

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
6214	Magnetic Resonance Imaging: Per anatomical region: Pelvis	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6215	Magnetic Resonance Imaging: Per anatomical region: Pelvic organs	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6216	Magnetic Resonance Imaging: Per anatomical region: Abdomen	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6217	Magnetic Resonance Imaging: Per anatomical region: Thorax wall	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6218	Magnetic Resonance Imaging: Per anatomical region: Mediastinum	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6219	Magnetic Resonance Imaging: Per anatomical region: Soft tissue: Back	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6220	Magnetic Resonance Imaging: Per anatomical region: Left shoulder	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6221	Magnetic Resonance Imaging: Per anatomical region: Right shoulder	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6222	Magnetic Resonance Imaging: Per anatomical region: Both hips	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6223	Magnetic Resonance Imaging: Per anatomical region: Left hip	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6224	Magnetic Resonance Imaging: Per anatomical region: Right hip	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6225	Magnetic Resonance Imaging: Per anatomical region: Left upper-arm	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6226	Magnetic Resonance Imaging: Per anatomical region: Right upper-arm	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6227	Magnetic Resonance Imaging: Per anatomical region: Left elbow	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6228	Magnetic Resonance Imaging: Per anatomical region: Right elbow	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6229	Magnetic Resonance Imaging: Per anatomical region: Left fore-arm	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6230	Magnetic Resonance Imaging: Per anatomical region: Right fore-arm	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6231	Magnetic Resonance Imaging: Per anatomical region: Left wrist and hand	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6232	Magnetic Resonance Imaging: Per anatomical region: Right wrist and hand	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6233	Magnetic Resonance Imaging: Per anatomical region: Left upper-leg	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6234	Magnetic Resonance Imaging: Per anatomical region: Right upper-leg	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6235	Magnetic Resonance Imaging: Per anatomical region: Left knee	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
6236	Magnetic Resonance Imaging: Per anatomical region: Right knee	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6237	Magnetic Resonance Imaging: Per anatomical region: Left lower-leg	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6238	Magnetic Resonance Imaging: Per anatomical region: Right lower-leg	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6239	Magnetic Resonance Imaging: Per anatomical region: Left ankle	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6240	Magnetic Resonance Imaging: Per anatomical region: Right ankle	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6241	Magnetic Resonance Imaging: Per anatomical region: Left foot	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6242	Magnetic Resonance Imaging: Per anatomical region: Right foot	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6250	Magnetic Resonance angiography (See modifiers 6106 to 6108): Brain	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6251	Magnetic Resonance angiography (See modifiers 6106 to 6108): Large vessels: Neck	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6252	Magnetic Resonance angiography (See modifiers 6106 to 6108): Large vessels: Chest	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6253	Magnetic Resonance angiography (See modifiers 6106 to 6108): Large vessels: Abdomen	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6254	Magnetic Resonance angiography (See modifiers 6106 to 6108): Large vessels: Legs	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6255	Magnetic Resonance angiography (See modifiers 6106 to 6108): Heart	04.00				400.000	3294.80 (2890.20)	5.000	239.80 (210.40) T
6260	Contrast medium: Current price according the regular price list published by the Radiology Society of SA	04.00							
6270	Low field strength peripheral joint magnetic resonance imaging: Low field strength peripheral joint examination (feet, knees, hands, and elbows), in dedicated limb units not able to perform body, spine or head examinations	04.00				70.000	576.60 (505.80)	5.000	239.80 (210.40) T
20	Radiation Oncology								
	GENERAL RULES REGARDING THIS SECTION OF THE NATIONAL REFERENCE PRICE LIST								04.00
	(a) Unless specifically stated in this section of the NRPL-HS, the general descriptors between the professional and technical component apply to both components of the services.								
	(b) The items reflecting the technical component in this section of the NRPL-HS may only be charged by the owner of the equipment.								
