ItemNum	ItemStartDate	ItemEndDate	CategoryCode	Group	SubGroup	SubHeadingCode	ItemType	FeeType	ProviderType	Newitem	ItemChange	AnaesChange	DescriptionChange	FeeChange	EMSNChange	EMSNCap	BenefitType	BenefitStartDate	FeeStartDate	ScheduleFee	BenefitS100	BasicLinks	EMSNStartDate	EMSNEndDate	EMSNFixedCoAmount	EMSNMaximumCap	EMSNPercentageCap	EMSNDescription	DescriptionStartDate	Description	DerivedFeeStartDate	DerivedFee	Benefit75	Benefit85	Anaes
3	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	17.9	17.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Professional attendance at consulting rooms (other than a service to which another item applies) by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management-each attendance					
4	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2012				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management-an attendance on one or more patients at one place on one occasion-each patient	1/07/2021	The fee for item 3, plus $27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 3 plus $2.15 per patient.			
23	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management-each attendance					
24	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2012				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient	1/07/2021	The fee for item 23, plus $27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 23 plus $2.15 per patient.			
36	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Professional attendance by a general practitioner at consulting rooms (other than a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-each attendance					
37	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2012				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient	1/07/2021	The fee for item 36, plus $27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 36 plus $2.15 per patient.			
44	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	111.5	111.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Professional attendance by a general practitioner at consulting rooms (other than a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-each attendance					
47	1/12/1989	[Table]	1	A1	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2012				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient	1/07/2021	The fee for item 44, plus $27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 44 plus $2.15 per patient.			
52	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/01/2005	1/12/1991	11	11	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms of not more than 5 minutes in duration (other than a service to which any other item applies)-each attendance, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).					
53	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/01/2005	1/12/1991	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms of more than 5 minutes in duration but not more than 25 minutes (other than a service to which any other item applies)-each attendance, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).					
54	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/01/2005	1/12/1991	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms of more than 25 minutes in duration but not more than 45 minutes (other than a service to which any other item applies)-each attendance, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).					
57	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/01/2005	1/12/1991	61	61	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms of more than 45 minutes in duration (other than a service to which any other item applies)-each attendance, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).					
58	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2000				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).	1/11/2000	An amount equal to $8.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $8.50 plus $.70 per patient			
59	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2000				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).	1/11/2000	An amount equal to $16.00, plus $17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $16.00 plus $.70 per patient			
60	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2000				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 45 minutes in duration but not more than 65 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).	1/11/2000	An amount equal to $35.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $35.50 plus $.70 per patient			
65	1/12/1989	[Table]	1	A2	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2000				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 65 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).	1/11/2000	An amount equal to $57.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $57.50 plus $.70 per patient			
104	1/11/1990	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1990	1/07/2021	90.25		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of the specialist's specialty after referral of the patient to the specialist-each attendance, other than a second or subsequent attendance, in a single course of treatment, other than a service to which item 106, 109 or 16401 applies			67.8	76.8	
105	1/11/1990	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1990	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of the specialist's specialty following referral of the patient to the specialist-an attendance after the first in a single course of treatment, if that attendance is at consulting rooms or hospital, other than a service to which item 16404 applies			34.05	38.6	
106	1/12/1991	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	74.95		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of the specialist's specialty of ophthalmology and following referral of the patient to the specialist-an attendance (other than a second or subsequent attendance in a single course of treatment) at which the only service provided is refraction testing for the issue of a prescription for spectacles or contact lenses, if that attendance is at consulting rooms or hospital (other than a service to which any of items 104, 109 and 10801 to 10816 applies)			56.25	63.75	
107	1/11/1990	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1990	1/07/2021	132.6		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of the specialist's specialty following referral of the patient to the specialist-an attendance (other than a second or subsequent attendance in a single course of treatment), if that attendance is at a place other than consulting rooms or hospital			99.45	112.75	
108	1/11/1990	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1990	1/07/2021	83.95		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of the specialist's specialty following referral of the patient to the specialist-each attendance after the first in a single course of treatment, if that attendance is at a place other than consulting rooms or hospital			63	71.4	
109	1/01/2006	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/01/2006	1/07/2021	203.65		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of the specialist's specialty of ophthalmology following referral of the patient to the specialist-an attendance (other than a second or subsequent attendance in a single course of treatment) at which a comprehensive eye examination, including pupil dilation, is performed on: (a) a patient aged 9 years or younger; or (b) a patient aged 14 years or younger with developmental delay; (other than a service to which any of items 104, 106 and 10801 to 10816 applies)			152.75	173.15	
110	1/02/1984	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/02/1987	1/07/2021	159.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner–initial attendance in a single course of treatment			119.55	135.45	
111	1/11/2017	[Table]	1	A3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Professional attendance at consulting rooms or in hospital by a specialist in the practice of the specialist's specialty following referral of the patient to the specialist by a referring practitioner-an attendance after the first attendance in a single course of treatment, if: (a) during the attendance, the specialist determines the need to perform an operation on the patient that had not otherwise been scheduled; and (b) the specialist subsequently performs the operation on the patient, on the same day; and (c) the operation is a service to which an item in Group T8 applies; and (d) the amount specified in the item in Group T8 as the fee for a service to which that item applies is $212.15or more For any particular patient, once only on the same day			34.05	38.6	
115	1/04/2019	[Table]	1	A3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	C	1/04/2019	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Professional attendance at consulting rooms or in hospital on a day by a medical practitioner (the attending practitioner) who is a specialist or consultant physician in the practice of the attending practitioner's specialty after referral of the patient to the attending practitioner by a referring practitioner—an attendance after the initial attendance in a single course of treatment, if: (a) the attending practitioner performs a scheduled operation on the patient on the same day; and (b) the operation is a service to which an item in Group T8 applies; and (c) the amount specified in the item in Group T8 as the fee for a service to which that item applies is $212.15 or more; and (d) the attendance is unrelated to the scheduled operation; and (e) it is considered a clinical risk to defer the attendance to a later day For any particular patient, once only on the same day			34.05	38.6	
116	1/02/1984	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/1987	1/07/2021	79.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner–each attendance (other than a service to which item 119 applies) after the first in a single course of treatment			59.85	67.8	

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117	1/11/2017	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	79.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Professional attendance at consulting rooms or in hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner-an attendance after the first attendance in a single course of treatment, if: (a) the attendance is not a minor attendance; and (b) during the attendance, the consultant physician determines the need to perform an operation on the patient that had not otherwise been scheduled; and (c) the consultant physician subsequently performs the operation on the patient, on the same day; and (d) the operation is a service to which an item in Group T8 applies; and (e) the amount specified in the item in Group T8 as the fee for a service to which that item applies is $312.35 or more For any particular patient, once only on the same day	59.85	67.8
119	22/12/1987	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	22/12/1987	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner-each minor attendance after the first in a single course of treatment	34.05	38.6
120	1/11/2017	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Professional attendance at consulting rooms or in hospital by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner-an attendance after the first attendance in a single course of treatment, if: (a) the attendance is a minor attendance; and (b) during the attendance, the consultant physician determines the need to perform an operation on the patient that had not otherwise been scheduled; and (c) the consultant physician subsequently performs the operation on the patient, on the same day; and (d) the operation is a service to which an item in Group T8 applies; and (e) the amount specified in the item in Group T8 as the fee for a service to which that item applies is $312.35 or more For any particular patient, once only on the same day	34.05	38.6
122	1/02/1984	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/02/1987	1/07/2021	193.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner-initial attendance in a single course of treatment	145.05	164.35
128	1/02/1984	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/02/1987	1/07/2021	116.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner-each attendance (other than a service to which item 131 applies) after the first in a single course of treatment	87.75	99.45
131	22/12/1987	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	22/12/1987	1/07/2021	84.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) following referral of the patient to the consultant physician by a referring practitioner-each minor attendance after the first in a single course of treatment	63.2	71.65
132	1/11/2007	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2007	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 45 minutes in duration for an initial assessment of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) following referral of the patient to the consultant physician by a referring practitioner, if: (a) an assessment is undertaken that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) comprehensive multi or detailed single organ system assessment; and (iii) the formulation of differential diagnoses; and (b) a consultant physician treatment and management plan of significant complexity is prepared and provided to the referring practitioner, which involves: (i) an assessment, diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) medication recommendations; and (c) an attendance on the patient to which item 110, 116 or 119 applies did not take place on the same day by the same consultant physician; and (d) this item has not applied to an attendance on the patient in the preceding 12 months by the same consultant physician	209.1	236.95
133	1/11/2007	[Table]	1	A4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2007	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 20 minutes in duration after the first attendance in a single course of treatment for a review of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) if: (a) a review is undertaken that covers: (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (b) the modified consultant physician treatment and management plan is provided to the referring practitioner, which involves, if appropriate: (i) a revised opinion on the diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) revised medication recommendations; and (c) an attendance on the patient to which item 110, 116 or 119 applies did not take place on the same day by the same consultant physician; and (d) item 132 applied to an attendance claimed in the preceding 12 months; and (e) the attendance under this item is claimed by the same consultant physician who claimed item 132 or a locum tenens; and (f) this item has not applied more than twice in any 12 month period	104.7	118.65
135	1/07/2008	[Table]	1	A29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/2008	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance of at least 45 minutes in duration at consulting rooms or hospital, by a consultant physician in the practice of the consultant physician's specialty of paediatrics, following referral of the patient to the consultant by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient aged under 13 years with autism or another pervasive developmental disorder, if the consultant paediatrician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary-medical recommendations; (c) provides a copy of the treatment and management plan to: (i) the referring practitioner; and (ii) one or more allied health providers, if appropriate, for the treatment of the patient; (other than attendance on a patient for whom payment has previously been made under this item or item 127, 139 or 289)	209.1	236.95
137	1/07/2011	[Table]	1	A29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/2011	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Professional attendance of at least 45 minutes duration, at consulting rooms or hospital, by a specialist or consultant physician, for assessment, diagnosis and the preparation of a treatment and management plan for a child aged under 13 years, with an eligible disability, who has been referred to the specialist or consultant physician by a referring practitioner, if the specialist or consultant physician does the following: (a)undertakes a comprehensive assessment of the child and forms a diagnosis (using the assistance of one or more allied health providers where appropriate) (b)develops a treatment and management plan which must include the following: (i)the outcomes of the assessment; (ii)the diagnosis or diagnoses; (iii)opinion on risk assessment; (iv)treatment options and decisions; (v)appropriate medication recommendations, where necessary. (c)provides a copy of the treatment and management plan to the: (i)referring practitioner; and (ii)relevant allied health providers (where appropriate). Not being an attendance on a child in respect of whom payment has previously been made under this item or items 135, 139 or 289.	209.1	236.95
139	1/07/2011	[Table]	1	A29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	E	C	1/07/2011	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Professional attendance of at least 45 minutes in duration at consulting rooms only, by a general practitioner (not including a specialist or consultant physician) for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with an eligible disability if the general practitioner does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary-medication recommendations; (c) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient; (other than attendance on a patient for whom payment has previously been made under this item or item 135, 137 or 289)		
141	1/11/2007	[Table]	1	A28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2007	1/07/2021	478.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance of more than 60 minutes in duration at consulting rooms or hospital by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine, if: (a) the patient is at least 65 years old and referred by a medical practitioner practising in general practice (including a general practitioner, but not including a specialist or consultant physician) or a participating nurse practitioner; and (b) the attendance is initiated by the referring practitioner for the provision of a comprehensive assessment and management plan; and (c) during the attendance: (i) the medical, physical, psychological and social aspects of the patient's health are evaluated in detail using appropriately validated assessment tools if indicated (the assessment); and (ii) the patient's various health problems and care needs are identified and prioritised (the formulation); and (iii) a detailed management plan is prepared (the management plan) setting out: (A) the prioritised list of health problems and care needs; and (B) short and longer term management goals; and (C) recommended actions or intervention strategies to be undertaken by the patient's general practitioner or another relevant health care provider that are likely to improve or maintain health status and are readily available and acceptable to the patient and the patient's family and carers; and (iv) the management plan is explained and discussed with the patient and, if appropriate, the patient's family and any carers; and (v) the management plan is communicated in writing to the referring practitioner; and (d) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 applies has not been provided to the patient on the same day by the same practitioner; and (e) an attendance to which this item or item 145 applies has not been provided to the patient by the same practitioner in the preceding 12 months	358.55	406.35
143	1/11/2007	[Table]	1	A28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2007	1/07/2021	298.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance of more than 30 minutes in duration at consulting rooms or hospital by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine to review a management plan previously prepared by that consultant physician or specialist under item 141 or 145, if: (a) the review is initiated by the referring medical practitioner practising in general practice or a participating nurse practitioner; and (b) during the attendance: (i) the patient's health status is reassessed; and (ii) a management plan prepared under item 141 or 145 is reviewed and revised; and (iii) the revised management plan is explained to the patient and (if appropriate) the patient's family and any carers and communicated in writing to the referring practitioner; and (c) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 applies was not provided to the patient on the same day by the same practitioner; and (d) an attendance to which item 141 or 145 applies has been provided to the patient by the same practitioner in the preceding 12 months; and (e) an attendance to which this item or item 147 applies has not been provided to the patient in the preceding 12 months, unless there has been a significant change in the patient's clinical condition or care circumstances that requires a further review	224.15	254.05

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145	1/11/2007	ITable]	1	A28	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	B	1/11/2007	1/07/2021	579.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance of more than 60 minutes in duration at a place other than consulting rooms or hospital by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine, if: (a) the patient is at least 65 years old and referred by a medical practitioner practising in general practice (including a general practitioner, but not including a specialist or consultant physician) or a participating nurse practitioner; and (b) the attendance is initiated by the referring practitioner for the provision of a comprehensive assessment and management plan; and (c) during the attendance: (i) the medical, physical, psychological and social aspects of the patient's health are evaluated in detail utilising appropriately validated assessment tools if indicated (the assessment); and (ii) the patient's various health problems and care needs are identified and prioritised (the formulation); and (iii) a detailed management plan is prepared (the management plan) setting out: (A) the prioritised list of health problems and care needs; and (B) short and longer term management goals; and (C) recommended actions or intervention strategies, to be undertaken by the patient's general practitioner or another relevant health care provider that are likely to improve or maintain health status and are readily available and acceptable to the patient, the patient's family and any carers; and (iv) the management plan is explained and discussed with the patient and, if appropriate, the patient's family and any carers; and (v) the management plan is communicated in writing to the referring practitioner; and (d) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 applies has not been provided to the patient on the same day by the same practitioner; and (e) an attendance to which this item or item 141 applies has not been provided to the patient by the same practitioner in the preceding 12 months	492.75
147	1/11/2007	ITable]	1	A28	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	B	1/11/2007	1/07/2021	342.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance of more than 30 minutes in duration at a place other than consulting rooms or hospital by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine to review a management plan previously prepared by that consultant physician or specialist under items 141 or 145, if: (a) the review is initiated by the referring medical practitioner practising in general practice or a participating nurse practitioner; and (b) during the attendance: (i) the patient's health status is reassessed; and (ii) a management plan that was prepared under item 141 or 145 is reviewed and revised; and (iii) the revised management plan is explained to the patient and (if appropriate) the patient's family and any carers and communicated in writing to the referring practitioner; and (c) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 applies has not been provided to the patient on the same day by the same practitioner; and (d) an attendance to which item 141 or 145 applies has been provided to the patient by the same practitioner in the preceding 12 months; and (e) an attendance to which this item or 143 applies has not been provided by the same practitioner in the preceding 12 months, unless there has been a significant change in the patient's clinical condition or care circumstances that requires a further review	308
160	1/02/1984	ITable]	1	A5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	230.5	230.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance by a general practitioner, specialist or consultant physician for a period of not less than 1 hour but less than 2 hours (other than a service to which another item applies) on a patient in imminent danger of death	172.9
161	1/02/1984	ITable]	1	A5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	384.15	384.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance by a general practitioner, specialist or consultant physician for a period of not less than 2 hours but less than 3 hours (other than a service to which another item applies) on a patient in imminent danger of death	288.15
162	1/02/1984	ITable]	1	A5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	537.55	537.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance by a general practitioner, specialist or consultant physician for a period of not less than 3 hours but less than 4 hours (other than a service to which another item applies) on a patient in imminent danger of death	403.2
163	1/02/1984	ITable]	1	A5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	691.5	691.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance by a general practitioner, specialist or consultant physician for a period of not less than 4 hours but less than 5 hours (other than a service to which another item applies) on a patient in imminent danger of death	518.65
164	1/02/1984	ITable]	1	A5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	768.3	768.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance by a general practitioner, specialist or consultant physician for a period of 5 hours or more (other than a service to which another item applies) on a patient in imminent danger of death	576.25
170	1/08/1987	ITable]	1	A6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	122.35	122.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance for the purpose of group therapy of not less than 1 hour in duration given under the direct continuous supervision of a general practitioner, specialist or consultant physician (other than a consultant physician in the practice of the consultant physician's specialty of psychiatry) involving members of a family and persons with close personal relationships with that family-each group of 2 patients	91.8
171	1/08/1987	ITable]	1	A6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	128.9	128.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance for the purpose of group therapy of not less than 1 hour in duration given under the direct continuous supervision of a general practitioner, specialist or consultant physician (other than a consultant physician in the practice of the consultant physician's specialty of psychiatry) involving members of a family and persons with close personal relationships with that family-each group of 3 patients	96.7
172	1/08/1987	ITable]	1	A6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/11/2004	1/07/2021	156.8	156.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance for the purpose of group therapy of not less than 1 hour in duration given under the direct continuous supervision of a general practitioner, specialist or consultant physician (other than a consultant physician in the practice of the consultant physician's specialty of psychiatry) involving members of a family and persons with close personal relationships with that family-each group of 4 or more patients	117.6
173	1/12/1991	ITable]	1	A7	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	D	1/01/2005	1/11/1994	21.65	21.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2010	Professional attendance at which acupuncture is performed by a medical practitioner by application of stimuli on or through the surface of the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture was performed	16.25
177	1/04/2019	ITable]	1	A7	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	60.6	60.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Professional attendance at a patient who is 30 years of age or overfor a heart health assessment by amedical practitioner at consulting rooms(other than a specialist or consultant physician) lasting at least 20 minutes and including: collection of relevant information, including taking a patient history; and a basic physical examination, which must include recording blood pressure and cholesterol; and initiating interventions and referrals as indicated; and implementing a management plan; and providing the patient with preventative health care advice and information.	
179	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	14.3	14.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance at consulting rooms of not more than 5 minutes in duration (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area.	
181	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	D	ITable]	N	N	N	N	N	N	P	E	1/07/2018				ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) not more than 5 minutes in duration—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area	The fee for item 179, plus $21.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 179 plus $1.70 per patient.
185	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	31.3	31.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance at consulting rooms of more than 5 minutes in duration but not more than 25 minutes (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area	
187	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	D	ITable]	N	N	N	N	N	N	P	E	1/07/2018				ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area	The fee for item 185, plus $21.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 185 plus $1.70 per patient.
189	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	60.6	60.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance at consulting rooms of more than 25 minutes in duration but not more than 45 minutes (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area	
191	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	D	ITable]	N	N	N	N	N	N	P	E	1/07/2018				ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area	The fee for item 189, plus $21.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 189 plus $1.70 per patient.
193	1/11/1998	ITable]	1	A7	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	38.55	38.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2010	Professional attendance by a general practitioner who is a qualified medical acupuncturist, at a place other than a hospital, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed	
195	1/11/1998	ITable]	1	A7	ITable]	ITable]	S	D	ITable]	N	N	N	N	N	N	P	D	1/11/1998				ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2013	Professional attendance by a general practitioner who is a qualified medical acupuncturist, on one or more patients at a hospital, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed	The fee for item 193, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 193 plus $2.10 per patient.
197	1/05/2003	ITable]	1	A7	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	74.6	74.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2010	Professional attendance by a general practitioner who is a qualified medical acupuncturist, at a place other than a hospital, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed	
199	1/05/2003	ITable]	1	A7	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	109.85	109.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2010	Professional attendance by a general practitioner who is a qualified medical acupuncturist, at a place other than a hospital, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed	
203	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	89.2	89.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance at consulting rooms of more than 45 minutes in duration (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area	
206	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	D	ITable]	N	N	N	N	N	N	P	E	1/07/2018				ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 45 minutes in duration—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area	The fee for item 203, plus $21.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 203 plus $1.70 per patient.
214	1/07/2018	ITable]	1	A7	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	184.4	184.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2018	Professional attendance by a medical practitioner for a period of not less than 1 hour but less than 2 hours (other than a service to which another item applies) on a patient in imminent danger of death	138.3

