADD to ERCP (item 1778)	04.00	+	15.820	120.90 (106.10)	15.820	120.90 (106.10)	4.000	191.80 (168.20) T
1780	Gastric and duodenal intubation	04.00		8.000	61.10 (53.60)	8.000	61.10 (53.60)		
1781	Procedure (excluding laboratory tests)	04.00		21.000	160.40 (140.70)	21.000	160.40 (140.70)		
1782	Endoscopic Sphincterotomy: ADD to ERCP (item 1778)	04.00	+	30.000	229.20 (201.10)	30.000	229.20 (201.10)	4.000	191.80 (168.20) T
1783	Drainage of pancreatic abscess	04.00		239.300	1828.30 (1603.80)	191.440	1462.60 (1283.00)	6.000	287.70 (252.40) T
1784	Debridement pancreatic necrosis	04.00		348.400	2661.80 (2334.90)	278.720	2129.40 (1867.90)	6.000	287.70 (252.40) T
1785	Internal drainage of pancreatic cyst	04.00		250.600	1914.60 (1679.50)	200.480	1531.70 (1343.60)	6.000	287.70 (252.40) T
1770	Endoscopic placement of bilioduodenal endoprosthesis: ADD to ERCP (item 1778)	04.00	+	30.000	229.20 (201.10)	30.000	229.20 (201.10)	6.000	287.70 (252.40) T
1786	Internal drainage of pancreatic cyst with Roux-Y	04.00		306.800	2344.00 (2056.10)	245.440	1875.20 (1644.90)	6.000	287.70 (252.40) T
1787	Operative pancreatogram: ADD	04.00	+	10.000	76.40 (67.00)	10.000	76.40 (67.00)		
1788	Biopsy of pancreas	04.00		177.700	1357.60 (1190.90)	142.160	1086.10 (952.70)	6.000	287.70 (252.40) T
1789	Pancreatico-duodenectomy	04.00		704.800	5384.70 (4723.40)	563.840	4307.70 (3778.70)	8.000	383.60 (336.50) T
1791	Local, partial or subtotal pancreatectomy	04.00		351.300	2683.90 (2354.30)	281.040	2147.10 (1883.40)	8.000	383.60 (336.50) T
1793	Distal pancreatectomy with internal drainage	04.00		377.400	2883.30 (2529.20)	301.920	2306.70 (2023.40)	8.000	383.60 (336.50) T
8.14	Peritoneal cavity								
1797	Pneumo-peritoneum: First	04.00		13.000	99.30 (87.10)	13.000	99.30 (87.10)	4.000	191.80 (168.20) T
1799	Pneumo-peritoneum: Repeat	04.00		6.000	45.80 (40.20)	6.000	45.80 (40.20)	4.000	191.80 (168.20) T
1800	Peritoneal lavage	04.00		20.000	152.80 (134.00)	20.000	152.80 (134.00)		
1801	Diagnostic paracentesis: Abdomen	04.00		8.000	61.10 (53.60)	8.000	61.10 (53.60)		
1803	Therapeutic paracentesis: Abdomen	04.00		13.000	99.30 (87.10)	13.000	99.30 (87.10)		
1807	ADD to open procedure where procedure was performed through a laparoscope (for anaesthetic refer to modifier 0027)	04.00	+	45.000	343.80 (301.60)	45.000	343.80 (301.60)	5.000	239.80 (210.40) T
1809	Laparotomy	04.00		196.000	1497.40 (1313.50)	156.800	1198.00 (1050.90)	4.000	191.80 (168.20) T