BB.	The fees in this section (radiation oncology) do NOT include the cost of radium or isotopes								04.00
	Please note: The calculated amounts in this section are calculated according to the radiotherapy unit values								04.00
20.1	Kilovolt therapy								
20.2	Radium therapy								
20.3	Isotope therapy								
0096	Radio-isotope therapy patients who fail to keep their appointments: Fee will include cost of isotope								04.00

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
20.4	Megavolt therapy								
20.5	Beta-ray therapy with strontium-90-applicator								
20.6	Planning of therapy								
20.7	Technical aids								
5141	Radiation materials (see modifier 0095)	05.03							
20.8	Oncological surgical procedures								
20.9	Special procedures								
20.10	Chemotherapy								
	Where patients are not treated in chemotherapy facilities, items 0213, 0214 and 0215 are used instead of items 5790, 5793 and 5795. Codes 0213, 0214 and 0215 are applicable to providers who only administer the drugs i.e. don't own or rent a facility and do not manage the patient.								04.11
	Codes 5790 to 5795 are for exclusive use by oncology trained doctors working within chemotherapy facilities								04.11
5790	Non Infusional Chemotherapy: Global Fee for the management of and for related services delivered in the treatment of cancer with oral chemotherapy (per cycle), intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy or oncology specific drug administration per treatment day - for exclusive use by doctors with appropriate oncology training (consultations to be charged separately) - (not applicable to oral hormonal therapy)	04.11		42.950	328.10 (287.80) Z	42.950	328.10 (287.80) Z		
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 or oncology specific drug administration 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) - (not applicable to oral hormonal therapy) - only one of the parties are to charge this fee	05.03		24.490	187.10 (164.10) Z	24.490	187.10 (164.10) Z		
5792	Non Infusional Chemotherapy Facility Fee: A facility where oncology medicines are purchased, stored and dispensed during oral chemotherapy (per cycle), intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy or oncology specific drug administration 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) - (not applicable to oral hormonal therapy) - only one of the parties are to charge this fee	05.03		30.610	233.90 (205.20) Z	30.610	233.90 (205.20) Z		
	Non-infusional chemotherapy: Consultations are charged separately.	05.05							
	Non-infusional chemotherapy: In the case of intramuscular (IMI), subcutaneous, intrathecal or bolus chemotherapy administration the management fee can only be charged once per treatment day. Consultations are charged separately.								04.11
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)	04.11		159.470	1218.40 (1068.80) Z	127.580	974.70 (855.00) Z		
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	05.03		90.030	687.80 (603.30) Z	90.030	687.80 (603.30) Z		

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
66
67
68
69
70
71
72
73
74
75
76
77
78
79
80
81
82
83
84
85
86
87
88
89
90
91
92
93
94
95
96
97
98
99
100

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
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. 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	04.11		112.540	859.80 (754.20) Z	112.540	859.80 (754.20) Z		
	Item 5795 is chargeable in addition to item 5793 by the Oncologist who owns or rents the chemotherapy 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 (only to be added to item 5793 if own or rented facility is used).	04.11							
20.11	Radiation Therapy Planning								
20.11.1	Manual Radiotherapy Planning Procedures								
5801	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Single Volume of Interest - PROFESSIONAL COMPONENT	05.03		42.560	395.20 (346.70) Z				
5601	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Single Volume of Interest - TECHNICAL COMPONENT	05.01		99.320	922.30 (809.00) Z				
5802	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Multiple Volumes of Interest - PROFESSIONAL COMPONENT	05.03		56.180	521.70 (457.60) Z				
5602	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Multiple Volumes of Interest - TECHNICAL COMPONENT	05.01		131.100	1217.40 (1067.90) Z				
5803	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Special Technique - PROFESSIONAL COMPONENT	05.03		76.620	711.50 (624.10) Z				
5603	Manual Radiotherapy Planning Procedures: No Simulation, Limited Graphic Planning, Special Technique - TECHNICAL COMPONENT	05.01		178.770	1660.10 (1456.20) Z				
20.11.2	Conventional Radiotherapy Planning Procedures								
5808	Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Single Volume of Interest - PROFESSIONAL COMPONENT	05.03		170.260	1581.00 (1386.80) Z				
5608	Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Single Volume of Interest - TECHNICAL COMPONENT	05.01		397.270	3689.00 (3236.00) Z				
5809	Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Multiple Volumes of Interest - PROFESSIONAL COMPONENT	05.03		238.360	2213.40 (1941.60) Z				