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215	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	307.3	307.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner for a period of not less than 2 hours but less than 3 hours (other than a service to which another item applies) on a patient in imminent danger of death	230.5
218	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	430.05	430.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner for a period of not less than 3 hours but less than 4 hours (other than a service to which another item applies) on a patient in imminent danger of death	322.55
219	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	553.2	553.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner for a period of not less than 4 hours but less than 5 hours (other than a service to which another item applies) on a patient in imminent danger of death	414.9
220	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	614.65	614.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner for a period of 5 hours or more (other than a service to which another item applies) on a patient in imminent danger of death	461
221	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	97.9	97.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance for the purpose of group therapy of not less than 1 hour in duration given under the direct continuous supervision of a medical practitioner involving members of a family and persons with close personal relationships with that family—each Group of 2 patients	73.45
222	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	103.1	103.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance for the purpose of group therapy of not less than 1 hour in duration given under the direct continuous supervision of a medical practitioner involving members of a family and persons with close personal relationships with that family—each Group of 3 patients	77.35
223	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	125.45	125.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance for the purpose of group therapy of not less than 1 hour in duration given under the direct continuous supervision of a medical practitioner involving members of a family and persons with close personal relationships with that family—each Group of 4 or more patients	94.1
224	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	49.4	49.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner to perform a brief health assessment, lasting not more than 30 minutes and including: (a) collection of relevant information, including taking a patient history; and (b) a basic physical examination; and (c) initiating interventions and referrals as indicated; and (d) providing the patient with preventive health care advice and information	
225	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	114.8	114.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner to perform a standard health assessment, lasting more than 30 minutes but less than 45 minutes, including: (a) detailed information collection, including taking a patient history; and (b) an extensive physical examination; and (c) initiating interventions and referrals as indicated; and (d) providing a preventive health care strategy for the patient	
226	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	158.4	158.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner to perform a long health assessment, lasting at least 45 minutes but less than 60 minutes, including: (a) comprehensive information collection, including taking a patient history; and (b) an extensive examination of the patient's medical condition and physical function; and (c) initiating interventions and referrals as indicated; and (d) providing a basic preventive health care management plan for the patient	
227	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	223.75	223.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner to perform a prolonged health assessment (lasting at least 60 minutes) including: (a) comprehensive information collection, including taking a patient history; and (b) an extensive examination of the patient's medical condition, and physical, psychological and social function; and (c) initiating interventions or referrals as indicated; and (d) providing a comprehensive preventive health care management plan for the patient	
228	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	176.7	176.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner at consulting rooms or in another place other than a hospital, a residential care facility, for a health assessment of a patient who is of Aboriginal or Torres Strait Islander descent—this item or items 715, 93470 or 93479 not more than once in a 9 month period	
229	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	120.1	120.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a medical practitioner, for preparation of a GP management plan for a patient (other than a service associated with a service to which any of items735 to 758 and items 235 to 240 apply)	90.1
230	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	95.15	95.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a medical practitioner, to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of items 735 to 758 and items 235 to 240 apply)	71.4
231	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	58.6	58.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Contribution by a medical practitioner, to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of items 735 to 758 and items 235 to 240 apply)	43.95
232	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	58.6	58.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Contribution by a medical practitioner, to: (a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or (b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider (other than a service associated with a service to which items735 to 758 and items 235 to 240 apply)	43.95
233	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	59.95	59.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a medical practitioner to review or coordinate a review of: (a) a GP management plan prepared by a medical practitioner (or an associated medical practitioner) to which item721 or item 229 applies; or (b) team care arrangements which have been coordinated by the medical practitioner (or an associated medical practitioner) to which item723 or item 230 applies	45
235	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	58.85	58.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference, if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items721 to 732, items 229 to 233 or items 93469 or 93475 apply).	44.15
236	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	100.7	100.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference, if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which items721 to 732, items 229 to 233 or items 93469 or 93475 apply).	75.55
237	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	167.85	167.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference, if the conference lasts for at least 40 minutes (other than a service associated with a service to which items721 to 732, items 229 to 233 or items 93469 or 93475 apply)	125.9
238	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	43.25	43.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference, if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items721 to 732, items 229 to 233 or items 93469 or 93475 apply).	32.45
239	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	74.1	74.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference, if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which items721 to 732, items 229 to 233 or items 93469 or 93475 apply).	55.6
240	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	123.35	123.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference, if the conference lasts for at least 40 minutes (other than a service associated with a service to which items721 to 732, items 229 to 233 or items 93469 or 93475 apply)	92.55
243	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	67.85	67.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a medical practitioner, as a member of a case conference team, to lead and coordinate a multidisciplinary case conference on a patient with cancer to develop a multidisciplinary treatment plan, if the case conference is of at least 10 minutes, with a multidisciplinary team of at least 3 other medical practitioners from different areas of medical practice (which may include general practice), and, in addition, allied health providers	50.9
244	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	31.6	31.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a medical practitioner, as a member of a case conference team, to participate in a multidisciplinary case conference on a patient with cancer to develop a multidisciplinary treatment plan, if the case conference is of at least 10 minutes, with a multidisciplinary team of at least 4 medical practitioners from different areas of medical practice (which may include general practice), and, in addition, allied health providers	23.7
245	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	128.9	128.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Participation by a medical practitioner in a Domiciliary Medication Management Review (DMMR) for a patient living in a community setting, in which the medical practitioner, with the patient's consent: (a) assesses the patient as: (i) having a chronic medical condition or a complex medication regimen; and (ii) not having their therapeutic goals met; and (b) following that assessment: (i) refers the patient to a community pharmacy or an accredited pharmacist for the DMMR; and (ii) provides relevant clinical information required for the DMMR; and (c) discusses with the reviewing pharmacist the results of the DMMR including suggested medication management strategies; and (d) develops a written medication management plan following discussion with the patient; and (e) provides the written medication management plan to a community pharmacy chosen by the patient For any particular patient—this item or item 900 is applicable not more than once in each 12 month period, except if there has been a significant change in the patient's condition or medication regimen requiring a new DMMR	
249	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	88.25	88.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Participation by a medical practitioner in a residential medication management review (RMMR) for a patient who is a permanent resident of a residential aged care facility—other than an RMMR for a resident in relation to whom, in the preceding 12 months, this item or item 903 has applied, unless there has been a significant change in the resident's medical condition or medication management plan requiring a new RMMR	
251	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	14.1	14.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of less than 5 minutes in duration by a medical practitioner in an eligible area at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
252	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	30.85	30.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	

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253	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	1/07/2021	The fee for Item 252, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 252 plus $1.70 per patient
254	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years		
255	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	1/07/2021	The fee for Item 254, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 254 plus $1.70 per patient.
256	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years		
257	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	1/07/2021	The fee for Item 256, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 256 plus $1.70 per patient
259	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	30.85	30.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus		
260	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus	1/07/2021	The fee for Item 259, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 259 plus $1.70 per patient.
261	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the requirements for a cycle of care of a patient with established diabetes mellitus		
262	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 25 minutes but not more than 45 minutes, in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus	1/07/2021	The fee for Item 261, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 261 plus $1.70 per patient.
263	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus		
264	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus	1/07/2021	The fee for Item 263, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 263 plus $1.70 per patient.
265	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	30.85	30.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care		
266	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care	1/07/2021	The fee for Item 265, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 265 plus $1.70 per patient.
268	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care		
269	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care	1/07/2021	The fee for Item 268, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 268 plus $1.70 per patient.
270	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care		
271	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	E	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care	1/07/2021	The fee for Item 270, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 270 plus $1.70 per patient.
272	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (who has not undertaken mental health skills training) of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		44.8
276	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (who has not undertaken mental health skills training) of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		65.95
277	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner to review a GP mental health treatment plan which he or she, or an associated medical practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan		44.8
279	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation		44.8
281	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	75.8	75.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (who has undertaken mental health skills training) of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		56.85
282	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	D	1/07/2018	1/07/2021	111.65	111.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (who has undertaken mental health skills training) of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		83.75
283	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes		
285	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes	1/07/2021	The fee for Item 283, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 283 plus $1.70 per patient.
286	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40 minutes		
287	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40 minutes	1/07/2021	The fee for Item 286, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for Item 286 plus $1.70 per patient.
289	1/07/2008	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/2008	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance of at least 45 minutes in duration at consulting rooms or hospital, by a consultant physician in the practice ofthe consultant physician's specialty of psychiatry, following referral of the patient to the consultant by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with autism or another pervasive developmental disorder, if the consultant psychiatrist does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary-medication recommendations; (c) provides a copy of the treatment and management plan to the referring practitioner; (d) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient; (other than attendance on a patient for whom payment has previously been made under this item or item 135, 137 or 139)		209.1	236.95
291	1/05/2005	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/05/2005	1/07/2021	478.05		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance of more than 45 minutes in duration at consulting rooms by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if: (a) the attendance follows referral of the patient to the consultant for an assessment or management by a medical practitioner in general practice (including a general practitioner, but not a specialist or consultant physician) or a participating nurse practitioner; and (b) during the attendance, the consultant: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (c) the consultant decides that it is clinically appropriate for the patient to be managed by the referring practitioner without ongoing treatment by the consultant; and (d) within 2 weeks after the attendance, the consultant: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that: (A) covers the next 12 months; and (B) is appropriate to the patient's diagnosis; and (C) comprehensively evaluates the patient's biological, psychological and social issues; and (D) addresses the patient's diagnostic psychiatric issues; and (E) makes management recommendations addressing the patient's biological, psychological and social issues; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees			406.35

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293	1/05/2005	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/05/2005	1/07/2021	298.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance of more than 30 minutes but not more than 45 minutes in duration at consulting rooms by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if: (a) the patient is being managed by a medical practitioner or a participating nurse practitioner in accordance with a management plan prepared by the consultant in accordance with Item 291; and (b) the attendance follows referral of the patient to the consultant for review of the management plan by the medical practitioner or a participating nurse practitioner managing the patient; and (c) during the attendance, the consultant: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the management plan; and (d) within 2 weeks after the attendance, the consultant: (i) prepares a written diagnosis of the patient; and (ii) revises the management plan; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees; and (e) in the preceding 12 months, a service to which Item 291 applies has been provided; and (f) in the preceding 12 months, a service to which this item applies has not been provided	254.05
296	1/11/2006	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	274.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance at consulting rooms if the patient: (a) is a new patient for this consultant psychiatrist; or (b) has not received a professional attendance from this consultant psychiatrist in the preceding 24 months; other than attendance on a patient in relation to whom this item, or Item 297 or 299 or any of Items 300 to 308, has applied in the preceding 24 months	206.25	233.75
297	1/11/2006	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	274.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance of more than 45 minutes by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance at hospital if the patient: (a) is a new patient for this consultant psychiatrist; or (b) has not received a professional attendance from this consultant psychiatrist in the preceding 24 months; other than attendance on a patient in relation to whom this item, or Item 296 or 299 or any of Items 300 to 308, has applied in the preceding 24 months (H)	206.25	233.75
299	1/11/2006	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	328.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance of more than 45 minutes by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance at a place other than consulting rooms or a hospital if the patient: (a) is a new patient for this consultant psychiatrist; or (b) has not received a professional attendance from this consultant psychiatrist in the preceding 24 months; other than attendance on a patient in relation to whom this item, or Item 296 or 297 or any of Items 300 to 308, has applied in the preceding 24 months	246.6	279.45
300	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	45.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance of not more than 15 minutes in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies have not exceeded 50 attendances in a calendar year for the patient	34.35	38.9
302	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	91.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance of more than 15 minutes, but not more than 30 minutes, in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies have not exceeded 50 attendances in a calendar year for the patient	68.5	77.65
304	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	140.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance of more than 30 minutes, but not more than 45 minutes, in duration at consulting rooms), if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies have not exceeded 50 attendances in a calendar year for the patient	105.45	119.5
306	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	194	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance of more than 45 minutes, but not more than 75 minutes, in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies have not exceeded 50 attendances in a calendar year for the patient	145.5	164.9
308	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	225.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to him or her by a referring practitioner-an attendance of more than 75 minutes in duration at consulting rooms), if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies have not exceeded 50 attendances in a calendar year for the patient	168.85	191.35
310	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	22.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of not more than 15 minutes in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies exceed 50 attendances in a calendar year for the patient	17.1	19.4
312	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	45.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 15 minutes, but not more than 30 minutes, in duration at consulting rooms, if that attendance and another attendance to which item 296 or any of Items 300 to 308 applies exceed 50 attendances in a calendar year for the patient	34.35	38.9
314	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	70.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 30 minutes, but not more than 45 minutes, in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies exceed 50 attendances in a calendar year for the patient	52.85	59.9
316	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	97.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 45 minutes, but not more than 75 minutes, in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies exceed 50 attendances in a calendar year for the patient	72.85	82.55
318	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	112.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 75 minutes in duration at consulting rooms, if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies exceed 50 attendances in a calendar year for the patient	84.45	95.75
319	1/01/1997	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/1997	1/07/2021	194	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner—an attendance of more than 45 minutes in duration at consulting rooms, if the patient has: (a) been diagnosed as suffering severe personality disorder, anorexia nervosa, bulimia nervosa, dysthymic disorder, substance-related disorder, somatoform disorder or a pervasive development disorder; and (b) forpatients 18 years and over—been rated with a level of functional impairment within the range 1 to 50 according to the Global Assessment of Functioning Scale; if that attendance and another attendance to whichitem 296 or any of Items 300 to 308 applies have not exceeded 160 attendances in a calendar year for the patient	145.5	164.9
320	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	45.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of not more than 15 minutes in duration at hospital	34.35	38.9
322	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	91.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 15 minutes, but not more than 30 minutes, in duration at hospital	68.5	77.65
324	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	140.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 30 minutes, but not more than 45 minutes, in duration at hospital	105.45	119.5
326	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	194	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 45 minutes, but not more than 75 minutes, in duration at hospital	145.5	164.9
328	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	225.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 75 minutes in duration at hospital	168.85	191.35
330	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	84.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of not more than 15 minutes in duration if that attendance is at a place other than consulting rooms or hospital	63.05	71.45
332	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	131.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 15 minutes, but not more than 30 minutes, in duration if that attendance is at a place other than consulting rooms or hospital	98.7	111.9
334	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	191.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 30 minutes, but not more than 45 minutes, in duration if that attendance is at a place other than consulting rooms or hospital	143.85	163.05
336	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	232.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 45 minutes, but not more than 75 minutes, in duration if that attendance is at a place other than consulting rooms or hospital	174.05	197.25
338	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	263.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner-an attendance of more than 75 minutes in duration if that attendance is at a place other than consulting rooms or hospital	197.7	224.05
342	1/11/1996	[Table]	1	All	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	52.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted) of not less than 1 hour in duration given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry, involving a group of 2 to 9 unrelated patients or a family group of more than 3 patients, each of whom is referred to the consultant physician by a referring practitioner-each patient	39.05	44.25