5609	Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Multiple Volumes of Interest - TECHNICAL COMPONENT	05.01		556.180	5164.70 (4530.40) Z				
5810	Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Special Technique - PROFESSIONAL COMPONENT	05.03		297.950	2766.80 (2427.00) Z				
5610	Conventional Radiotherapy Planning: Simulation, Limited Graphic Planning, Special Technique - TECHNICAL COMPONENT	05.01		695.220	6455.80 (5663.00) Z				
20.11.3	Three Dimensional Radiotherapy Planning Procedures								
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)	06.02		240.230	2230.80 (1956.80) Z				
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)	06.02		977.200	9074.30 (7959.90) Z				
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)	06.02		407.750	3786.40 (3321.40) Z				

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
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)	06.02		1368.07	12703.90 (11143.80) Z				
5822	Three Dimensional Radiotherapy Planning Procedures: 3-Dimensional Simulation and Graphic Planning, Special Technique - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI)	06.02		554.330	5147.50 (4515.40) Z				
5622	Three Dimensional Radiotherapy Planning Procedures: 3-Dimensional Simulation and Graphic Planning, Special Technique - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI)	06.02		1710.09	15879.90 (13929.70) Z				
20.11.4	Intensity Modulated Radiotherapy Planning Procedures								
5823	Intensity Modulated Radiotherapy Planning Procedures: Intensity Modulated Radiotherapy Simulation, Inverse Planning, Radical Course - PROFESSIONAL COMPONENT (excludes imaging costs for CT and MRI)	06.02		642.920	5970.20 (5237.00) Z				
5623	Intensity Modulated Radiotherapy Planning Procedures: Intensity Modulated Radiotherapy Simulation, Inverse Planning, Radical Course - TECHNICAL COMPONENT (excludes imaging costs for CT and MRI)	06.02		1916.81	17799.50 (15613.60) Z				
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)	06.02		232.180	2156.00 (1891.20) Z				
5625	Intensity Modulated Radiotherapy 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)	06.02		958.400	8899.70 (7806.80) Z				
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)	06.02		753.350	6995.60 (6136.50) Z				
5626	Intensity Modulated Radiotherapy 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)	06.02		2174.48	20192.20 (17712.50) Z				
20.11.5	Kilovolt Radiation Treatment								
5834	Kilovolt Radiation Treatment: Weekly Treatment, Kilovolt or Similar, per week or part thereof - PROFESSIONAL COMPONENT	05.03		49.080	455.80 (399.80) Z				
5634	Kilovolt Radiation Treatment: Weekly Treatment, Kilovolt or Similar, per week or part thereof - TECHNICAL COMPONENT	05.01		114.520	1063.40 (932.80) Z				
20.11.6	Short Course Radiation Treatment								
5835	Short Course Radiation Treatment: Short course treatment, Single Volume of Interest - PROFESSIONAL COMPONENT	05.03		105.740	981.90 (861.30) Z				
5635	Short Course Radiation Treatment: Short course treatment, Single Volume of Interest - TECHNICAL COMPONENT	05.01		246.730	2291.10 (2009.70) Z				
5836	Short Course Radiation Treatment: Short course treatment, Multiple Volumes of Interest - PROFESSIONAL COMPONENT	05.03		148.040	1374.70 (1205.90) Z				
5636	Short Course Radiation Treatment: Short course treatment, Multiple Volumes of Interest - TECHNICAL COMPONENT	05.01		345.410	3207.50 (2813.60) Z				
5837	Short Course Radiation Treatment: Short course Treatment, Special Technique - PROFESSIONAL COMPONENT	05.03		190.330	1767.40 (1550.40) Z				
5637	Short Course Radiation Treatment: Short course Treatment, Special Technique - TECHNICAL COMPONENT	05.01		444.110	4124.00 (3617.50) Z				

Code	Description	Var	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
20.11.7	Weekly Radiation Treatment Sessions								
20.11.7.1	Weekly Radiation Treatment Sessions - Conventional Techniques								
5839	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Single Volume of Interest - PROFESSIONAL COMPONENT	05.03		193.860	1800.20 (1579.10) Z				
5839	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Single Volume of Interest - TECHNICAL COMPONENT	05.01		452.330	4200.30 (3684.50) Z				
5840	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Multiple Volumes of Interest - PROFESSIONAL COMPONENT	05.03		246.730	2291.10 (2009.70) Z				
5840	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Multiple Volumes of Interest - TECHNICAL COMPONENT	05.01		575.690	5345.90 (4689.40) Z				
5841	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Special Technique - PROFESSIONAL COMPONENT	05.03		317.220	2945.70 (2583.90) Z				
5841	Weekly Radiation Treatment Sessions - Conventional Techniques: Weekly Treatment, Special Technique - TECHNICAL COMPONENT	05.01		740.180	6873.30 (6029.20) Z				
20.11.7.2	Weekly Radiation Treatment Sessions - Advanced Techniques								
5849	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Single Volume of Interest - PROFESSIONAL COMPONENT	05.03		236.240	2193.70 (1924.30) Z				
5849	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Single Volume of Interest - TECHNICAL COMPONENT	05.01		551.210	5118.50 (4489.90) Z				