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344	1/11/1996	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	69.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted) of not less than 1 hour in duration given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry, involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner-each patient		51.85	58.75
346	1/11/1996	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	102.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted) of not less than 1 hour in duration given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry, involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner-each patient		76.65	86.9
348	1/11/1996	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	131.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes, but less than 45 minutes, in duration, in the course of initial diagnostic evaluation of a patient		100.4	113.8
350	1/11/1996	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	184.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 45 minutes in duration, in the course of initial diagnostic evaluation of a patient		138.6	157.1
352	1/11/1996	[Table]	1	A8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1996	1/07/2021	131.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes in duration, in the course of continuing management of a patient if that attendance and another attendance to which this item applies have not exceeded 4 in a calendar year for the patient		100.4	113.8
385	1/07/1998	[Table]	1	A12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/1998	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital by a consultant occupational physician in the practice of the consultant occupational physician's specialty of occupational medicine following referral of the patient to the consultant occupational physician by a referring practitioner-initial attendance in a single course of treatment		67.8	76.8
386	1/07/1998	[Table]	1	A12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/1998	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital by a consultant occupational physician in the practice of the consultant occupational physician's specialty of occupational medicine following referral of the patient to the consultant occupational physician by a referring practitioner-each attendance after the first in a single course of treatment		34.05	38.6
387	1/07/1998	[Table]	1	A12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/1998	1/07/2021	132.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a consultant occupational physician in the practice of the consultant occupational physician's specialty of occupational medicine following referral of the patient to the consultant occupational physician by a referring practitioner-initial attendance in a single course of treatment		99.45	112.75
388	1/07/1998	[Table]	1	A12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/1998	1/07/2021	83.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a consultant occupational physician in the practice of the consultant occupational physician's specialty of occupational medicine following referral of the patient to the consultant occupational physician by a referring practitioner-each attendance after the first in a single course of treatment		63	71.4
410	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1999	1/07/2021	20.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	LEVEL AProfessional attendance at consulting rooms by a public health physician in the practice of his or her specialty of public health medicine for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management		15.5	17.6
411	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1999	1/07/2021	45.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	LEVEL BProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine at consulting rooms lasting less than 20 minutes, including any of the following that are clinically relevant: a) taking a patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.		33.9	38.4
412	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1999	1/07/2021	87.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	LEVEL CProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine at consulting rooms lasting at least 20 minutes, including any of the following that are clinically relevant: a) taking a detailed patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.		65.55	74.25
413	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1999	1/07/2021	128.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	LEVEL DProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine at consulting rooms lasting at least 40 minutes, including any of the following that are clinically relevant: a) taking an extensive patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.		96.45	109.35
414	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	C	1/11/1999			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	LEVEL AProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management	The fee for item 410, plus $26.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 410 plus $2.10 per patient.		
415	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	C	1/11/1999			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	LEVEL BProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms, lasting less than 20 minutes, including any of the following that are clinically relevant: a) taking a patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.	The fee for item 411, plus $26.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 411 plus $2.10 per patient.		
416	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	C	1/11/1999			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	LEVEL CProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms lasting at least 20 minutes, including any of the following that are clinically relevant: a) taking a detailed patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.	The fee for item 412, plus $26.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 412 plus $2.10 per patient.		
417	1/11/1999	[Table]	1	A13	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	C	1/11/1999			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	LEVEL DProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms lasting at least 40 minutes, including any of the following that are clinically relevant: a) taking an extensive patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.	The fee for item 413, plus $26.90 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 413 plus $2.10 per patient.		
585	1/03/2018	[Table]	1	A11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/03/2018	1/07/2021	135.1	135.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2018	Professional attendance by a general practitioner on one patient on one occasion—each attendance (other than an attendance in unsociable hours) in an after-hours period if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment; and (c) if the attendance is at consulting rooms—it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance		101.35	
588	1/03/2018	[Table]	1	A11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/03/2018	1/07/2021	135.1	135.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2018	Professional attendance by a medical practitioner (other than a general practitioner) on one patient on one occasion—each attendance (other than an attendance in unsociable hours) in an after-hours period if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment; and (c) the attendance is in an after-hours rural area; and (d) if the attendance is at consulting rooms—it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance		101.35	
591	1/03/2018	[Table]	1	A11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/03/2018	1/07/2021	93.65	93.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2018	Professional attendance by a medical practitioner (other than a general practitioner) on one patient on one occasion—each attendance (other than an attendance in unsociable hours) in an after-hours period if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment; and (c) the attendance is not in an after-hours rural area; and (d) if the attendance is at consulting rooms—it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance		70.25	
594	1/03/2018	[Table]	1	A11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/03/2018	1/07/2021	43.65	43.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2018	Professional attendance by a medical practitioner—each additional patient at an attendance that qualifies for item 585, 588 or 591 in relation to the first patient		32.75	
599	1/05/2010	[Table]	1	A11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	159.2	159.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2018	Professional attendance by a general practitioner on not more than one patient on one occasion—each attendance in unsociable hours if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment; and (c) if the attendance is at consulting rooms—it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance		119.4	
600	1/05/2010	[Table]	1	A11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	127.25	127.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2018	Professional attendance by a medical practitioner (other than a general practitioner) on not more than one patient on one occasion—each attendance in unsociable hours if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment; and (c) if the attendance is at consulting rooms—it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance		95.45	
699	1/04/2019	[Table]	1	A14	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Professional attendance on a patient who is 30 years of age or over for a heart health assessment by a general practitioner at consulting roomslasting at least 20 minutes and including: collection of relevant information, including taking a patient history; and a basic physical examination, which must include recording blood pressure and cholesterol; and initiating interventions and referrals as indicated; and implementing a management plan; and providing the patient with preventative health care advice and information.			
701	1/05/2010	[Table]	1	A14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2010	1/07/2021	61.75	61.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner to perform a brief health assessment, lasting not more than 20 minutes and including: (a) collection of relevant information, including taking a patient history; and (b) a basic physical examination; and (c) initiating interventions and referrals as indicated; and (d) providing the patient with preventive health care advice and information			
703	1/05/2010	[Table]	1	A14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2010	1/07/2021	143.5	143.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner to perform a standard health assessment, lasting more than 20 minutes but less than 45 minutes, including: (a) detailed information collection, including taking a patient history; and (b) an extensive physical examination; and (c) initiating interventions and referrals as indicated; and (d) providing a preventive health care strategy for the patient			
705	1/05/2010	[Table]	1	A14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2010	1/07/2021	198	198	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner to perform a long health assessment, lasting at least 45 minutes but less than 60 minutes, including: (a) comprehensive information collection, including taking a patient history; and (b) an extensive examination of the patient's medical condition and physical function; and (c) initiating interventions and referrals as indicated; and (d) providing a basic preventive health care management plan for the patient			

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707	1/05/2010	[Table]	1	A14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2010	1/07/2021	279.7	279.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner to perform a prolonged health assessment (lasting at least 60 minutes) including: (a) comprehensive information collection, including taking a patient history; and (b) an extensive examination of the patient's medical condition, and physical, psychological and social function; and (c) initiating interventions or referrals as indicated; and (d) providing a comprehensive preventive health care management plan for the patient		
715	1/05/2010	[Table]	1	A14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2010	1/07/2021	220.85	220.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner at consulting rooms or in another place other than a hospital or residential aged care facility, for a health assessment of a patient who is of Aboriginal or Torres Strait Islander descent not more than once in a 9-month period		
721	1/07/2005	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2005	1/07/2021	150.1	150.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner for preparation of a GP management plan for a patient (other than a service associated with a service to which any of items 731 to 758 apply)		112.6
723	1/07/2005	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2005	1/07/2021	118.95	118.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of items 731 to 758 apply)		89.25
729	1/07/2005	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2005	1/07/2021	73.25	73.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Contribution by a general practitioner to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of items 735 to 758 apply)		
731	1/07/2005	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2005	1/07/2021	73.25	73.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Contribution by a general practitioner to: (a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or (b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider (other than a service associated with a service to which items 735 to 758 apply)		
732	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	74.95	74.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner to review or coordinate a review of: (a) a GP management plan prepared by a general practitioner (or an associated general practitioner) to which item 721 applies; or (b) team care arrangements which have been coordinated by the general practitioner (or an associated general practitioner) to which item 723 applies		56.25
733	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	24.1	24.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of not more than 5 minutes in duration (other than a service to which another item applies) by a medical practitioner—each attendance		
735	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	73.55	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items 721 to 732 apply)		55.2
737	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	40.8	40.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 5 minutes in duration but not more than 25 minutes in duration (other than a service to which another item applies) by a medical practitioner—each attendance		
739	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	125.85	125.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which items 721 to 732 apply)		94.4
741	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	69.9	69.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 25 minutes in duration but not more than 45 minutes in duration (other than a service to which another item applies) by a medical practitioner—each attendance		
743	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	209.8	209.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 40 minutes (other than a service associated with a service to which items 721 to 732 apply)		157.35
745	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	98.05	98.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms of more than 45 minutes in duration (other than a service to which another item applies) by a medical practitioner—each attendance		
747	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	54.05	54.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items 721 to 732 apply)		40.55
750	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	92.6	92.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which items 721 to 732 apply)		69.45
758	1/05/2010	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/05/2010	1/07/2021	154.2	154.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 40 minutes (other than a service associated with a service to which items 721 to 732 apply)		115.65
761	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting not more than 5 minutes—an attendance on one or more patients on one occasion—each patient	1/07/2021	The fee for item 733, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 733 plus $1.70 per patient.
763	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes—an attendance on one or more patients on one occasion—each patient	1/07/2021	The fee for item 737, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 737 plus $1.70 per patient.
766	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes, but not more than 45 minutes—an attendance on one or more patients on one occasion—each patient	1/07/2021	The fee for item 741, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus $1.70 per patient.
769	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 45 minutes—an attendance on one or more patients on one occasion—each patient	1/07/2021	The fee for item 745, plus $21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus $1.70 per patient.
772	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self contained unit) of not more than 5 minutes in duration by a medical practitioner—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	1/07/2021	The fee for item 733, plus $38.85 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 733 plus $2.70 per patient.
776	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self contained unit) of more than 5 minutes in duration but not more than 25 minutes in duration by a medical practitioner—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	1/07/2021	The fee for item 737, plus $38.85 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 737 plus $2.70 per patient.
788	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self contained unit) of more than 25 minutes in duration but not more than 45 minutes by a medical practitioner—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	1/07/2021	The fee for item 741, plus $38.85 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus $2.70 per patient.
789	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	D	[Table]	N	N	N	N	N	N	P	D	1/07/2018				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self contained unit) of more than 45 minutes in duration by a medical practitioner—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	1/07/2021	The fee for item 745, plus $38.85 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus $2.70 per patient.
792	1/07/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/07/2018	1/07/2021	63.75	63.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance of at least 20 minutes in duration at consulting rooms by a medical practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who: (a) is currently pregnant; or (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or items 4001, 81001, 81005 or 81010 applies in relation to that pregnancy		
820	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	146.9		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to organise and coordinate a community case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines	110.2	124.9
822	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	220.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to organise and coordinate a community case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines	165.35	187.4
823	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	293.7		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to organise and coordinate a community case conference of at least 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines	220.1	249.65
825	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	105.5		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes, with the multidisciplinary case conference team	79.15	89.7
826	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	168.25		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, with the multidisciplinary case conference team	126.2	143.05

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828	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	231.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 45 minutes, with the multidisciplinary case conference team	173.3	196.4
830	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	146.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines	110.2	124.9
832	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	220.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines	165.35	187.4
834	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	293.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines	220.3	249.65
835	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	105.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	79.15	89.7
837	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	168.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	126.2	143.05
838	1/05/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2002	1/07/2021	231.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty, as a member of a case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	173.3	196.4
855	1/11/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2002	1/07/2021	146.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 15 minutes but less than 30 minutes, with the multidisciplinary case conference team	110.2	124.9
857	1/11/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2002	1/07/2021	220.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 30 minutes but less than 45 minutes, with the multidisciplinary case conference team	165.35	187.4
858	1/11/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2002	1/07/2021	293.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 45 minutes, with the multidisciplinary case conference team	220.3	249.65
861	1/11/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2002	1/07/2021	146.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	110.2	124.9
864	1/11/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2002	1/07/2021	220.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	165.35	187.4
866	1/11/2002	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2002	1/07/2021	293.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	220.3	249.65
871	1/11/2006	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	84.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, specialist or consultant physician as a member of a case conference team, to lead and coordinate a multidisciplinary case conference on a patient with cancer to develop a multidisciplinary treatment plan, if the case conference is of at least 30 minutes, with a multidisciplinary team of at least 3 other medical practitioners from different areas of medical practice (which may include general practice), and, in addition, allied health providers	63.6	72.1
872	1/11/2006	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	39.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Attendance by a general practitioner, specialist or consultant physician as a member of a case conference team, to participate in a multidisciplinary case conference on a patient with cancer to develop a multidisciplinary treatment plan, if the case conference is of at least 30 minutes, with a multidisciplinary team of at least 4 medical practitioners from different areas of medical practice (which may include general practice), and, in addition, allied health providers	29.65	33.6
880	1/05/2006	[Table]	1	A15	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	A	1/05/2006	1/07/2021	51.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of geriatric or rehabilitation medicine, as a member of a case conference team, to coordinate a case conference of at least 10 minutes but less than 30 minutes- for any particular patient, one attendance only in a 7 day period (other than attendance on the same day as an attendance for which item 832, 834, 835, 837 or 838 was applicable in relation to the patient) (H)	38.55	
894	1/11/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2018	1/07/2021	36.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Professional attendance by video conference by a medical practitioner, lasting more than 5 minutes but not more than 25 minutes, for providing mental health services to a patient with mental health issues, if the patient is affected by bushfire.		31.25
896	1/11/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2018	1/07/2021	71.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Professional attendance by video conference by a medical practitioner, lasting more than 25 minutes but not more than 45 minutes, for providing mental health services to a patient with mental health issues, if the patient is affected by bushfire.		60.6
898	1/11/2018	[Table]	1	A7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2018	1/07/2021	104.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Professional attendance by video conference by a medical practitioner, lasting more than 45 minutes, for providing mental health services to a patient with mental health issues if the patient is affected by bushfire.		89.2
900	1/10/2001	[Table]	1	A17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	161.1	161.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Participation by a general practitioner in a Domiciliary Medication Management Review (DMMR) for a patient living in a community setting, in which the general practitioner, with the patient's consent: (a) assesses the patient as: (i) having a chronic medical condition or a complex medication regimen; and (ii) not having their therapeutic goals met; and (b) following that assessment: (i) refers the patient to a community pharmacy or an accredited pharmacist for the DMMR; and (ii) provides relevant clinical information required for the DMMR; and (c) discusses with the reviewing pharmacist the results of the DMMR including suggested medication management strategies; and (d) develops a written medication management plan following discussion with the patient; and (e) provides the written medication management plan to a community pharmacy chosen by the patient For any particular patient—applicable not more than once in each 12 month period, except if there has been a significant change in the patient's condition or medication regimen requiring a new DMMR		
903	1/11/2004	[Table]	1	A17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	110.3	110.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Participation by a general practitioner in a residential medication management review (RMMR) for a patient who is a permanent resident of a residential aged care facility-other than an RMMR for a resident in relation to whom, in the preceding 12 months, this item has applied, unless there has been a significant change in the resident's medical condition or medication management plan requiring a new RMMR		
941	10/12/2020	[Table]	1	A7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	A	10/12/2020	1/07/2021	84.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility But not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 30 minutes, but less than 60 minutes		77.2
942	10/12/2020	[Table]	1	A7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	10/12/2020	1/07/2021	130	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility But not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 60 minutes		110.5
2121	1/11/2018	[Table]	1	A30	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2018	1/07/2021	45.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Professional attendance by video conference by a general practitioner, lasting less than 20 minutes, for providing mental health services to a patient with mental health issues, if the patient is affected by bushfire.		39.1
2150	1/11/2018	[Table]	1	A30	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2018	1/07/2021	89.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Professional attendance by video conference by a general practitioner, lasting at least 20 minutes, for providing mental health services to a patient with mental health issues, if the patient is affected by bushfire.		75.7
2196	1/11/2018	[Table]	1	A30	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2018	1/07/2021	131.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Professional attendance by video conference by a general practitioner, lasting at least 40 minutes, for providing mental health services to a patient with mental health issues, if the patient is affected by bushfire.		111.45
2497	1/05/2005	[Table]	1	A18	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2005	1/07/2021	17.6	17.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Professional attendance at consulting rooms by a general practitioner: (a) involving taking a short patient history and, if required, limited examination and management; and (b) at which a specimen for a cervical screening service is collected from the patient; If the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years.		
2501	1/11/2001	[Table]	1	A18	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	38.55	38.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Professional attendance by a general practitioner at consulting rooms, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andat which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years.		
2503	1/11/2001	[Table]	1	A18	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Professional attendance by a general practitioner at a place other than consulting rooms, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andat which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years.	The fee for item 2501, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2501 plus $2.30 per patient.	

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2504	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	74.6	74.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance by a general practitioner at consulting rooms, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andat which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
2506	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance by a general practitioner at a place other than consulting rooms, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andat which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	The fee for item 2504, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2504 plus $2.10 per patient.
2507	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	109.85	109.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance by a general practitioner at consulting rooms, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andat which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
2509	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance by a general practitioner at a place other than consulting rooms, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andat which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	The fee for item 2507, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2507 plus $2.10 per patient.
2517	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	38.55	38.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andcompletes the minimum requirements of a cycle of care for a patient with established diabetes mellitus	
2518	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	Professional attendance by a general practitioner at a place other than consulting rooms, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, andcompletes the minimum requirements of a cycle of care for a patient with established diabetes mellitus	The fee for item 2517, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2517 plus $2.10 per patient.
2521	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	74.6	74.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of a cycle of care for a patient with established diabetes mellitus	
2522	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	Professional attendance by a general practitioner at a place other than consulting rooms, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of a cycle of care for a patient with established diabetes mellitus	The fee for item 2521, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for 2521 plus $2.10 per patient.
2525	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	109.85	109.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of a cycle of care for a patient with established diabetes mellitus	
2526	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	Professional attendance by a general practitioner at a place other than consulting rooms, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of a cycle of care for a patient with established diabetes mellitus	The fee for item 2525, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for 2525 plus $2.10 per patient.
2546	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	38.55	38.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of the Asthma Cycle of Care	
2547	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	Professional attendance by a general practitioner at a place other than consulting rooms, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of the Asthma Cycle of Care	The fee for item 2546, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2546 plus $2.10 per patient.
2552	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	74.6	74.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of the Asthma Cycle of Care	
2553	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	Professional attendance by a general practitioner at a place other than consulting rooms, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of the Asthma Cycle of Care	The fee for item 2552, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2552 plus $2.10 per patient.
2558	1/11/2001	ITable	1	A18	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	109.85	109.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of the Asthma Cycle of Care	
2559	1/11/2001	ITable	1	A18	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	Professional attendance by a general practitioner at a place other than consulting rooms, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, and that completes the minimum requirements of the Asthma Cycle of Care	The fee for item 2558, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 2558 plus $2.10 per patient.
2598	1/05/2005	ITable	1	A19	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/05/2005	1/05/2005	11	11	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance at consulting rooms of less than 5 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner)at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
2600	1/11/2001	ITable	1	A19	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	21	21	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance at consulting rooms of more than 5, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner),at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
2603	1/11/2001	ITable	1	A19	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	38	38	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance at consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
2606	1/11/2001	ITable	1	A19	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	61	61	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance at consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	
2610	1/11/2001	ITable	1	A19	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner),at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	An amount equal to $16.90, plus $17.50 divided by the number of patients seen, up to a maximum of 1/11/2001 six patients. For seven or more patients - an amount equal to: $16.90 plus $0.70 per patient
2613	1/11/2001	ITable	1	A19	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	D	1/11/2001				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/2017	Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	An amount equal to $35.50, plus $15.50 divided by the number of patients seen, up to a maximum of 1/11/2001 six patients. For seven or more patients - an amount equal to $35.50 plus $0.70 per patient

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2616	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), at which a specimen for a cervical screening service is collected from the patient, if the patient is at least 24 years and 9 months of age but is less than 75 years of age and has not been provided with a cervical screening service or a cervical smear service in the last 4 years	1/11/2001	An amount equal to $57.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $57.50 plus $0.70 per patient
2620	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	Professional attendance at consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus		
2622	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the requirements for a cycle of care of a patient with established diabetes mellitus		
2624	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	61	61	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus		
2631	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus	1/11/2001	An amount equal to $16.00, plus $17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $16.00 plus $0.70 per patient
2633	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance at a place other than consulting rooms of more than 25 minutes but not more than 45 minutes, in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus	1/11/2001	An amount equal to $35.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $35.50 plus $0.70 per patient
2635	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus	1/11/2001	An amount equal to $57.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $57.50 plus $0.70 per patient
2664	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements of the Asthma Cycle of Care		
2666	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements of the Asthma Cycle of Care		
2668	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2001	1/11/2001	61	61	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements of the Asthma Cycle of Care		
2673	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements of the Asthma Cycle of Care	1/11/2001	An amount equal to $16.00, plus $17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $16.00 plus $0.70 per patient
2675	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements of the Asthma Cycle of Care	1/11/2001	An amount equal to $35.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $35.50 plus $0.70 per patient
2677	1/11/2001	[Table]	1	A19	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2001				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements of the Asthma Cycle of Care	1/11/2001	An amount equal to $57.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $57.50 plus $0.70 per patient
2700	1/11/2011	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2011	1/07/2021	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner (including a general practitioner who has not undertaken mental health skills training) of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		55.95
2701	1/11/2011	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2011	1/07/2021	109.85	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner (including a general practitioner who has not undertaken mental health skills training) of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		82.4
2712	1/11/2006	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2006	1/07/2021	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner to review a GP mental health treatment plan which he or she, or an associated general practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan		55.95
2713	1/11/2006	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2006	1/07/2021	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation		
2715	1/11/2011	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2011	1/07/2021	94.75	94.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner (including a general practitioner who has undertaken mental health skills training) of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		71.1
2717	1/11/2011	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	D	1/11/2011	1/07/2021	139.55	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance by a general practitioner (including a general practitioner who has undertaken mental health skills training) of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		104.7
2721	1/11/2002	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes		
2723	1/11/2002	[Table]	1	A20	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2002				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes	1/07/2021	The fee for item 2721, plus $27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2721 plus $2.10 per patient
2725	1/11/2002	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2004	1/07/2021	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes		
2727	1/11/2002	[Table]	1	A20	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	D	1/11/2002				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Professional attendance at a place other than consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes	1/07/2021	The fee for item 2725, plus $27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2725 plus $2.10 per patient
2733	10/12/2020	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	10/12/2020	1/07/2021	193.5		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c)the service lasts at least 30 minutes, but less than 40 minutes		96.5
2735	10/12/2020	[Table]	1	A20	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	10/12/2020	1/07/2021	262.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 40 minutes		138.1
2801	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	159.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-initial attendance in a single course of treatment	119.55	135.45
2806	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	79.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each attendance (other than a service to which item 2814 applies) after the first in a single course of treatment	59.85	67.8
2814	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each minor attendance after the first attendance in a single course of treatment	34.05	38.6
2824	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/05/2006	1/07/2021	191.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-initial attendance in a single course of treatment		164.35
2832	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/05/2006	1/07/2021	116.95		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each attendance (other than a service to which item 2840 applies) after the first in a single course of treatment		99.45
2840	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/05/2006	1/07/2021	84.25		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each minor attendance after the first attendance in a single course of treatment		71.65
2946	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	146.9		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a community case conference of at least 15 minutes but less than 30 minutes	110.2	124.9
2949	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	220.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a community case conference of at least 30 minutes but less than 45 minutes	165.35	187.4
2954	1/05/2006	[Table]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	293.7		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a community case conference of at least 45 minutes	220.3	249.65

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2958	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	105.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to participate in a community case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes	79.15	89.7
2972	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	148.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to participate in a community case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes	126.2	143.05
2974	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	231.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to participate in a community case conference (other than to organise and coordinate the conference) of at least 45 minutes	173.3	196.4
2978	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	146.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a discharge case conference of at least 15 minutes but less than 30 minutes, before the patient is discharged from a hospital (H)	110.2	124.9
2984	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	220.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a discharge case conference of at least 30 minutes but less than 45 minutes, before the patient is discharged from a hospital (H)	165.35	187.4
2988	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	293.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a discharge case conference of at least 45 minutes, before the patient is discharged from a hospital (H)	220.3	249.65
2992	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	105.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes, before the patient is discharged from a hospital (H)	79.15	89.7
2996	1/05/2006	ITable]	1	A24	[Table]	[Table]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	148.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, before the patient is discharged from a hospital (H)	126.2	143.05
3000	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	231.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of pain medicine, as a member of a multidisciplinary case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 45 minutes, before the patient is discharged from a hospital (H)	173.3	196.4
3005	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	159.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-initial attendance in a single course of treatment	119.55	135.45
3010	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	79.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each attendance (other than a service to which item 3014 applies) after the first in a single course of treatment	59.85	67.8
3014	1/05/2006	ITable]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	ITable]	ITable]	1/11/2019	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each minor attendance after the first attendance in a single course of treatment	34.05	38.6
3018	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	B	1/05/2006	1/07/2021	193.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-initial attendance in a single course of treatment		164.35
3023	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	B	1/05/2006	1/07/2021	116.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each attendance (other than a service to which item 3028 applies) after the first in a single course of treatment		99.45
3028	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	B	1/05/2006	1/07/2021	84.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine following referral of the patient to the specialist or consultant physician by a referring practitioner-each minor attendance after the first attendance in a single course of treatment		71.65
3032	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	146.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a community case conference of at least 15 minutes but less than 30 minutes	110.2	124.9
3040	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	220.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a community case conference of at least 30 minutes but less than 45 minutes	165.35	187.4
3044	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	293.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a community case conference of at least 45 minutes	220.3	249.65
3051	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	105.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to participate in a community case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes	79.15	89.7
3055	1/05/2006	ITable]	1	A24	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	148.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to participate in a community case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines	126.2	143.05
3062	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	231.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to participate in a community case conference (other than to organise and coordinate the conference) of at least 45 minutes	173.3	196.4
3069	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	146.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a discharge case conference of at least 15 minutes but less than 30 minutes, before the patient is discharged from a hospital (H)	110.2	124.9
3074	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	220.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a case conference team, to organise and coordinate a discharge case conference of at least 30 minutes but less than 45 minutes, before the patient is discharged from a hospital (H)	165.35	187.4
3078	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	293.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to organise and coordinate a discharge case conference of at least 45 minutes, before the patient is discharged from a hospital (H)	220.3	249.65
3083	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	105.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes, before the patient is discharged from a hospital (H)	79.15	89.7
3088	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	148.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, before the patient is discharged from a hospital (H)	126.2	143.05
3093	1/05/2006	ITable]	1	A24	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2006	1/07/2021	231.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Attendance by a specialist, or consultant physician, in the practice of the specialist's or consultant physician's specialty of palliative medicine, as a member of a multidisciplinary case conference team, to participate in a discharge case conference (other than to organise and coordinate the conference) of at least 45 minutes, before the patient is discharged from a hospital (H)	173.3	196.4
4001	1/11/2006	ITable]	1	A27	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/11/2006	1/07/2021	79.7	79.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Professional attendance of at least 20 minutes in duration at consulting rooms by a general practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a patient who: (a) is currently pregnant; or (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or item 81000, 81005 or 81010 applies in relation to that pregnancy Note For items 81000, 81005 and 81010, see the determination about allied health services under subsection 3C(1) of the Act.		
5000	1/01/2005	ITable]	1	A22	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/01/2005	1/07/2021	30.15	30.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2010	Professional attendance at consulting rooms (other than a service to which another item applies) by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management-each attendance		
5001	1/03/2020	ITable]	1	A21	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	61.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2020	Professional attendance, on a patient aged 4 years or over but under 75 years old, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of ordinary complexity	45.8	51.9
5003	1/01/2005	ITable]	1	A22	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	ITable]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management- an attendance on one or more patients on one occasion-each patient	1/07/2021	The fee for item 5000, plus $27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5000 plus $2.10 per patient.

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S004	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	102.5		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged under 4 years, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of ordinary complexity		76.9	87.15
S010	1/01/2005	[Table]	1	A22	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex, if the patient is accommodated in a residential aged care facility (other than accommodation in a self-contained unit) by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	The fee for item S000, plus $48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item S000 plus $3.45 per patient.	1/07/2021	
S011	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	102.5		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 75 years or over, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of ordinary complexity		76.9	87.15
S012	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	160.7		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 4 years or over but under 75 years old, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of complexity that is more than ordinary but is not high		120.55	136.6
S013	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	202.15		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged under 4 years, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of complexity that is more than ordinary but is not high		151.65	171.85
S014	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	202.15		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 75 years or over, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of complexity that is more than ordinary but is not high		151.65	171.85
S016	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	271.25		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 4 years or over but under 75 years old, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of high complexity		203.45	230.6
S017	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	312.8		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged under 4 years, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of high complexity		234.6	265.9
S019	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	312.8		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 75 years or over, at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine involving medical decision-making of high complexity		234.6	265.9
S020	1/01/2005	[Table]	1	A22	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/01/2005	1/07/2021	51	51	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Professional attendance by a general practitioner at consulting rooms (other than a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-each attendance			
S021	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	45.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 4 years or over but under 75 years old, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of ordinary complexity		34.35	38.9
S022	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	76.9		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged under 4 years, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of ordinary complexity		57.7	65.4
S023	1/01/2005	[Table]	1	A22	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient	The fee for item S020, plus $27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item S020 plus $2.10 per patient.	1/07/2021	
S027	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	76.9		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 75 years or over,at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of ordinary complexity		57.7	65.4
S028	1/01/2005	[Table]	1	A22	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than a service to which another item in the table applies), at a residential aged care facility to residents of the facility, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	The fee for item S020, plus $48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item S020 plus $3.45 per patient.	1/07/2021	
S030	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	120.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 4 years or over but under 75 years old, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of complexity that is more than ordinary but is not high		90.35	102.4
S031	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	151.6		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged under 4 years,at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of complexity that is more than ordinary but is not high		113.7	128.9
S032	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	151.6		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 75 years or over, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of complexity that is more than ordinary but is not high		113.7	128.9
S033	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	203.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient 4 years or over but under 75 years old, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of high complexity		152.6	172.95
S035	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	234.6		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged under 4 years, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of high complexity		175.95	199.45
S036	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	234.6		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance, on a patient aged 75 years or over, at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) involving medical decision-making of high complexity		175.95	199.45
S039	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	148.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine for preparation of goals of care by the specialist for a gravely ill patient lacking current goals of care if: (a) the specialist takes overall responsibility for the preparation of the goals of care for the patient; and (b) the attendance is the first attendance by the specialist for the preparation of the goals of care for the patient following the presentation of the patient to the emergency department; and (c) the attendance is in conjunction with, or after, an attendance on the patient by the specialist that is described in item S001, S004, S011, S012, S013, S014, S016, S017 or S019		111.2	126.05
S040	1/01/2005	[Table]	1	A22	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/01/2005	1/07/2021	87.4	87.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Professional attendance by a general practitioner at consulting rooms (other than a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-each attendance			
S041	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance at a recognised emergency department of a private hospital by a specialist in the practice of the specialist's specialty of emergency medicine for preparation of goals of care by the specialist for a gravely ill patient lacking current goals of care if: (a) the specialist takes overall responsibility for the preparation of the goals of care for the patient; and (b) the attendance is the first attendance by the specialist for the preparation of the goals of care for the patient following the presentation of the patient to the emergency department; and (c) the attendance is not in conjunction with, or after, an attendance on the patient by the specialist that is described in item S001, S004, S011, S012, S013, S014, S016, S017 or S019; and (d) the attendance is for at least 60 minutes		208.1	236.95
S042	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	111.25		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) for preparation of goals of care by the practitioner for a gravely ill patient lacking current goals of care if: (a) the practitioner takes overall responsibility for the preparation of the goals of care for the patient; and (b) the attendance is the first attendance by the practitioner for the preparation of the goals of care for the patient following the presentation of the patient to the emergency department; and (c) the attendance is in conjunction with, or after, an attendance on the patient by the practitioner that is described in item S021, S022, S027, S030, S031, S032, S033, S035 or S036		83.45	94.6
S043	1/01/2005	[Table]	1	A22	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient	The fee for item S040, plus $27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item S040 plus $2.10 per patient.	1/07/2021	
S044	1/03/2020	[Table]	1	A21	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	209		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Professional attendance at a recognised emergency department of a private hospital by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) for preparation of goals of care by the practitioner for a gravely ill patient lacking current goals of care if: (a) the practitioner takes overall responsibility for the preparation of the goals of care for the patient; and (b) the attendance is the first attendance by the practitioner for the preparation of the goals of care for the patient following the presentation of the patient to the emergency department; and (c) the attendance is not in conjunction with, or after, an attendance on the patient by the practitioner that is described in item S021, S022, S027, S030, S031, S032, S033, S035 or S036; and (d) the attendance is for at least 60 minutes		156.75	177.65