5850	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Multiple Volumes of Interest - PROFESSIONAL COMPONENT	05.03		330.730	3071.20 (2694.00) Z				
5850	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Multiple Volumes of Interest - TECHNICAL COMPONENT	05.01		771.710	7166.10 (6286.10) Z				
5851	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Special Technique - PROFESSIONAL COMPONENT	05.03		425.230	3948.70 (3463.80) Z				
5851	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Multi Leaf Collimators, Special Technique - TECHNICAL COMPONENT	05.01		992.190	9213.50 (8082.00) Z				
5854	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Intensity Modulated Radiotherapy - PROFESSIONAL COMPONENT	05.03		348.870	3239.60 (2841.80) Z				
5854	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Intensity Modulated Radiotherapy - TECHNICAL COMPONENT	05.01		814.030	7559.10 (6630.80) Z				
5855	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Total Body Radiotherapy or Similar - PROFESSIONAL COMPONENT	05.03		826.830	7677.90 (6735.00) Z				
5855	Weekly Radiation Treatment Sessions - Advanced Techniques: Weekly Treatment, Total Body Radiotherapy or Similar - TECHNICAL COMPONENT	05.01		1929.26	17915.10 (15715.00) Z	0			
20.11.8	Stereotactic Radiation								
5860	Stereotactic Radiation: Stereotactic Radiation, Single or up to 4 (four) Fractions, Global Fee - PROFESSIONAL COMPONENT	05.03		3719.34	34537.80 (30296.30) Z	0			
5860	Stereotactic Radiation: Stereotactic Radiation, Single Fraction, Global Fee - TECHNICAL COMPONENT	05.01		8678.46	80588.20 (70891.40) Z	0			
5861	Stereotactic Radiation: Stereotactic Radiation, 5 (five) or more Fractions, Full course, Global Fee - PROFESSIONAL COMPONENT	05.03		4277.24	39718.50 (34840.80) Z	0			

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
5661	Stereotactic Radiation: Stereotactic Radiation, Fractionated, Full course, Global Fee - TECHNICAL COMPONENT	05.01		9980.230	92676.40 (81295.10) Z				
20.12	Brachytherapy								
20.12.1	Isotope/Applicator Therapy								
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	05.03		108.400	1006.60 (883.00) Z				
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	05.03		216.800	2013.20 (1766.00) Z				
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	05.03		601.160	5582.40 (4896.80) Z				
20.12.2	Brachytherapy Implants								
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	05.03		216.800	2013.20 (1766.00) Z				
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	05.03		786.800	7306.20 (6408.90) Z				
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	05.03		1049.070	9741.70 (8545.40) Z				
20.12.3	Brachytherapy Treatment								
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	05.03		613.040	5692.70 (4993.60) Z				
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	05.03		415.960	3862.60 (3388.20) Z				
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	05.03		970.560	9012.60 (7905.80) Z				
20.12.4	Brachytherapy Imaging								
5895	Brachytherapy imaging: Brachytherapy: Special imaging where needed and if used, unusual to be added to any code other than items 5883 or 5885	05.03		156.770	1455.80 (1277.00) Z				
21	Clinical Pathology								
0097	Pathology tests performed by non-pathologists: Where items under Clinical Pathology (section 21) and Anatomical Pathology (section 22) fall within the province of other specialists or general practitioners, the fee is to be charged at two-thirds of the pathologists fee								04.00
	Please note: The calculated amounts in this section are calculated according to the clinical pathology unit values. Note: For fees for Histology and Cytology refer to items 4561-4593 under Section 22: Anatomical Pathology.								04.00
21.1	Haematology								
3705	Alkali resistant haemoglobin	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3709	Antiglobulin test (Coombs' or trypsinized red cells)	04.00		3.650	32.20 (28.20)	2.450	21.60 (18.90)		
3710	Antibody titration	04.00		7.200	63.60 (55.80)	4.800	42.40 (37.20)		
3712	Antibody identification	04.00		8.450	74.60 (65.40)	5.650	49.90 (43.80)		
3713	Bleeding time (does not include the cost of the simplate device)	04.00		6.940	61.30 (53.80)	4.630	40.90 (35.90)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3714	Blood volume, dye method	04.00		7.200	63.60 (55.80)	4.800	42.40 (37.20)		
3715	Buffy layer examination	04.00		19.900	175.80 (154.20)	13.270	117.20 (102.80)		
3716	Mean Cell Volume	04.00		2.250	-	1.500	-		
3717	Bone marrow cytological examination only	04.00		19.900	175.80 (154.20)	13.270	117.20 (102.80)		
3719	Bone marrow: Aspiration	04.00		8.400	74.20 (65.10)	5.600	49.50 (43.40)		
3720	Bone marrow trephine biopsy	04.00		32.600	288.00 (252.60)	21.700	191.70 (168.20)		
3721	Bone marrow aspiration and trephine biopsy (excluding histology)	04.00		36.800	325.10 (285.20)	24.500	216.40 (189.80)		
3722	Capillary fragility: Hess	04.00		2.020	17.80 (15.60)	1.350	11.90 (10.40)		
3723	Circulating anticoagulants	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3724	Coagulation factor inhibitor assay	04.00		57.560	508.40 (446.00)	38.370	338.90 (297.30)		