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5049	1/01/2005	ITable	1	A22	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance by a general practitioner at a residential aged care facility to residents of the facility (other than a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	1/07/2021	The fee for item 5040, plus $48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5040 plus $3.45 per patient.
5060	1/01/2005	ITable	1	A22	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/01/2005	1/07/2021	122.55	122.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2010	Professional attendance by a general practitioner at consulting rooms (other than a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-each attendance		
5063	1/01/2005	ITable	1	A22	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient	1/07/2021	The fee for item 5060, plus $27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5060 plus $2.10 per patient.
5067	1/01/2005	ITable	1	A22	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance by a general practitioner at a residential aged care facility to residents of the facility (other than a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	1/07/2021	The fee for item 5060, plus $48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5060 plus $3.45 per patient.
5200	1/01/2005	ITable	1	A23	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/01/2005	1/01/2005	21	21	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2005	Professional attendance at consulting rooms of not more than 5 minutes in duration (other than a service to which another item applies) by a medical practitioner (other than a general practitioner)-each attendance		
5203	1/01/2005	ITable	1	A23	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/01/2005	1/01/2005	31	31	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2005	Professional attendance at consulting rooms of more than 5 minutes in duration but not more than 25 minutes in duration (other than a service to which another item applies) by a medical practitioner (other than a general practitioner)-each attendance		
5207	1/01/2005	ITable	1	A23	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/01/2005	1/01/2005	48	48	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2005	Professional attendance at consulting rooms of more than 25 minutes in duration but not more than 45 minutes in duration (other than a service to which another item applies) by a medical practitioner (other than a general practitioner)-each attendance		
5208	1/01/2005	ITable	1	A23	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/01/2005	1/01/2005	71	71	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2005	Professional attendance at consulting rooms of more than 45 minutes in duration (other than a service to which another item applies) by a medical practitioner (other than a general practitioner)-each attendance		
5220	1/01/2005	ITable	1	A23	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting not more than 5 minutes-an attendance on one or more patients on one occasion-each patient	1/01/2005	An amount equal to $18.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $18.50 plus $.70 per patient
5223	1/01/2005	ITable	1	A23	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes-an attendance on one or more patients on one occasion-each patient	1/01/2005	An amount equal to $26.00, plus $17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $26.00 plus $.70 per patient
5227	1/01/2005	ITable	1	A23	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes, but not more than 45 minutes-an attendance on one or more patients on one occasion-each patient	1/01/2005	An amount equal to $45.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $45.50 plus $.70 per patient
5228	1/01/2005	ITable	1	A23	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 45 minutes-an attendance on one or more patients on one occasion-each patient	1/01/2005	An amount equal to $67.50, plus $15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $67.50 plus $.70 per patient
5260	1/01/2005	ITable	1	A23	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of not more than 5 minutes in duration by a medical practitioner (other than a general practitioner)-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	1/11/2007	An amount equal to $18.50, plus $27.95 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $18.50 plus $1.25 per patient
5263	1/01/2005	[Table]	1	A23	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 5 minutes in duration but not more than 25 minutes in duration by a medical practitioner (other than a general practitioner)-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	1/11/2007	An amount equal to $26.00, plus $31.55 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $26.00 plus $1.25 per patient
5265	1/01/2005	[Table]	1	A23	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/01/2005				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 25 minutes in duration but not more than 45 minutes by a medical practitioner (other than a general practitioner)-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	1/11/2007	An amount equal to $45.50, plus $27.95 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $45.50 plus $1.25 per patient
5267	1/01/2005	ITable	1	A23	ITable	ITable	S	D	ITable	N	N	N	N	N	N	P	E	1/01/2005				ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 45 minutes in duration by a medical practitioner (other than a general practitioner)-an attendance on one or more patients at one residential aged care facility on one occasion-each patient	1/11/2007	An amount equal to $67.50, plus $27.95 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $67.50 plus $1.25 per patient
6007	1/11/2006	ITable	1	A26	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	89.85		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist-an attendance (other than a second or subsequent attendance in a single course of treatment) at consulting rooms or hospital		102.65 116.35
6009	1/11/2006	ITable	1	A26	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	45.4		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist-a minor attendance after the first in a single course of treatment at consulting rooms or hospital		34.05 38.6
6011	1/11/2006	ITable	1	A26	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	60.35		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist-an attendance after the first in a single course of treatment, involving an extensive and comprehensive examination, arranging any necessary investigations in relation to one or more complex problems and of more than 15 minutes in duration but not more than 30 minutes in duration at consulting rooms or hospital		67.8 76.8
6013	1/11/2006	ITable	1	A26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	125.15		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist-an attendance after the first in a single course of treatment, involving a detailed and comprehensive examination, arranging any necessary investigations in relation to one or more complex problems and of more than 30 minutes in duration but not more than 45 minutes in duration at consulting rooms or hospital		93.9 106.4
6015	1/11/2006	ITable	1	A26	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	159.35		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist-an attendance after the first in a single course of treatment, involving an exhaustive and comprehensive examination, arranging any necessary investigations in relation to one or more complex problems and of more than 45 minutes in duration at consulting rooms or hospital		119.55 135.45
6018	1/11/2016	ITable	1	A31	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	159.35		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty following referral of the patient to the addiction medicine specialist by a referring practitioner, if the attendance: (a) includes a comprehensive assessment; and (b) is the first or only time in a single course of treatment that a comprehensive assessment is provided		119.55 135.45
6019	1/11/2016	ITable	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	79.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty following referral of the patient to the addiction medicine specialist by a referring practitioner, if the attendance is a patient assessment: (a) before or after a comprehensive assessment under item 6018 in a single course of treatment; or (b) that follows an initial assessment under item 6023 in a single course of treatment; or (c) that follows a review under item 6024 in a single course of treatment		59.85 67.8
6023	1/11/2016	ITable	1	A31	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	278.75		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty of at least 45 minutes for an initial assessment of a patient with at least 2 morbidities, following referral of the patient to the addiction medicine specialist by a referring practitioner, if: (a) an assessment is undertaken that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) a comprehensive multi or detailed single organ system assessment; and (b) the formulation of differential diagnoses; and (b) an addiction medicine specialist treatment and management plan of significant complexity that includes the following is prepared and provided to the referring practitioner: (i) an opinion on diagnosis and risk assessment; (ii) treatment options and decisions; (iii) medication recommendations; and (v) an attendance on the patient to which item 104, 105, 110, 116, 119, 122, 133, 6018 or 6019 applies did not take place on the same day by the same addiction medicine specialist; and (d) neither this item nor item 132 has applied to an attendance on the patient in the preceding 12 months by the same addiction medicine specialist		209.1 236.95
6024	1/11/2016	ITable	1	A31	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	139.55		ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Professional attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty of at least 20 minutes, after the first attendance in a single course of treatment for a review of a patient with at least 2 morbidities if: (a) a review is undertaken that covers: (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (b) the modified addiction medicine specialist treatment and management plan is provided to the referring practitioner, which involves, if appropriate: (i) a revised opinion on diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) revised medication recommendations; and (c) an attendance on the patient to which item 104, 105, 110, 116, 119, 122, 133, 6018 or 6019 applies did not take place on the same day by the same addiction medicine specialist; and (d) item 6023 applied to an attendance claimed in the preceding 12 months; and (e) the attendance under this item is claimed by the same addiction medicine specialist who claimed item 6023 or by a locum tenens; and (f) this item has not applied more than twice in any 12 month period		104.7 118.65

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6028	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	52.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Group therapy (including any associated consultation with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted) of not less than 1 hour, given under the continuous direct supervision of an addiction medicine specialist in the practice of the addiction medicine specialist's specialty for a group of 2 to 9 unrelated patients, or a family group of more than 2 patients, each of whom is referred to the addiction medicine specialist by a referring practitioner-for each patient	39.05	44.25
6029	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	45.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of less than 15 minutes, with the multidisciplinary case conference team	33.85	38.35
6031	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	79.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 15 minutes but less than 30 minutes, with the multidisciplinary case conference team	59.85	67.8
6032	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	119.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 30 minutes but less than 45 minutes, with the multidisciplinary case conference team	89.75	101.75
6034	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate the multidisciplinary case conference of at least 45 minutes, with the multidisciplinary case conference team	119.55	135.45
6035	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	36.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of less than 15 minutes, with the multidisciplinary case conference team	27.05	30.65
6037	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	63.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes, with the multidisciplinary case conference team	47.85	54.25
6038	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	95.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, with the multidisciplinary case conference team	71.8	81.35
6042	1/11/2016	[Table]	1	A31	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	127.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 45 minutes, with the multidisciplinary case conference team	95.65	108.4
6051	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty following referral of the patient to the sexual health medicine specialist by a referring practitioner, if the attendance: (a) includes a comprehensive assessment; and (b) is the first occasion in a single course of treatment that a comprehensive assessment is provided	119.55	135.45
6052	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	79.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty following referral of the patient to the sexual health medicine specialist by a referring practitioner, if the attendance is a patient assessment: (a) before or after a comprehensive assessment under item 6051 in a single course of treatment; or (b) that follows an initial assessment under item 6057 in a single course of treatment; or (c) that follows a review under item 6058 in a single course of treatment	59.85	67.8
6057	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty of at least 45 minutes for an initial assessment of a patient with at least 2 morbidities, following referral of the patient to the sexual health medicine specialist by a referring practitioner, if: (a) an assessment is undertaken that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) a comprehensive multi or detailed single organ system assessment; and (b) the formulation of differential diagnoses; and (b) a sexual health medicine specialist treatment and management plan of significant complexity that includes the following is prepared and provided to the referring practitioner: (i) an opinion on diagnosis and risk assessment; (ii) treatment options and decisions; (iii) medication recommendations; and (c) an attendance on the patient to which item 104, 105, 110, 116, 119, 132, 133, 6051 or 6052 applies did not take place on the same day by the same sexual health medicine specialist; and (d) neither this item nor item 132 has applied to an attendance on the patient in the preceding 12 months by the same sexual health medicine specialist	209.1	236.95
6058	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty of at least 20 minutes, after the first attendance in a single course of treatment for a review of a patient with at least 2 morbidities if: (a) a review is undertaken that covers: (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (b) the modified sexual health medicine specialist treatment and management plan is provided to the referring practitioner, which involves, if appropriate: (i) a revised opinion on diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) revised medication recommendations; and (c) an attendance on the patient, being an attendance to which item 104, 105, 110, 116, 119, 132, 133, 6051 or 6052 applies did not take place on the same day by the same sexual health medicine specialist; and (d) item 6057 applied to an attendance claimed in the preceding 12 months; and (e) the attendance under this item is claimed by the same sexual health medicine specialist who claimed item 6057 or by a locum tenens; and (f) this item has not applied more than twice in any 12 month period	104.7	118.65
6062	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2016	1/07/2021	98.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or a hospital by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty following referral of the patient to the sexual health medicine specialist by a referring practitioner-initial attendance in a single course of treatment		164.35
6063	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2016	1/07/2021	116.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance at a place other than consulting rooms or a hospital by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty following referral of the patient to the sexual health medicine specialist by a referring practitioner-each attendance after the attendance under item 6062 in a single course of treatment		99.45
6064	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	45.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of less than 15 minutes, with the multidisciplinary case conference team	33.85	38.35
6065	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	79.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 15 minutes but less than 30 minutes, with the multidisciplinary case conference team	59.85	67.8
6067	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	119.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 30 minutes but less than 45 minutes, with the multidisciplinary case conference team	89.75	101.75
6068	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to organise and coordinate a community case conference of at least 45 minutes, with the multidisciplinary case conference team	119.55	135.45
6071	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	36.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of less than 15 minutes, with the multidisciplinary case conference team	27.05	30.65
6072	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	63.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 15 minutes but less than 30 minutes, with the multidisciplinary case conference team	47.85	54.25
6074	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	95.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 30 minutes but less than 45 minutes, with the multidisciplinary case conference team	71.8	81.35
6075	1/11/2016	[Table]	1	A32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2016	1/07/2021	127.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Attendance by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty, as a member of a multidisciplinary case conference team of at least 2 other formal care providers of different disciplines, to participate in a community case conference (other than to organise and coordinate the conference) of at least 45 minutes, with the multidisciplinary case conference team	95.65	108.4
6080	1/11/2017	[Table]	1	A33	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	52.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Coordination of a TAVI Case Conference by a TAVI Practitioner where the TAVI Case Conference has a duration of 10 minutes or more. (Not payable more than once per patient in a five year period.)	39.75	45.05
6081	1/11/2017	[Table]	1	A33	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	39.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Attendance at a TAVI Case Conference by a specialist or consultant physician who does not also perform the service described in item 6080 for the same case conference where the TAVI Case Conference has a duration of 10 minutes or more. (Not payable more than twice per patient in a five year period.)	29.65	33.6
6082	1/07/2021	[Table]	1	A33	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N		C	1/07/2021	1/07/2021	52.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Attendance at a TMVr suitability case conference, by a cardiothoracic surgeon or an interventional cardiologist, to coordinate the conference, if: (a) the attendance lasts at least 10 minutes; and (b) the surgeon or cardiologist is accredited by the TMVr accreditation committee to perform the service Applicable once each 5 years	39.75	45.05

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6084	1/07/2021	[Table]	1	A33	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/2021	1/07/2021	39.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Attendance at a TMH suitability case conference, by a specialist or consultant physician, other than to coordinate the conference, if the attendance lasts at least 10 minutes Applicable once each 5 years	29.65	33.6
10660	18/06/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	B	18/06/2021	1/07/2021	45.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	29/06/2021	Professional attendance by a general practitioner, if all of the following apply: (a) the service is associated with a service to which item 93624, 93625, 93634, 93635, 93644, 93645, 93653 or 93654 applies; (b) the service requires personal attendance by the general practitioner, lasting more than 10 minutes in duration, to provide in-depth clinical advice on the individual risks and benefits associated with receiving a COVID-19 vaccine; (c) one or both of the following is undertaken, where clinically relevant: (i) a detailed patient history; (ii) complex examination and management; (d) the service is bulk billed Note: Effective 29 June2021, age restrictions on the use of this item have been removed.		39.1
10661	18/06/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	B	18/06/2021	1/07/2021	36.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	29/06/2021	Professional attendance by a medical practitioner (other than a general practitioner), if all of the following apply: (a) the service is associated with a service to which item 93626, 93627, 93636, 93637, 93646, 93647, 93655 or 93656 applies; (b) the service requires personal attendance by the medical practitioner (other than a general practitioner), lasting more than 10 minutes in duration, to provide in-depth clinical advice on the individual risks and benefits associated with receiving a COVID-19 vaccine; (c) one or both of the following is undertaken, where clinically relevant: (i) a detailed patient history; (ii) complex examination and management; (d) the service is bulk-billed Note: Effective 29 June2021, age restrictions on the use of this item have been removed.		31.3
10801	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with myopia of 5.0 dioptres or greater (spherical equivalent) in one eye	96.4	109.25
10802	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with manifest hypermyopia of 5.0 dioptres or greater (spherical equivalent) in one eye	96.4	109.25
10803	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with astigmatism of 3.0 dioptres or greater in one eye	96.4	109.25
10804	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with irregular astigmatism in either eye, being a condition the existence of which has been confirmed by keratometric observation, if the maximum visual acuity obtainable with spectacle correction is worse than 0.3 logMAR (6/12) and if that corrected acuity would be improved by an additional 0.1 logMAR by the use of a contact lens	96.4	109.25
10805	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with aniseimetropia of 3.0 dioptres or greater (difference between spherical equivalents)	96.4	109.25
10806	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with correction in each eye of acuity of 0.7 logMAR (6/30) or worse in both eyes and for whom a contact lens is prescribed as part of a telescopic system	96.4	109.25
10807	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient for whom a wholly or segmentally opaque contact lens is prescribed for the alleviation of diplopia, blindness or diplopia caused by pathological mydriasis, aniridia, coloboma of the iris, pupillary deformation or distortion, significant ocular deformity or corneal opacity-whether congenital, traumatic or surgical in origin	96.4	109.25
10808	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient who, because of physical deformity, are unable to wear spectacles	96.4	109.25
10809	1/12/1991	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription-one service in any period of 36 months-patient with a medical or optical condition (other than myopia, hyperopia, astigmatism, anisometropia or a condition to which item 10806, 10807 or 10808 applies) requiring the use of a contact lens for correction, if the condition is specified on the patient's account	96.4	109.25
10816	19/06/1997	[Table]	1	A9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1997	1/07/2021	128.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	Attendance for the refitting of contact lenses with keratometry and testing with trial lenses and the issue of a prescription, if the patient requires a change in contact lens material or basic lens parameters, other than simple power change, because of a structural or functional change in the eye or an allergic response within 36 months after the fitting of a contact lens to which item 10801 to 10809 apply	96.4	109.25
10905	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	B	1/11/2004	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	REFERRED COMPREHENSIVE INITIAL CONSULTATION Professional attendance of more than 15 minutes duration, being the first in a course of attention, where the patient has been referred by another optometrist who is not associated with the optometrist to whom the patient is referred		59.05
10907	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	COMPREHENSIVE INITIAL CONSULTATION BY ANOTHER PRACTITIONER Professional attendance of more than 15 minutes in duration, being the first in a course of attention if the patient has attended another optometrist for an attendance to which this item or item 10905, 10910, 10911, 10912, 10913, 10914 or 10915 applies, or to which old item 10900 applied: (a) for a patient who is less than 65 years of age-within the previous 36 months; or (b) for a patient who is at least 65 years or age-within the previous 12 months		29.6
10910	1/01/2015	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/01/2015	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	COMPREHENSIVE INITIAL CONSULTATION - PATIENT IS LESS THAN 65 YEARS OF AGE Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if: (a) the patient is less than 65 years of age; and (b) the patient has not, within the previous 36 months, received a service to which: (i)this item or item 10905, 10907, 10912, 10913, 10914 or 10915 applies; or (ii) old item 10900 applied		59.05
10911	1/01/2015	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/01/2015	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	COMPREHENSIVE INITIAL CONSULTATION - PATIENT IS AT LEAST 65 YEARS OF AGE Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if: (a) the patient is at least 65 years of age; and (b) the patient has not, within the previous 12 months, received a service to which: (i)this item, or item 10905, 10907, 10910, 10912, 10913, 10914 or 10915 applies; or (ii) old item 10900 applied		59.05
10912	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	B	1/11/2004	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	OTHER COMPREHENSIVE CONSULTATIONS Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has suffered a significant change of visual function requiring comprehensive reassessment: (a) for a patient who is less than 65 years of age within 36 months of an initial consultation to which: (i)this item, or item 10905, 10907, 10910, 10911, 10913, 10914 or 10915 at the same practice applies; or (ii) old item 10900 at the same practice applied; or (b) for a patient who is at least 65 years of age-within 12 months of an initial consultation to which: (i)this item, or item 10905, 10907, 10910, 10911, 10913, 10914 or 10915 at the same practice applies; or (ii) old item 10900 at the same practice applied		59.05
10913	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has new signs or symptoms, unrelated to the earlier course of attention, requiring comprehensive reassessment: (a) for a patient who is less than 65 years of age-within 36 months of an initial consultation to which: (i)this item, or item 10905, 10907, 10910, 10912, 10914 or 10915 at the same practice applies; or (ii) old item 10900 applied; or (b) for a patient who is at least 65 years of age-within 12 months of an initial consultation to which: (i)this item, or item 10905, 10907, 10910, 10911, 10912, 10914 or 10915 at the same practice applies; or (ii) old item 10900 applied		59.05
10914	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has a progressive disorder (excluding presbyopia) requiring comprehensive reassessment: (a) for a patient who is less than 65 years of age-within 36 months of an initial consultation to which: (i)this item, or item 10905, 10907, 10910, 10912, 10913 or 10915 applies; or (ii) old item 10900 applied; or (b) for a patient who is at least 65 years of age-within 12 months of an initial consultation to which: (i)this item, or item 10905, 10907, 10910, 10911, 10912, 10913 or 10915 applies; or (ii) old item 10900 applied		59.05
10915	1/11/2003	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2003	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	Professional attendance of more than 15 minutes duration, being the first in a course of attention involving the examination of the eyes, with the instillation of a mydriatic, of a patient with diabetes mellitus requiring comprehensive reassessment.		59.05
10916	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	B	1/11/2004	1/07/2021	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	BRIEF INITIAL CONSULTATION Professional attendance, being the first in a course of attention, of not more than 15 minutes duration, not being a service associated with a service to which item 10931, 10932, 10933, 10940, 10941, 10942 or 10943 applies		29.6
10918	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	SUBSEQUENT CONSULTATION Professional attendance being the second or subsequent in a course of attention not related to the prescription and fitting of contact lenses, not being a service associated with a service to which item 10940 or 10941 applies		29.6
10921	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	CONTACT LENSES FOR SPECIFIED CLASSES OF PATIENTS - BULK ITEMS FOR ALL SUBSEQUENT CONSULTATIONS All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a)item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for -patients with myopia of 5.0 dioptres or greater (spherical equivalent) in one eye		146.7
10922	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for -patients with manifest hypermyopia of 5.0 dioptres or greater (spherical equivalent) in one eye		146.7
10923	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for -patients with astigmatism of 3.0 dioptres or greater in one eye		146.7

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10924	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	217.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for: -patients with irregular astigmatism in either eye, being a condition the existence of which has been confirmed by keratometric observation, if the maximum visual acuity obtainable with spectacle correction is worse than 0.3 logMAR (6/12) and if that corrected acuity would be improved by an additional 0.1 logMAR by the use of a contact lens	185.05
10925	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for: -patients with anisometropia of 3.0 dioptres or greater (difference between spherical equivalents)	146.7
10926	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for: -patients with corrected visual acuity of 0.7 logMAR (6/18) or worse in both eyes, being patients for whom a contact lens is prescribed as part of a telescopic system	146.7
10927	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	217.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for: -patients for whom a wholly or segmentally opaque contact lens is prescribed for the alleviation of diplopia, distortion or diplopia caused by: i.pathological myopia; or ii.aniridia; or iii.coloboma of the iris; or iv.pupillary malformation or distortion; or v.significant ocular deformity or corneal opacity -whether congenital, traumatic or surgical in origin	185.05
10928	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for: -patients who, because of physical deformity, are unable to wear spectacles	146.7
10929	1/12/1991	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	217.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	All professional attendances after the first, being those attendances regarded as a single service in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which: (a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or (b) old item 10900 applied Payable once in a period of 36 months for: -patients who have a medical or optical condition (other than myopia, hyperopia, astigmatism, anisometropia or a condition to which item 10928, 10927 or 10928 applies) requiring the use of a contact lens for correction, if the condition is specified on the patient's account Note: Benefits may not be claimed under item 10900 where the patient wants the contact lenses for appearance, sporting, work or psychological reasons - see paragraph C6 of explanatory notes to this category.	185.05
10930	1/11/1997	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	172.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	All professional attendances regarded as a single service in a single course of attention involving the prescription and fitting of contact lenses where the patient meets the requirements of an item in the range 10921-10923 and requires a change in contact lens material or basic lens parameters, other than a simple change, because of a structural or functional change in the eye or an allergic response within months of the fitting of a contact lens covered by item 10921 to 10929	146.7
10931	1/11/2005	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2005	1/07/2021	24.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	DOMICILIARY VISITS An optometric service to which an item in Group A10 of this table (other than this item or item 10916, 10932, 10933, 10940 or 10941) applies (the applicable item) if the service is: a)rendered at a place other than consulting rooms, being at: (i) a patient's home; or (ii) residential aged care facility; or (iii) an institution; and b)performed on one patient at a single location on one occasion, and c)either: (i) bulk-billed in respect of the fees for both: -this item; and -the applicable item; or (ii) not bulk-billed in respect of the fees for both: -this item; and -the applicable item	20.6
10932	1/11/2005	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2005	1/07/2021	12.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	An optometric service to which an item in Group A10 of this table (other than this item or item 10916, 10931, 10933, 10940 or 10941) applies (the applicable item) if the service is: a)rendered at a place other than consulting rooms, being at: (i) a patient's home; or (ii) residential aged care facility; or (iii) an institution; and b)performed on two patients at the same location on one occasion, and c)either: (i) bulk-billed in respect of the fees for both: -this item; and -the applicable item; or (ii) not bulk-billed in respect of the fees for both: -this item; and -the applicable item	10.3
10933	1/11/2005	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2005	1/07/2021	7.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	An optometric service to which an item in Group A10 of this table (other than this item or item 10916, 10931, 10932, 10940 or 10941) applies (the applicable item) if the service is: a)rendered at a place other than consulting rooms, being at: (i) a patient's home; or (ii) residential aged care facility; or (iii) an institution; and b)performed on three patients at the same location on one occasion, and c)either: (i) bulk-billed in respect of the fees for both: -this item; and -the applicable item; or (ii) not bulk-billed in respect of the fees for both: -this item; and -the applicable item	6.8
10940	1/11/2003	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	66.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	COMPUTERISED PERIMETRY Full quantitative computerised perimetry (automated absolute static threshold), with bilateral assessment and report, where indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain that: (a) is not a service involving multifocal multi channel objective perimetry; and (b) is performed by an optometrist; not being a service associated with a service to which item 10916, 10918, 10931, 10932 or 10933 applies To a maximum of 2 examinations per patient (including examinations to which item 10941 applies) in any 12 month period.	56.4
10941	1/11/2003	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	40	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	COMPUTERISED PERIMETRY Full quantitative computerised perimetry (automated absolute static threshold) with unilateral assessment and report, where indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain that: (a) is not a service involving multifocal multichannel objective perimetry; and (b) is performed by an optometrist; not being a service associated with a service to which item 10916, 10918 10931, 10932 or 10933 applies To a maximum of 2 examinations per patient (including examinations to which item 10940 applies) in any 12 month period.	34
10942	1/05/2005	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/05/2005	1/07/2021	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	LOW VISION ASSESSMENT Testing of residual vision to provide optimum visual performance for a patient who has best corrected visual acuity of 6/15 or N.12 or worse in the better eye or a horizontal visual field of less than 120 degrees and within 10 degrees above and below the horizontal midline, involving 1 or more of the following: (a) spectacle correction; (b) determination of contrast sensitivity; (c) determination of glare sensitivity; (d) prescription of magnification aids; not being a service associated with a service to which item 10916, 10921, 10922, 10923, 10924, 10925, 10926, 10927, 10928, 10929 or 10930 applies Not payable more than twice per patient in a 12 month period.	29.6
10943	1/11/2005	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2005	1/07/2021	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	CHILDREN'S VISION ASSESSMENT Additional testing to confirm diagnosis of, or establish a treatment regime for, a significant binocular or accommodative dysfunction, in a patient aged 3 to 14 years, including assessment of 1 or more of the following: (a) accommodation; (b) ocular motility; (c) vergences; (d) fusional reserves; (e) cycloplegic refraction; not being a service to which item 10916, 10921, 10922, 10923, 10924, 10925, 10926, 10927, 10928, 10929 or 10930 applies Not to be used for the assessment of learning difficulties or learning disabilities. Not payable more than once per patient in a 12 month period.	29.6
10944	1/09/2015	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/09/2015	1/07/2021	75.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2017	CORNEA, complete removal of embedded foreign body from - not more than once on the same day by the same practitioner (excluding aftercare) The item is not to be billed on the same occasion as MBS items 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915, 10916 or 10918. If the embedded foreign body is not completely removed, this item does not apply but item 10916 may apply.	63.8
10945	1/09/2015	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/09/2015	1/07/2021	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A professional attendance of less than 15 minutes (whether or not continuous) by an attending optometrist that requires the provision of clinical support to a patient who: (a)is participating in a video conferencing consultation with a specialist practising in his or her specialty ofophthalmology; and (b)is not an admitted patient	29.6
10946	1/09/2015	[Table]	1	A10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/01/2021	1/07/2021	69.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A professional attendance of at least 15 minutes (whether or not continuous) by an attending optometrist that requires the provision of clinical support to a patient who: (a)is participating in a video conferencing consultation with a specialist practising in his or her specialty ofophthalmology; and (b)is not an admitted patient 52.1	59.05
90001	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	57.25	57.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	A flag fall service to which item 2710, 2715, 90020, 90025, 90043, 90051, 91287, 91288, 93400, 93401, 93402, 93403, 93421, 93469 or 93470 applies. For the initial attendance at one residential aged care facility on one occasion, applicable to a maximum of one patient attended on.	
90002	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	41.6	41.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	A flag fall service to which item 941, 942, 90002, 90003, 90005, 90006, 90183, 90188, 90202, 90212, 93290, 93292, 93431, 93432, 93433, 93434, 93451, 93473 and 93479 applies. For the initial attendance at one residential aged care facility on one occasion, applicable to a maximum of one patient attended on.	
90005	14/06/2021	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	14/06/2021	1/07/2021	67.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A flag fall service to which item 93624, 93625, 93626, 93627, 93634, 93635, 93636, 93637, 93644, 93645, 93646, 93647, 93653, 93654, 93655, 93656, 93660 or 93661 applies. For the first patient attended during one attendance by a general practitioner or by a medical practitioner (other than a general practitioner) at: a. one residential aged care facility, or at consulting rooms situated within such a complex, on one occasion; orb. one residential disability setting facility, or at consulting rooms situated within such a complex, on one occasion; or c. a person's place of residence (other than a residential aged care facility) on one occasion.	57.25
90020	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	17.9	17.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in a residential aged care facility (other than accommodation in a self-contained unit) by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management—an attendance on one or more patients at one residential aged care facility on one occasion - each patient.	
90035	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance by a general practitioner at a residential aged care facility to residents of the facility (other than a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	

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90043	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance by a general practitioner at a residential aged care facility to residents of the facility (other than a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	
90051	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	111.5	111.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance by a general practitioner at a residential aged care facility to residents of the facility (other than a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation—an attendance on one or more patients at one residential aged care facility on one occasion—each patient	
90092	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/03/2019	8.5	8.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of not more than 5 minutes in duration—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner who is not a general practitioner.	
90093	1/03/2019	[Table]	1	A35	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/03/2019	16	16	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 5 minutes in duration but not more than 25 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner who is not a general practitioner.	
90095	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/03/2019	35.5	35.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 25 minutes in duration but not more than 45 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner who is not a general practitioner.	
90096	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/03/2019	57.5	57.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 45 minutes in duration—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner who is not a general practitioner.	
90183	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	14.3	14.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of not more than 5 minutes in duration—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by medical practitioner in an eligible area.	
90188	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	31.3	31.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 5 minutes in duration but not more than 25 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area.	
90202	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	60.6	60.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 25 minutes in duration but not more than 45 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area.	
90212	1/03/2019	[Table]	1	A35	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2019	1/07/2021	89.2	89.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2019	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 45 minutes in duration—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area.	
90250	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a general practitioner to prepare an eating disorder treatment and management plan, lasting at least 20 minutes but less than 40 minutes.	
90251	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	109.85	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a general practitioner to prepare an eating disorder treatment and management plan, lasting at least 40 minutes	
90252	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	94.75	94.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a general practitioner to prepare an eating disorder treatment and management plan, lasting at least 20 minutes but less than 40 minutes, if the practitioner has successfully completed mental health skills training.	
90253	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	139.55	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a general practitioner to prepare an eating disorder treatment and management plan, lasting at least 40 minutes, if the practitioner has successfully completed mental health skills training.	
90254	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a medical practitioner (other than a general practitioner, specialist or consultant physician) to prepare an eating disorder treatment and management plant, lasting at least 20 minutes but less than 40 minutes.	
90255	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a medical practitioner (other than a general practitioner, specialist or consultant physician) to prepare an eating disorder treatment and management plan, lasting at least 40 minutes.	
90256	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	75.8	75.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a medical practitioner (other than a general practitioner, specialist or consultant physician) to prepare an eating disorder treatment and management plan, lasting at least 20 minutes but less than 40 minutes, if the practitioner has successfully completed mental health skills training.	
90257	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	111.65	111.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a medical practitioner (other than a general practitioner, specialist or consultant physician) to prepare an eating disorder treatment and management plan, lasting at least 40 minutes, if the practitioner has successfully completed mental health skills training.	
90260	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	478.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a consultant physician in the practice of the physician's specialty of psychiatry to prepare an eating disorder treatment and management plan, if: (a) the patient is referred; and (b) the attendance lasts at least 45 minutes	406.35
90261	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	278.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a consultant physician in the practice of the physician's specialty of paediatrics to prepare an eating disorder treatment and management plan, if: (a) the patient is referred; and (b) the attendance lasts at least 45 minutes	236.95
90264	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a general practitioner to review an eating disorder treatment and management plan.	
90265	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance by a medical practitioner (other than a general practitioner, specialist or consultant physician) to review an eating disorder treatment and management plan.	
90266	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	298.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a consultant physician in the practice of the physician's specialty of psychiatry to review an eating disorder treatment and management plan, if: (a) the patient is referred; and (b) the attendance lasts at least 30 minutes	264.05
90267	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a consultant physician in the practice of the physician's specialty of paediatrics to review an eating disorder treatment and management plan, if: (a) the patient is referred; and (b) the attendance lasts at least 20 minutes	118.65
90271	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a general practitioner to provide treatment under an eating disorder treatment and management plan, lasting at least 30 minutes but less than 40 minutes.	
90272	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/11/2019				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at a place other than consulting rooms by a general practitioner to provide treatment under an eating disorder treatment and management plan, lasting at least 30 minutes but less than 40 minutes.	The fee for item 90271, plus $27.00 divided by the number of patients seen, up to a maximum of six 1/07/2021 patients. For seven or more patients - the fee for item 90271 plus $2.10 per patient.
90273	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a general practitioner to provide treatment under an eating disorder treatment and management plan, lasting at least 40 minutes.	
90274	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/11/2019				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at a place other than consulting rooms by a general practitioner to provide treatment under an eating disorder treatment and management plan, lasting at least 40 minutes.	Derived Fee: The fee for item 90273, plus $27.00 divided by the number of patients seen, up to a 1/07/2021 maximum of six patients. For seven or more patients - the fee for item 90273 plus $2.10 per patient.
90275	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a medical practitioner (other than a general practitioner, specialist or consultant physician) to provide treatment under an eating disorder treatment and management plan, lasting at least 30 minutes but less than 40 minutes.	
90276	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/11/2019				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at a place other than consulting rooms by a medical practitioner (other than a general practitioner, specialist or consultant physician) to provide treatment under an eating disorder treatment and management plan, lasting at least 30 minutes but less than 40 minutes.	Derived Fee: The fee for item 90275, plus $21.60 divided by the number of patients seen, up to a 1/07/2021 maximum of six patients. For seven or more patients - the fee for item 90275 plus $1.70 per patient.
90277	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a medical practitioner (other than a general practitioner, specialist or consultant physician) to provide treatment under an eating disorder treatment and management plan, lasting at least 40 minutes.	
90278	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	E	1/11/2019				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at a place other than consulting rooms by a medical practitioner (other than a general practitioner, specialist or consultant physician) to provide treatment under an eating disorder treatment and management plan, lasting at least 40 minutes.	Derived Fee: The fee for item 90277, plus $21.60 divided by the number of patients seen, up to a 1/07/2021 maximum of six patients. For seven or more patients - the fee for item 90277 plus $1.70 per patient.
90279	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Professional attendance at consulting rooms by a general practitioner to provide treatment under an eating disorder treatment and management plan, lasting at least 30 minutes but less than 40 minutes, if the attendance is by video conference .	