3726	Activated protein C resistance	04.00		26.000	229.70 (201.50)	17.300	152.80 (134.00)		
3727	Coagulation time	04.00		3.160	27.90 (24.50)	2.110	18.60 (16.30)		
3728	Anti-factor Xa Activity	04.00		53.600	473.40 (415.30)	35.730	315.60 (276.80)		
3729	Cold agglutinins	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3730	Protein S: Functional	04.00		37.500	331.20 (290.50)	25.000	220.80 (193.70)		
3731	Compatibility for blood transfusion	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3732	Cryoglobulin	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3734	Protein C (chromogenic)	04.00		30.290	267.60 (234.70)	20.190	178.30 (156.40)		
3735	Anti-thrombin III (chromogenic)	04.00		22.000	194.30 (170.40)	14.700	129.80 (113.90)		
3736	Plasminogen (chromogenic)	04.00		61.650	544.60 (477.70)	41.100	363.00 (318.40)		
3737	Lupus Russel Viper method	04.00		17.000	150.20 (131.80)	11.300	99.80 (87.50)		
3738	Lupus Kaolin Exner method	04.00		25.000	220.80 (193.70)	16.700	147.50 (129.40)		
3739	Erythrocyte count	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3740	Factors V and VII: Qualitative	04.00		7.200	63.60 (55.80)	4.800	42.40 (37.20)		
3741	Coagulation factor assay: Functional	04.00		9.450	83.50 (73.20)	6.300	55.60 (48.80)		
3743	Erythrocyte sedimentation rate	04.00		3.000	26.50 (23.20)	2.000	17.70 (15.50)		
3744	Fibrin stabilizing factor (urea test)	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3746	Fibrin monomers	04.00		2.700	23.80 (20.90)	1.800	15.90 (13.90)		
3748	Plasminogen activator inhibitor (PAI-I)	04.00		65.950	582.50 (511.00)	43.970	388.40 (340.70)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3750	Tissue plasminogen Activator (tPA)	04.00		67.790	598.80 (525.30)	45.190	399.20 (350.20)		
3753	Osmotic fragility (before and after incubation)	04.00		18.000	159.00 (139.50)	12.000	106.00 (93.00)		
3754	ABO Reverse Group	04.00		5.500	-	3.670	-		
3755	Full blood count (including items 3739, 3762, 3783, 3785, 3791)	04.00		10.500	92.70 (81.30)	7.000	61.80 (54.20)		
3756	Full cross match	04.00		7.200	63.60 (55.80)	4.800	42.40 (37.20)		
3757	Coagulation factors: Quantitative	04.00		32.200	284.40 (249.50)	21.470	189.60 (166.30)		
3758	Factor VIII related antigen	04.00		60.460	534.00 (468.40)	40.310	356.10 (312.40)		
3759	Coagulation factor correction study	04.00		11.720	103.50 (90.80)	7.810	69.00 (60.50)		
3761	Factor XIII related antigen	04.00		61.110	539.80 (473.50)	40.740	359.90 (315.70)		
3762	Haemoglobin estimation	04.00		1.800	15.90 (13.90)	1.200	10.60 (9.30)		
3763	Contact activated product assay	04.00		16.200	143.10 (125.50)	10.800	95.40 (83.70)		
3764	Grouping: A B and O antigens	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3765	Grouping: Rh antigen	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3766	PIVKA	04.00		43.490	384.10 (336.90)	28.990	256.10 (224.60)		
3767	Euglobulin Lysis time	04.00		25.580	225.90 (198.20)	17.050	150.60 (132.10)		
3768	Haemoglobin A2 (column chromatography)	04.00		15.000	132.50 (116.20)	10.000	88.30 (77.50)		
3769	Haemoglobin electrophoresis	04.00		26.820	236.90 (207.80)	17.880	157.90 (138.50)		
3770	Haemoglobin-S (solubility test)	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3772	Haptoglobin: Quantitative	04.00		9.450	83.50 (73.20)	6.300	55.60 (48.80)		
3773	Ham's acidified serum test	04.00		8.000	70.70 (62.00)	5.330	47.10 (41.30)		
3775	Heinz bodies	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3776	Haemosiderin in urinary sediment	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3783	Leucocyte differential count	04.00		6.200	54.80 (48.10)	4.150	36.70 (32.20)		
3785	Leucocytes: Total count	04.00		1.800	15.90 (13.90)	1.200	10.60 (9.30)		
3786	QBC malaria concentration and fluorescent staining	04.00		25.000	220.80 (193.70)	16.700	147.50 (129.40)		
3787	LE-cells	04.00		8.300	73.30 (64.30)	5.550	49.00 (43.00)		
3789	Neutrophil alkaline phosphatase	04.00		28.000	247.30 (216.90)	18.700	165.20 (144.90)		
3791	Packed cell volume: Haematocrit	04.00		1.800	15.90 (13.90)	1.200	10.60 (9.30)		
3792	Plasmodium falciparum: Monoclonal immunological identification	04.00		9.000	79.50 (69.70)	6.000	53.00 (46.50)		
3793	Plasma haemoglobin	04.00		6.750	59.60 (52.30)	4.500	39.70 (34.80)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3794	Platelet sensitivities	04.00		18.640	164.60 (144.40)	12.430	109.80 (96.30)		
3795	Platelet aggregation per aggregant	04.00		12.140	107.20 (94.00)	8.090	71.50 (62.70)		
3797	Platelet count	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3799	Platelet adhesiveness	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3801	Prothrombin consumption	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3803	Prothrombin determination (two stages)	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3805	Prothrombin index	04.00		6.000	53.00 (46.50)	4.000	35.30 (31.00)		
3806	Therapeutic drug level: Dosage	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3809	Reticulocyte count	04.00		3.000	26.50 (23.20)	2.000	17.70 (15.50)		