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90280	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2021	Professional attendance at consulting rooms by a general practitioner to provide treatment under an eating disorder treatment and management plan, lasting at least 40 minutes, if the attendance is by video conference.	
90281	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2021	Professional attendance at consulting rooms by a medical practitioner (other than a general practitioner, specialist or consultant physician) to provide treatment under an eating disorder treatment and management plan, lasting at least 30 minutes but less than 40 minutes, if the attendance is by video conference.	
90282	1/11/2019	[Table]	1	A36	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/11/2019	1/07/2021	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2021	Professional attendance at consulting rooms by a medical practitioner (other than a general practitioner, specialist or consultant physician) to provide treatment under an eating disorder treatment and management plan, lasting at least 40 minutes, if the attendance is by video conference.	
90300	1/07/2021	[Table]	1	A37	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	895.25		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Professional attendance by a cardiothoracic surgeon in the practice of the surgeon's speciality, if: (a) the service is performed in conjunction with a service (the lead extraction service) to which item 38018 applies; and (b) the surgeon is: (i) providing surgical backup for the provider (who is not a cardiothoracic surgeon) who is performing, the lead extraction service; and (ii) present for the duration of the lead extraction service, other than during the low risk pre and post extraction phases; and (iii) able to immediately scrub in and perform a thoracotomy if major complications occur (iv)	671.45
91283	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	90.8		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a medical practitioner, for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 30 minutes but less than 40 minutes duration	77.2
91285	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	B	17/01/2020				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 30 minutes but less than 40 minutes duration	1/07/2021 The fee for item 91283, plus $25.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 91283 plus $1.95 per patient.
91286	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	129.95		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a medical practitioner, for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 40 minutes duration	110.5
91287	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	B	17/01/2020				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 40 minutes duration	1/07/2021 The fee for item 91286, plus $25.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 91286 plus $1.95 per patient.
91371	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	90.8		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a medical practitioner, for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the attendance is by video conference; and (c) the patient is not an admitted patient; and (d) the service is at least 30 minutes but less than 40 minutes duration	77.2
91372	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	129.95		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a medical practitioner, for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the attendance is by video conference; and (c) the patient is not an admitted patient; and (d) the service is at least 40 minutes duration	110.5
91721	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	113.5		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a general practitioner (not including a specialist or a consultant physician), for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 30 minutes but less than 40 minutes duration	96.5
91723	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	B	17/01/2020				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at a place other than consulting rooms by a general practitioner (not including a specialist or a consultant physician), for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 30 minutes but less than 40 minutes duration	1/07/2021 The fee for item 91721, plus $31.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 91721 plus $2.45 per patient.
91725	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	142.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a general practitioner (not including a specialist or a consultant physician), for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 40 minutes duration	138.1
91727	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	P	B	17/01/2020				[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at a place other than consulting rooms by a general practitioner (not including a specialist or a consultant physician), for providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the service is at least 40 minutes duration	1/07/2021 The fee for item 91725, plus $31.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 91725 plus $2.45 per patient.
91729	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	113.5		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a general practitioner, for the purpose of providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the attendance is by video conference; and (c) the service is at least 30 minutes but less than 40 minutes duration	96.5
91731	17/01/2020	[Table]	1	A39	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	142.45		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Professional attendance at consulting rooms by a general practitioner, for the purpose of providing focussed psychological strategies for mental health services to a patient with mental health issues, if: (a) the patient is affected by bushfire; and (b) the attendance is by video conference; and (c) the services is at least 40 minutes duration	138.1
91790	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	17.9	17.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91792	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/04/2022	11	11	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner of not more than 5 minutes. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91794	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	14.3	14.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner (not including a General Practitioner, Specialist or Consultant Physician), in an eligible area, of not more than 5 minutes. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91800	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a general practitioner lasting less than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91801	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a general practitioner lasting at least 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91802	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	111.5	111.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a general practitioner lasting at least 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91803	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner of more than 5 minutes in duration but not more than 25 minutes if the attendance includes any of the following that are clinically relevant: (a)taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91804	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner of more than 25 minutes in duration but not more than 45 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91805	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	61	61	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner of at least 45 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91806	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	31.3	31.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner (not including a General Practitioner, Specialist or Consultant Physician), in an eligible area, of more than 5 minutes in duration but not more than 25 minutes if the attendance includes any of the following that are clinically relevant: (a)taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91807	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	60.6	60.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner (not including a General Practitioner, Specialist or Consultant Physician), in an eligible area, of more than 25 minutes in duration but not more than 45 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	
91808	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	89.2	89.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner (not including a General Practitioner, Specialist or Consultant Physician), in an eligible area, of at least 45 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).	

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91818	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner, for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 30 minutes, but less than 40 minutes.	
91819	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner, for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 40 minutes.	
91820	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 30 minutes, but less than 40 minutes.	
91821	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 40 minutes.	
91822	13/03/2020	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	90.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance was other than a second or subsequent attendance as part of a single course of treatment.	76.8
91823	13/03/2020	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance is after the first attendance as part of a single course of treatment.	38.6
91824	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	159.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance was other than a second or subsequent attendance as part of a single course of treatment.	135.45
91825	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	79.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance is not a minor attendance after the first as part of a single course of treatment.	67.8
91826	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance is a minor attendance after the first as part of a single course of treatment.	38.6
91827	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	45.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was not more than 15 minutes duration.	38.9
91828	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	91.3		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 15 minutes, but not more than 30 minutes in duration.	77.65
91829	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	140.55		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 30 minutes, but not more than 45 minutes in duration.	119.5
91830	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	194		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 45 minutes, but not more than 75 minutes in duration.	164.9
91831	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	225.1		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 75 minutes in duration.	191.35
91832	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	90.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance was other than a second or subsequent attendance as part of a single course of treatment.	76.8
91833	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance is after the first attendance as part of a single course of treatment.	38.6
91834	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	159.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance was other than a second or subsequent attendance as part of a single course of treatment.	135.45
91835	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	79.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance is not a minor attendance after the first as part of a single course of treatment.	67.8
91836	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration. Where the attendance is a minor attendance after the first as part of a single course of treatment.	38.6
91837	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	45.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was not more than 15 minutes duration; Where the attendance is after the first attendance as part of a single course of treatment	38.9
91838	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	91.3		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner and (b) the attendance was at least 15 minutes, but not more than 30 minutes in duration; Where the attendance is after the first attendance as part of a single course of treatment	77.65
91839	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	140.55		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 30 minutes, but not more than 45 minutes in duration Where the attendance is after the first attendance as part of a single course of treatment	119.5
91840	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	194		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 45 minutes, but not more than 75 minutes in duration.	164.9
91841	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	225.1		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 75 minutes in duration.	191.35
91842	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner, for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 30 minutes, but less than 40 minutes.	
91843	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner, for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 40 minutes.	
91844	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a General Practitioner, Specialist or Consultant Physician), for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 30 minutes, but less than 40 minutes.	
91845	13/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a General Practitioner, Specialist or Consultant Physician), for the purpose of providing focused psychological strategies for assessed mental disorders if: (a) the practitioner is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service; and (b) the service lasts at least 40 minutes.	
91846	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	90.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	76.8
91847	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is after the first attendance as part of a single course of treatment	38.6
91848	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	90.35		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	76.8
91849	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is after the first attendance as part of a single course of treatment	38.6
91890	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	17.9	17.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Phone attendance by a general practitioner lasting less than 6 minutes for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management	

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91891	1/07/2021	ITable	1	A40	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	39.1	39.1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/07/2021	Phone attendance by a general practitioner lasting at least 6 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care
91892	1/07/2021	ITable	1	A40	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	11	11	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting less than 6 minutes for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management
91893	1/07/2021	ITable	1	A40	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	21	21	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 6 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care
91894	1/01/2022	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.75	75.75	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2022	Phone attendance by a general practitioner lasting at least 20 minutes, if: (a) the attendance is performed from a practice location in Modified Monash areas 6 or 7; and (b) the attendance includes any of the following that are clinically relevant: (i) taking a detailed patient history; (ii) arranging any necessary investigation; (iii) implementing a management plan; (iv) providing appropriate preventative health care
91895	1/01/2022	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	60.6	60.6	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2022	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), of more than 25 minutes in duration but not more than 45 minutes, if: (a) the attendance is performed from a practice location in Modified Monash areas 6 or 7; and (b) the attendance includes any of the following that are clinically relevant: (i) taking a detailed patient history; (ii) arranging any necessary investigation; (iii) implementing a management plan; (iv) providing appropriate preventative health care
92004	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	220.85	220.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a general practitioner for a health assessment of a patient - this item or items 93470 or 93479 not more than once in a 9 month period. NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92011	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	176.7	176.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for a health assessment - this item or items 93470 or 93479 not more than once in a 9 month period. NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92024	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	150.1	150.1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a general practitioner, for preparation of a GP management plan for a patient (other than a service associated with a service to which any of Items735 to 758, Items 92074 to 92078 or items 92030 to 92034 apply) NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for thedefinition of 'patient's usual medical practitioner' as some exemptions do apply).
92025	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	118.95	118.95	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a general practitioner, to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of Items735 to 758, Items 92074 to 92078 or items 92030 to 92034apply) NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for thedefinition of 'patient's usual medical practitioner' as some exemptions do apply).
92026	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	73.25	73.25	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth contribution by a general practitioner, to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of Items735 to 758, Items 92074 to 92078 or items 92030 to 92034apply) NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for thedefinition of 'patient's usual medical practitioner' as some exemptions do apply).
92027	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	73.25	73.25	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth contribution by a general practitioner, to: (a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or (b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider (other than a service associated with a service to which items735 to 758, items 92074 to 92078 or items 92030 to 92034apply) NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for thedefinition of 'patient's usual medical practitioner' as some exemptions do apply).
92028	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.95	74.95	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a general practitioner to review or coordinate a review of: (a) a GP management plan prepared by a general practitioner (or an associated general practitioner) to which Item721 of the general medical services table, or item 228or item 92024 or 92068 applies; or (b) team care arrangements which have been coordinated by the general practitioner (or an associated general practitioner) to which Item723 of the general medical services table, orItem 230or item 92055 or 92069 or items applies NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92055	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	120.1	120.1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for preparation of a GP management plan for a patient (other than a service associated with a service to which any of Items735 to 758 of the general medical services table, or Items 92074 to 92078 or items 92030 to 92034or items 235 to 240 in the Health Insurance (Section 3C General Medical Services – Other Medical Practitioner) Determination 2018 apply) NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92056	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	95.15	95.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of Items735 to 758 of the general medical services table, or Items 92074 to 92078 or Items 92030 to 92034, or items 235 to 240 in the Health Insurance (Section 3C General Medical Services – Other Medical Practitioner) Determination 2018 apply) NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92057	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	58.6	58.6	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician), to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of Items735 to 758 of the general medical services table, or Items 92074 to 92078 or Items 92030 to 92034or Items 235 to 240 in the Health Insurance (Section 3C General Medical Services – Other Medical Practitioner) Determination 2018 apply) NOTE: It is a legislative requirement that this service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92058	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	58.6	58.6	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician), to: (a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or (b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider (other than a service associated with a service to which Items735 to 758 of the general medical services table, or Items 92074 to 92078 or Items 92030 to 92034or Items 235 to 240 in the Health Insurance (Section 3C General Medical Services – Other Medical Practitioner) Determination 2018 apply). NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92059	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.95	59.95	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician)to review or coordinate a review of: (a) a GP management plan prepared by a medical practitioner (or an associated medical practitioner) to which Item 229, 721 or Item 229 or item 92024, 92055, 92068 or 92069 applies; or (b) team care arrangements which have been coordinated by the medical practitioner (or an associated medical practitioner) to which Item230, 723, 92025, 92056, 92069 or 92100 applies. NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note AN.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92112	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance, by a general practitioner who has not undertaken mental health skills training (and not including a specialist or consultant physician), of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92113	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	109.85	109.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance, by a general practitioner who has not undertaken mental health skills training (and not including a specialist or consultant physician), of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92114	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance by a general practitionerto review a GP mental health treatment plan which the general practitioner, or an associated general practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan.
92115	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance by a general practitioner in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation.
92116	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	94.75	94.75	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance, by a general practitioner who has undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92117	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	139.55	139.55	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance, by a general practitioner who has undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92118	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), who has not undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92119	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), who has not undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92120	30/03/2020	ITable	1	A40	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), to review a GP mental health treatment plan which he or she, or an associated medical practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan.

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92121	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation.
92122	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.8	75.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner, (not including a general practitioner, specialist or consultant physician)who has undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92123	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	111.65	111.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner, (not including a general practitioner, specialist or consultant physician)who has undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient.
92126	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner to review a GP mental health treatment plan which the general practitioner, or an associated general practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan.
92127	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation.
92132	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), to review a GP mental health treatment plan which he or she, or an associated medical practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan.
92133	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician),in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation.
92136	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	79.7	79.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Telehealth attendance of at least 20 minutes in duration by a general practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who: (a) is currently pregnant; or (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or item 4001 of the general medical services table, or item 792 of the Other Medical Practitioner Determination, or item B1000, B1005 or B1010 of the Allied Health Determination, or item 92137, 92138, 92139, 93026 or 93029 applies in relation to that pregnancy
92137	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	63.75	63.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Telehealth attendance of at least 20 minutes in duration by a medical practitioner (not including a general practitioner, specialist or consultant physician), who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who: (a) is currently pregnant; or (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or item 4001 of the general medical services table, or item 792 of the Other Medical Practitioner Determination, or item B1000, B1005 or B1010 of the Allied Health Determination, or item 92136, 92137, 92139, 93026 or 93029 applies in relation to that pregnancy
92138	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	79.7	79.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Phone attendance of at least 20 minutes in duration by a general practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who: (a) is currently pregnant; or (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or item 4001 of the general medical services table, or item 792 of the Other Medical Practitioner Determination, or item B1000, B1005 or B1010 of the Allied Health Determination, or item 92136, 92137, 92139, 93026 or 93029 applies in relation to that pregnancy
92139	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	63.75	63.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Phone attendance of at least 20 minutes in duration by a medical practitioner (not including a general practitioner, specialist or consultant physician), who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who: (a)is currently pregnant; or (b)has been pregnant in the 12 months preceding the provision of the first service to which this item or item 4001 of the general medical services table, or item 792 of the Other Medical Practitioner Determination, or item B1000, B1005 or B1010 of the Allied Health Determination or item 92136, 92137, 92138, 93026 or 93029 applies in relation to that pregnancy
92140	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics, following referral of the patient to the consultant by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient aged under 13 years with autism or another pervasive developmental disorder, if the consultant paediatrician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; (c) provides a copy of the treatment and management plan to the referring practitioner and one or more allied health providers, if appropriate, for the treatment of the patient. 236.95
92141	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of at least 45 minutes in duration by a specialist or consultant physician following referral of the patient to the specialist or consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with an eligible disability if the specialist or consultant physician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; (c) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient (other than attendance on a patient for whom payment has previously been made under this item or item137, 139 or 289) 236.95
92142	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	139.45	139.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance of at least 45 minutes in duration by a general practitioner for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with an eligible disability if the general practitioner does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; (c) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient NOTE: It is a legislative requirement thatthis service must be performed by the patient's usual medical practitioner (please see Note A6.1.1 for the definition of 'patient's usual medical practitioner' as some exemptions do apply).
92143	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics, following referral of the patient to the consultant by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient aged under 13 years with autism or another pervasive developmental disorder, if the consultant paediatrician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; (c) provides a copy of the treatment and management plan to: (i) the referring practitioner; and (ii) one or more allied health providers, if appropriate, for the treatment of the patient. 236.95
92144	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of at least 45 minutes in duration by a specialist or consultant physician following referral of the patient to the specialist or consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with an eligible disability if the specialist or consultant physician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan, which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; (c) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient. 236.95
92146	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner who has not undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a)the plan includes an opinion on diagnosis of the patient's eating disorder; and (b)the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c)the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d)the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92147	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	109.85	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner who has not undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a)the plan includes an opinion on diagnosis of the patient's eating disorder; and (b) the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d)the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92148	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	94.75	94.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner who has undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a)the plan includes an opinion on diagnosis of the patient's eating disorder; and (b) the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d)the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.