3810	Schumm's test	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3811	Sickling test	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3814	Sucrose lysis test for PNH	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3816	T and B-cells EAC markers (limited to ONE marker only for CD4/8 counts)	04.00		21.100	186.40 (163.50)	14.070	124.30 (109.00)		
3820	Thrombo - Elastogram	04.00		26.000	229.70 (201.50)	17.330	153.10 (134.30)		
3825	Fibrinogen titre	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3829	Glucose 6-phosphate-dehydrogenase: Qualitative	04.00		8.000	70.70 (62.00)	5.330	47.10 (41.30)		
3830	Glucose 6-phosphate-dehydrogenase: Quantitative	04.00		16.000	141.30 (123.90)	10.700	94.50 (82.90)		
3832	Red cell pyruvate kinase: Quantitative	04.00		16.000	141.30 (123.90)	10.700	94.50 (82.90)		
3834	Red cell Rhesus phenotype	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3835	Haemoglobin F in blood smear	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3837	Partial thromboplastin time	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3841	Thrombin time (screen)	04.00		7.160	63.20 (55.40)	4.770	42.10 (36.90)		
3843	Thrombin time (serial)	04.00		7.650	67.60 (59.30)	5.100	45.00 (39.50)		
3847	Haemoglobin H	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3851	Fibrin degeneration products (diffusion plate)	04.00		10.350	91.40 (80.20)	6.900	60.90 (53.40)		
3853	Fibrin degeneration products (latex slide)	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3854	XDP (Dimer test or equivalent latex slide test)	04.00		8.500	75.10 (65.90)	5.670	50.10 (43.90)		
3855	Haemagglutination inhibition	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3856	D-Dimer (quantitative)	04.00		27.520	243.10 (213.20)	18.350	162.10 (142.20)		
3857	Ristocetin Cofactor	04.00		35.530	313.80 (275.30)	23.690	209.30 (183.60)		
3858	Heparin removal	04.00		28.880	255.10 (223.80)	19.250	170.00 (149.10)		
21.2	Microscopic and miscellaneous tests								
3863	Autogenous vaccine	04.00		12.600	111.30 (97.60)	8.400	74.20 (65.10)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3864	Entomological examination	04.00		20.700	182.80 (160.40)	13.800	121.90 (106.90)		
3865	Parasites in blood smear	04.00		5.600	49.50 (43.40)	3.730	32.90 (28.90)		
3867	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)	04.00		4.900	43.30 (38.00)	3.300	29.10 (25.50)		
3868	Fungus identification	04.00		8.300	73.30 (64.30)	5.500	48.60 (42.60)		
3869	Faeces (including parasites)	04.00		4.900	43.30 (38.00)	3.270	28.90 (25.40)		
3873	Transmission electron microscopy	04.00		85.000	750.80 (658.60)	57.000	503.50 (441.70)		
3874	Scanning electron microscopy	04.00		100.000	883.30 (774.80)	67.000	591.80 (519.10)		
3875	Inclusion bodies	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3878	Crystal identification polarized light microscopy	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3879	Campylobacter in stool: Fastidious culture	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3880	Antigen detection with polyclonal antibodies	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3881	Mycobacteria	04.00		3.000	26.50 (23.20)	2.000	17.70 (15.50)		
3882	Antigen detection with monoclonal antibodies	04.00		10.800	95.40 (83.70)	7.200	63.60 (55.80)		
3883	Concentration techniques for parasites	04.00		3.000	26.50 (23.20)	2.000	17.70 (15.50)		
3884	Dark field, phase or interference contrast microscopy, Nomarski or Fontana	04.00		6.300	55.60 (48.80)	4.200	37.10 (32.50)		
3885	Cytochemical stain	04.00		5.450	48.10 (42.20)	3.650	32.20 (28.20)		
21.3 Bacteriology									
3887	Antibiotic susceptibility test: Per organism	04.00		8.000	70.70 (62.00)	5.330	47.10 (41.30)		
3888	Adhesive tape preparation	04.00		2.700	23.80 (20.90)	1.800	15.90 (13.90)		
3889	Clostridium difficile toxin: Monoclonal immunological	04.00		12.400	109.50 (96.10)	8.270	73.00 (64.00)		
3890	Antibiotic assay of tissues and fluids	04.00		13.900	122.80 (107.70)	9.270	81.90 (71.80)		
3891	Blood culture: Aerobic	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3892	Blood culture: Anaerobic	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3893	Bacteriological culture: Miscellaneous	04.00		6.300	55.60 (48.80)	4.200	37.10 (32.50)		
3894	Radiometric blood culture	04.00		10.800	95.40 (83.70)	7.200	63.60 (55.80)		
3895	Bacteriological culture: Fastidious organisms	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3896	In vivo culture: Bacteria	04.00		16.000	141.30 (123.90)	10.650	94.10 (82.50)		
3897	In vivo culture: Virus	04.00		16.000	141.30 (123.90)	10.650	94.10 (82.50)		
3899	Bacterial exotoxin production (in vivo assay)	04.00		20.700	182.80 (160.40)	13.800	121.90 (106.90)		
3901	Fungal culture	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3902	Clostridium difficile (cytotoxicity neutralisation)	04.00		30.000	265.00 (232.50)	20.000	176.70 (155.00)		
3903	Antibiotic level: Biological fluids	04.00		11.700	103.30 (90.60)	7.800	68.90 (60.40)		
3904	Rotavirus latex slide test	04.00		5.620	49.60 (43.50)	3.750	33.10 (29.00)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3905	Identification of virus or rickettsia	04.00		20.700	182.80 (160.40)	13.800	121.90 (106.90)		
3906	Identification: Chlamydia	04.00		16.000	141.30 (123.90)	10.650	94.10 (82.50)		
3907	Culture for staphylococcus aureus	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3908	Anaerobe culture: Comprehensive	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3909	Anaerobe culture: Limited procedure	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3911	Beta-lactamase assay	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3914	Sterility control test: Biological method	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3915	Mycobacterium culture	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3916	Radiometric tuberculosis culture	04.00		10.800	95.40 (83.70)	7.200	63.60 (55.80)		
3918	Mycoplasma culture: Comprehensive	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3919	Identification of mycobacterium	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3920	Mycobacterium: Antibiotic sensitivity	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3921	Antibiotic synergistic study	04.00		20.700	182.80 (160.40)	13.800	121.90 (106.90)		
3922	Viable cell count	04.00		1.350	11.90 (10.40)	0.900	7.95 (6.97)		
3923	Biochemical identification of bacterium: Abridged	04.00		3.150	27.80 (24.40)	2.100	18.50 (16.20)		
3924	Biochemical identification of bacterium: Extended	04.00		12.500	110.40 (96.80)	8.330	73.60 (64.60)		
3925	Serological identification of bacterium: Abridged	04.00		3.150	27.80 (24.40)	2.100	18.50 (16.20)		
3926	Serological identification of bacterium: Extended	04.00		10.200	90.10 (79.00)	6.800	60.10 (52.70)		
3927	Grouping for streptococci	04.00		7.300	64.50 (56.60)	4.850	42.80 (37.50)		
3928	Antimicrobial substances	04.00		3.800	33.60 (29.50)	2.500	22.10 (19.40)		
3929	Radiometric mycobacterium identification	04.00		14.000	123.70 (108.50)	9.300	82.10 (72.00)		
3930	Radiometric mycobacterium antibiotic sensitivity	04.00		25.000	220.80 (193.70)	16.700	147.50 (129.40)		
3931	Helicobacter: Monoclonal immunological	04.00		12.400	109.50 (96.10)	8.270	73.00 (64.00)		
4650	Antibiotic MIC per organism per antibiotic	04.00		8.000	70.70 (62.00)	5.330	47.10 (41.30)		
4651	Non-radiometric automated blood cultures	04.00		13.900	122.80 (107.70)	9.270	81.90 (71.80)		
4652	Rapid automated bacterial identification per organism	04.00		15.000	132.50 (116.20)	10.000	88.30 (77.50)		
4653	Rapid automated antibiotic susceptibility per organism	04.00		17.000	150.20 (131.80)	11.330	100.10 (87.80)		
4654	Rapid automated MIC per organism per antibiotic	04.00		17.000	150.20 (131.80)	11.330	100.10 (87.80)		
4655	Mycobacteria: MIC determination - E Test	05.03		16.500	145.70 (127.80) Z	11.000	97.20 (85.30) Z		
4656	Mycobacteria: Identification HPLC	05.03		35.000	309.20 (271.20) Z	23.330	206.10 (180.80) Z		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
4657	Mycobacteria: Liquefied, concentrated, fluorochrome stain	05.03		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
21.4	Serology								
3958	Anti Gad/la2 Ab	04.00		67.950	600.20 (526.50)	45.300	400.10 (351.00)		
3959	Rose Waaler agglutination test	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3960	Gonococcal, listeria or echinococcus agglutination	04.00		9.500	83.90 (73.60)	6.300	55.60 (48.80)		
3961	Slide agglutination test	04.00		2.630	23.20 (20.40)	1.750	15.50 (13.60)		
3963	Serum complement level: Each component	04.00		3.150	27.80 (24.40)	2.100	18.50 (16.20)		
3965	Anti la2 Antibodies	04.00		36.000	318.00 (278.90)	24.000	212.00 (186.00)		
3966	Anti Gad Antibodies	04.00		36.000	318.00 (278.90)	24.000	212.00 (186.00)		
3967	Auto-antibody: Sensitized erythrocytes	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3968	Herpes virus typing: Monoclonal immunological	04.00		20.690	182.80 (160.40)	13.790	121.80 (106.80)		
3969	Western blot technique	04.00		74.000	653.60 (573.30)	49.000	432.80 (379.60)		
3970	Epstein-Barr virus antibody titer	04.00		6.750	59.60 (52.30)	4.500	39.70 (34.80)		
3932	Antibodies to human immunodeficiency virus (HIV): ELISA	04.00		14.100	124.50 (109.20)	9.400	83.00 (72.80)		
3933	IgE: Total: EMIT or ELISA	04.00		11.700	103.30 (90.60)	7.800	68.90 (60.40)		
3934	Auto antibodies by labelled antibodies	04.00		16.000	141.30 (123.90)	10.650	94.10 (82.50)		
3935	Sperm antibodies	04.00		16.000	141.30 (123.90)	10.650	94.10 (82.50)		
3936	Virus neutralisation test: First antibody	04.00		75.000	662.50 (581.10)	50.000	441.70 (387.50)		
3937	Virus neutralisation test: Each additional antibody	04.00		15.000	132.50 (116.20)	10.000	88.30 (77.50)		
3938	Precipitation test per antigen	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3939	Agglutination test per antigen	04.00		5.500	48.60 (42.60)	3.670	32.40 (28.40)		
3940	Haemagglutination test: Per antigen	04.00		9.900	87.40 (76.70)	6.600	58.30 (51.10)		
3941	Modified Coombs' test for brucellosis	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3942	Hepatitis Rapid Viral Ab	04.00		12.240	108.10 (94.80)	8.160	72.10 (63.20)		
3943	Antibody titer to bacterial exotoxin	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3944	IgE: Specific antibody titer: ELISA/EMIT: Per Ag	04.00		12.400	109.50 (96.10)	8.270	73.00 (64.00)		
3945	Complement fixation test	04.00		5.850	51.70 (45.40)	3.900	34.40 (30.20)		
3946	IgM: Specific antibody titer:ELISA/EMIT: Per Ag	04.00		14.050	124.10 (108.90)	9.370	82.80 (72.60)		
3947	C-reactive protein	04.00		10.840	95.70 (83.90)	7.227	63.80 (56.00)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
3948	IgG: Specific antibody titer: ELISA/EMIT: Per Ag	04.00		12.950	114.40 (100.40)	8.630	76.20 (66.80)		
3949	Qualitative Kahn, VDRL or other flocculation	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3950	Neutrophil phagocytosis	04.00		25.200	222.60 (195.30)	16.800	148.40 (130.20)		
3951	Quantitative Kahn, VDRL or other flocculation	04.00		3.600	31.80 (27.90)	2.400	21.20 (18.60)		
3952	Neutrophil chemotaxis	04.00		67.950	600.20 (526.50)	45.300	400.10 (351.00)		
3953	Tube agglutination test	04.00		4.150	36.70 (32.20)	2.760	24.40 (21.40)		
3955	Paul Bunnell: Presumptive	04.00		2.250	19.90 (17.50)	1.500	13.20 (11.60)		
3956	Infectious mononucleosis latex slide test (Monospot or equivalent)	04.00		8.500	75.10 (65.90)	5.670	50.10 (43.90)		
3971	Immuno-diffusion test: Per antigen	04.00		3.150	27.80 (24.40)	2.100	18.50 (16.20)		
3972	Respiratory syncytial virus (ELISA technique)	04.00		35.000	309.20 (271.20)	23.000	203.20 (178.20)		
3973	Immuno electrophoresis: Per immune serum	04.00		9.450	83.50 (73.20)	6.300	55.60 (48.80)		
3974	Polymerase chain reaction	04.00		75.000	662.50 (581.10)	50.000	441.70 (387.50)		
3975	Indirect immuno-fluorescence test (bacterial, viral, parasitic)	04.00		12.000	106.00 (93.00)	8.000	70.70 (62.00)		
3978	Lymphocyte transformation	04.00		51.700	456.70 (400.60)	34.500	304.70 (267.30)		
3980	Bilharzia Ag Serum/Urine	04.00		14.500	128.10 (112.40)	9.670	85.40 (74.90)		
3982	Histone Ab	04.00		16.000	141.30 (123.90)	10.670	94.20 (82.60)		
4600	Anti-CCP	05.03		17.460	154.20 (135.30) Z	11.640	102.80 (90.20) Z		
4601	Panel typing: Antibody detection: Class I	04.00		36.000	318.00 (278.90)	24.000	212.00 (186.00)		
4602	Panel typing: Antibody detection: Class II	04.00		44.000	388.70 (341.00)	29.300	258.80 (227.00)		
4603	HLA test for specific locus/antigen - serology	04.00		27.000	238.50 (209.20)	18.000	159.00 (139.50)		
4604	HLA typing: Class I - serology	04.00		52.000	459.30 (402.90)	34.700	306.50 (268.90)		
4605	HLA typing: Class II - serology	04.00		52.000	459.30 (402.90)	34.700	306.50 (268.90)		
4606	HLA typing: Class I & II - serology	04.00		90.000	795.00 (697.40)	60.000	530.00 (464.90)		
4607	Cross matching T-cells (per tray)	04.00		18.000	159.00 (139.50)	12.000	106.00 (93.00)		
4608	Cross matching B-cells	04.00		38.000	335.70 (294.50)	25.300	223.50 (196.10)		

Code	Description	Ver	Add	Specialists		General Practitioners / non-designated Specialists		Anaesthesiology	
				RVU	Fee	RVU	Fee	RVU	Fee
4609	Cross matching T- & B-cells	04.00		48.000	424.00 (371.90)	32.000	282.70 (248.00)		
4610	Helicobacter: Pylori antigen test	04.00		34.600	305.60 (268.10)	23.070	203.80 (178.80)		
4611	Erythropoietin	04.00		20.000	176.70 (155.00)	13.330	117.70 (103.20)		
4612	HTLV III	04.00		20.000	176.70 (155.00)	13.330	117.70 (103.20)		
4613	Anti-Gm1 Antibody Assay	04.00		75.000	662.50 (581.10)	50.000	441.70 (387.50)		
4614	HIV Ab - Rapid Test	04.00		12.000	106.00 (93.00)	8.000	70.70 (62.00)		
21.5	Skin tests								
	For skin-prick allergy tests, please refer to items 0218, 0220 and 0221 in Section 2: Integumentary Section								04.00
21.6	Biochemical tests: Blood								
3991	Abnormal pigments: Qualitative	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
3993	Abnormal pigments: Quantitative	04.00		9.000	79.50 (69.70)	6.000	53.00 (46.50)		
3995	Acid phosphate	04.00		5.180	45.80 (40.20)	3.450	30.50 (26.80)		
3998	Amino acids Quantitative (Post derivatisation HPLC)	04.00		78.120	590.00 (605.30)	52.080	460.00 (403.50)		
3999	Albumin	04.00		4.800	42.40 (37.20)	3.200	28.30 (24.80)		
4000	Alcohol	04.00		12.400	109.50 (96.10)	8.270	73.00 (64.00)		
4001	Alkaline phosphatase	04.00		5.180	45.80 (40.20)	3.450	30.50 (26.80)		
4002	Alkaline phosphatase-iso-enzymes	04.00		11.700	103.30 (90.60)	7.800	68.90 (60.40)		
4003	Ammonia: Enzymatic	04.00		7.710	68.10 (59.70)	5.140	45.40 (39.80)		
4004	Ammonia: Monitor	04.00		4.500	39.70 (34.80)	3.000	26.50 (23.20)		
4005	Alpha-1-antitrypsin: Total	04.00		7.200	63.60 (55.80)	4.800	42.40 (37.20)		
4006	Amylase	04.00		5.180	45.80 (40.20)	3.450	30.50 (26.80)		
4007	Arsenic in blood, hair or nails	04.00		36.250	320.20 (280.90)	24.170	213.50 (187.30)		
4008	Bilirubin - Reflectance	04.00		4.770	42.10 (36.90)	3.180	28.10 (24.60)		
4009	Bilirubin: Total	04.00		4.770	42.10 (36.90)	3.180	28.10 (24.60)		
4010	Bilirubin: Conjugated	04.00		3.620	32.00 (28.10)	2.410	21.30 (18.70)		
4011	Breath Hydrogen Test	04.00		21.560	190.40 (167.00)	14.370	126.90 (111.30)		
4012	CSF Nicotinic Acid	04.00		12.420	109.70 (96.20)	8.280	73.10 (64.10)		
4013	CSF Glutamine	04.00		11.250	99.40 (87.20)	7.500	66.20 (58.10)		
4014	Cadmium: Atomic absorption	04.00		18.120	160.10 (140.40)	12.080	106.70 (93.60)		
4016	Calcium: Ionized	04.00		6.750	59.60 (52.30)	4.500	39.70 (34.80)		