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92149	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	139.55	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner who has undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a) the plan includes an opinion on diagnosis of the patient's eating disorder; and (b)the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d) the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92150	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has not undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a) the plan includes an opinion on diagnosis of the patient's eating disorder; and (b) the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d) the medical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92151	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has not undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a) the plan includes an opinion on diagnosis of the patient's eating disorder; and (b) the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d)the medical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92152	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.8	75.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a)the plan includes an opinion on diagnosis of the patient's eating disorder; and (b) the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d) the medical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92153	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	111.65	111.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has undertaken mental health skills training, of at least 40 minutes in duration for the preparation of a written eating disorder treatment and management plan for an eligible patient, if: (a)the plan includes an opinion on diagnosis of the patient's eating disorder; and (b)the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and (c) the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and (d) the medical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92162	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	478.05		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for the preparation of an eating disorder treatment and management plan for an eligible patient, if: (a) the patient has been referred by a referring practitioner; and (b) during the attendance, the consultant psychiatrist: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (c) within 2 weeks after the attendance, the consultant psychiatrist: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that: (A) covers the next 12 months; and (B) is appropriate to the patient's diagnosis; and (C) comprehensively evaluates the patient's biological, psychological and social issues; and (D) addresses the patient's diagnostic psychiatric issues; and (E) makes management recommendations addressing the patient's biological, psychological and social issues; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan; and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees. 406.35
92163	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for the preparation of an eating disorder treatment and management plan for an eligible patient, if: (a) the patient has been referred by a referring practitioner; and (b) during the attendance, the consultant paediatrician undertakes an assessment that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) comprehensive multi or detailed single organ system assessment; and (iii) the formulation of diagnoses; and (c) within 2 weeks after the attendance, the consultant paediatrician: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that involves: (A) an opinion on diagnosis and risk assessment; and (B) treatment options and decisions; and (C) medication recommendations; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees. 236.95
92166	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	478.05		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for the preparation of an eating disorder treatment and management plan for an eligible patient, if: (a) the patient has been referred by a referring practitioner; and (b) during the attendance, the consultant psychiatrist: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (c) within 2 weeks after the attendance, the consultant psychiatrist: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that: (A) covers the next 12 months; and (B) is appropriate to the patient's diagnosis; and (C) comprehensively evaluates the patient's biological, psychological and social issues; and (D) addresses the patient's diagnostic psychiatric issues; and (E) makes management recommendations addressing the patient's biological, psychological and social issues; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees. 406.35
92167	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	278.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for the preparation of an eating disorder treatment and management plan for an eligible patient, if: (a) the patient has been referred by a referring practitioner; and (b) during the attendance, the consultant paediatrician undertakes an assessment that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) comprehensive multi or detailed single organ system assessment; and (iii) the formulation of diagnoses; and (c) within 2 weeks after the attendance, the consultant paediatrician: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that involves: (A) an opinion on diagnosis and risk assessment; and (B) treatment options and decisions; and (C) medication recommendations; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees. 236.95
92170	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner to review an eligible patient's eating disorder treatment and management plan prepared by the general practitioner, an associated medical practitioner working in general practice, or a consultant physician practising in the specialty of psychiatry or paediatrics, if: (a) the general practitioner reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) modifications are made to the eating disorder treatment and management plan, recorded in writing, including: (i) recommendations to continue with treatment options detailed in the plan; or (ii) recommendations to alter the treatment options detailed in the plan, with the new arrangements documented in the plan; and (c) initiates referrals for a review by a consultant physician practising in the specialty of psychiatry or paediatrics, where appropriate; and (d) the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92171	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by amedical practitioner (not including a general practitioner, specialist or consultant physician)to review an eligible patient's eating disorder treatment and management plan prepared by the medical practitioner, an associated medical practitioner working in general practice, or a consultant physician practising in the specialty of psychiatry or paediatrics, if: (a) themedical practitioner reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) modifications are made to the eating disorder treatment and management plan, recorded in writing, including: (i) recommendations to continue with treatment options detailed in the plan; or (ii) recommendations to alter the treatment options detailed in the plan, with the new arrangements documented in the plan; and (c) initiates referrals for a review by a consultant physician practising in the specialty of psychiatry or paediatrics, where appropriate; and (d) themedical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.
92172	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	298.85		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance of at least 30 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for an eligible patient, if: (a) the consultant psychiatrist reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) the patient has been referred by a referring practitioner; and (c) during the attendance, the consultant psychiatrist: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the eating disorder treatment and management plan; and (d) within 2 weeks after the attendance, the consultant psychiatrist: (i) prepares a written diagnosis of the patient; and (ii) revises the eating disorder treatment and management; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees. 254.05

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92173	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance of at least 30 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for an eligible patient, if: (a) the consultant paediatrician reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) the patient has been referred by a referring practitioner; and (c) during the attendance, the consultant paediatrician: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the eating disorder treatment and management plan; and (d) within 2 weeks after the attendance, the consultant psychiatrist: (i) prepares a written diagnosis of the patient; and (ii) revises the eating disorder treatment and management; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees.	118.65
92176	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner to review an eligible patient's eating disorder treatment and management plan prepared by the general practitioner, an associated medical practitioner working in general practice, or a consultant physician practising in the specialty of psychiatry or paediatrics, if: (a) the general practitioner reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) modifications are made to the eating disorder treatment and management plan, recorded in writing, including: (i) recommendations to continue with treatment options detailed in the plan; or (ii) recommendations to alter the treatment options detailed in the plan, with the new arrangements documented in the plan; and (c) initiates referrals for a review by a consultant physician practising in the specialty of psychiatry or paediatrics, where appropriate; and (d) the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.	
92177	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) to review an eligible patient's eating disorder treatment and management plan prepared by the medical practitioner, an associated medical practitioner working in general practice, or a consultant physician practising in the specialty of psychiatry or paediatrics, if: (a) the medical practitioner reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) modifications are made to the eating disorder treatment and management plan, recorded in writing, including: (i) recommendations to continue with treatment options detailed in the plan; or (ii) recommendations to alter the treatment options detailed in the plan, with the new arrangements documented in the plan; and (c) initiates referrals for a review by a consultant physician practising in the specialty of psychiatry or paediatrics, where appropriate; and (d) the medical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees): (i) a copy of the plan; and (ii) suitable education about the eating disorder.	
92178	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	298.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of at least 30 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for an eligible patient, if: (a) the consultant psychiatrist reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) the patient has been referred by a referring practitioner; and (c) during the attendance, the consultant psychiatrist: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the eating disorder treatment and management plan; and (d) within 2 weeks after the attendance, the consultant psychiatrist: (i) prepares a written diagnosis of the patient; and (ii) revises the eating disorder treatment and management; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees.	254.05
92179	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of at least 20 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for an eligible patient, if: (a) the consultant paediatrician reviews the treatment efficacyof services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) the patient has been referred by a referring practitioner; and (c) during the attendance, the consultant paediatrician reviews the eating disorder treatment and management plan, including a: (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (d) within 2 weeks after the attendance, the consultant paediatrician: (i) prepares a written diagnosis of the patient; and (ii) revises the eating disorder treatment and management; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees.	118.65
92182	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92184	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92186	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92188	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92194	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92196	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92198	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92200	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.	
92210	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	159.2	159.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a general practitioner on not more than one patient on one occasion—each attendance in unsociable hours if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment.	
92211	30/03/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	127.25	127.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2020	Telehealth attendance by a medical practitioner (other than a general practitioner) on not more than one patient on one occasion—each attendance in unsociable hours if: (a) the attendance is requested by the patient or a responsible person in the same unbroken after-hours period; and (b) the patient's medical condition requires urgent assessment.	
92422	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 45 minutes in duration for an initial assessment of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) following referral of the patient to the consultant physician by a referring practitioner, if: (a) an assessment is undertaken that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) comprehensive multi or detailed single organ system assessment; and (iii) the formulation of differential diagnoses; and (b) a consultant physician treatment and management plan of significant complexity is prepared and provided to the referring practitioner, which involves: (i) an opinion on diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) medication recommendations; and (c) an attendance on the patient to which item 110, 116, 119 of the general medical services table or item 91824, 91825, 91826 or 91836 applies did not take place on the same day by the same consultant physician; and (d) this item, or item 132 of the general medical services table, has not applied to an attendance on the patient in the preceding 12 months by the same consultant physician	236.95

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92423	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 20 minutes in duration after the first attendance in a single course of treatment for: a review of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders)| if: (a) a review is undertaken that covers: (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (b) the modified consultant physician treatment and management plan is provided to the referring practitioner, which involves, if appropriate: (i) a revised opinion on the diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) revised medication recommendations; and (c) an attendance on the patient to which item 110, 116, 119 of the general medical services table or 91824, 91826, 91836 or 91836 applies did not take place on the same day by the same consultant physician; and (d) item 132 of the general medical services table or item 92422 applied to an attendance claimed in the preceding 12 months; and (e) the attendance under this item is claimed by the same consultant physician who claimed item 132 of the general medical services table or 92422; and (f) this item, or item 133 of the general medical services table has not applied more than twice in any 12 month period	118.65
92425	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration;and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment
92426	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	79.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a)the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is not a minor attendance after the first as part of a single course of treatment
92427	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is a minor attendance after the first as part of a single course of treatment
92431	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 45 minutes in duration for an initial assessment of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) following referral of the patient to the consultant physician by a referring practitioner, if: (a) an assessment is undertaken that covers: (i) a comprehensive history, including psychosocial history and medication review; and (ii) comprehensive multi or detailed single organ system assessment; and (iii) the formulation of differential diagnoses; and (b) a consultant physician treatment and management plan of significant complexity is prepared and provided to the referring practitioner, which involves: (i) an opinion on diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) medication recommendations
92432	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 20 minutes in duration after the first attendance in a single course of treatment for: a review of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders)	if: (a) a review is undertaken that covers: (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (b) the modified consultant physician treatment and management plan is provided to the referring practitioner, which involves, if appropriate: (i) a revised opinion on the diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) revised medication recommendations
92434	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of at least 45 minutes in duration, by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with autism or another pervasive developmental disorder, if the consultant physician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; (c) provides a copy of the treatment and management plan to the referring practitioner; (d) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient; (other than attendance on a patient for whom payment has previously been made under this item, or item 135, 137, 139, 289 of the general medical services table, or item 92140, 92141, 92142 or 92145)
92435	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	478.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of more than 45 minutes in by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if: (a) the attendance follows referral of the patient to the consultant for an assessment or management by a medical practitioner in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and (b) during the attendance, the consultant: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (c) the consultant decides that it is clinically appropriate for the patient to be managed by the referring practitioner without ongoing treatment by the consultant; and (d) within 2 weeks after the attendance, the consultant: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that: (A) covers the next 12 months; and (B) is appropriate to the patient's diagnosis; and (C) comprehensively evaluates the patient's biological, psychological and social issues; and (D) addresses the patient's diagnostic psychiatric issues; and (E) makes management recommendations addressing the patient's biological, psychological and social issues; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan; and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees; and (e) in the preceding 12 months, a service to which this item or item 291 of the general medical services table applies has not been provided
92436	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	328.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of more than 30 minutes but not more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if: (a) the patient is being managed by a medical practitioner or a participating nurse practitioner in accordance with a management plan prepared by the consultant in accordance with item 291 or 92435; and (b) the attendance follows referral of the patient to the consultant for review of the management plan by the medical practitioner or a participating nurse practitioner managing the patient; and (c) during the attendance, the consultant: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the management plan; and (d) within 2 weeks after the attendance, the consultant: (i) prepares a written diagnosis of the patient; and (ii) revises the management plan; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (v) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees; and (e) in the preceding 12 months, a service to which item 291 of the general medical services table or92435 applies has been provided; and (f) in the preceding 12 months, a service to which this item, or item 293 of the general medical services table applies has not been provided
92437	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	274.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner: (a) if the patient: (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months; and (b) the patient has not received an attendance under this item, or item 91827 to 91831, 91837 to 91839, 92455 to 92457, or item 296, 297, 299 or300 to 346 of the general medical services table, in the preceding 24 months
92455	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	52.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	1/01/2022	Telehealth attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a group of 2 to 6 unrelated patients or a family group of more than 3 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient
92456	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	69.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	1/01/2022	Telehealth attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient
92457	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	102.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	1/01/2022	Telehealth attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a family group of 2 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient
92458	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	133.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	1/01/2022	Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes, but less than 45 minutes, in duration, in the course of initial diagnostic evaluation of a patient. .
92459	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	184.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	1/01/2022	Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 45 minutes in duration, in the course of initial diagnostic evaluation of a patient.
92460	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	133.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes in duration, in the course of continuing management of a patient—if that attendance and another attendance to which this item or item 352 of the general medical services table applies have not exceeded 4 in a calendar year for the patient
92461	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance for a person by a consultant psychiatrist, if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was not more than 15 minutes duration; and (c) the patient to whom the service is provided is admitted to hospital
92462	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	91.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance for a person by a consultant psychiatrist, if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 15 minutes, but not more than 20 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital

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92463	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	140.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 30 minutes, but not more than 45 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	119.5
92464	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	194	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 45 minutes, but not more than 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	164.9
92465	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	225.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	191.35
92466	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	274.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner, if the patient to whom the service is provided: (a) either: (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months; and (b) is admitted to hospital	233.75
92471	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	159.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	135.45
92472	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	79.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is not a minor attendance after the first as part of a single course of treatment	67.8
92473	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	45.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a)the attendance follows referral of the patient to the specialist; and (b)the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is a minor attendance after the first as part of a single course of treatment	38.6
92474	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	278.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance of at least 45 minutes in duration , by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with autism or another pervasive developmental disorder, if the consultant physician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider); (b) develops a treatment and management plan which must include the following: (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication management recommendations; (c) provides a copy of the treatment and management plan to the referring practitioner; (d) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient;(other than attendance by a patient for whom payment has previously been made under this item or Item135, 137,139,140,92140, 92141, 92144, 92142, 92145 or 92434).	236.95
92475	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	478.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if: (a) the attendance follows referral of the patient to the consultant for an assessment or management by a medical practitioner in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and (b) during the attendance, the consultant: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (c) the consultant decides that it is clinically appropriate for the patient to be managed by the referring practitioner without ongoing treatment by the consultant; and (d) within 2 weeks after the attendance, the consultant: (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that: (A) covers the next 12 months; and (B) is appropriate to the patient's diagnosis; and (C) comprehensively evaluates the patient's biological, psychological and social issues; and (D) addresses the patient's diagnostic psychiatric issues; and (E) makes management recommendations addressing the patient's biological, psychological and social issues; and (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and (iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees	406.95
92476	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	298.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance of more than 30 minutes but not more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if: (a) the patient is being managed by a medical practitioner or a participating nurse practitioner in accordance with a management plan prepared by the consultant in accordance with Item291, 92435, 92475; and (b) the attendance follows referral of the patient to the consultant for review of the management plan by the medical practitioner or a participating nurse practitioner managing the patient; and (c) during the attendance, the consultant: (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the management plan; and (d) within 2 weeks after the attendance, the consultant: (i) prepares a written diagnosis of the patient; and (ii) revises the management plan; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: (A) the patient; and (B) the patient's carer (if any), if the patient agrees	254.05
92477	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	274.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner: (a) if the patient: (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months; and (b) the patient has not received an attendance under this item, Item286, 287, 299 or 92437, or any of Items300 to 346, 353 to 358, 361 to 370, 91827 to 91831 or 91837 to 91841, in the preceding 24 months.	233.75
92495	20/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	52.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a group of 2 to 9 unrelated patients or a family group of more than 3 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient	44.25
92496	20/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	69.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient	58.75
92497	20/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	102.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a family group of 2 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient	86.9
92498	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	133.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes, but less than 45 minutes, in duration, in the course of initial diagnostic evaluation of a patient.	113.8
92499	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	184.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Phone attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 45 minutes in duration, in the course of initial diagnostic evaluation of a patient.	157.1
92500	6/04/2020	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	133.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes in duration, in the course of continuing management of a patient	113.8
92501	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	45.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was not more than 15 minutes duration; and (c) the patient to whom the service is provided is admitted to hospital	38.9
92502	15/09/2021	ITable]	1	A4D	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	91.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner and (b) the attendance was at least 15 minutes, but not more than 30 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	77.65
92503	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	140.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 30 minutes, but not more than 45 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	119.5
92504	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	194	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 45 minutes, but not more than 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	164.9
92505	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	225.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance for a person by a consultant psychiatrist; if: (a)the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b)the attendance was at least 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	191.35
92506	15/09/2021	ITable]	1	A4D	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	274.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Phone attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry following referral of the patient to the consultant physician by a referring practitioner if the patient to whom the service is provided: (a) either: (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months; and (b) is admitted to hospital	233.75
92513	20/04/2020	[Table]	1	A4D	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	20.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management.	17.6

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92514	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	45.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation	38.4
92515	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	87.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation.	74.25
92516	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	128.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation.	109.35
92517	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	20.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management: (a) if the patient to whom the service is provided is admitted to hospital	17.6
92518	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a public health physician in the practice ofthe public health physician'specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	38.4
92519	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	87.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a public health physician in the practice ofthe public health physician'specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	74.25
92520	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	128.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a public health physician in the practice ofthe public health physician'specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	109.35
92521	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	20.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management; Where the attendance is not the first attendance for that particular clinical indication	17.6
92522	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	45.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, where the attendance is not the first attendance for those particular health-related issues, with appropriate documentation	38.4
92523	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	87.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation.	74.25
92524	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	128.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation.	109.35
92525	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	20.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management: (a) if the patient to whom the service is provided is admitted to hospital	17.6
92526	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a public health physician in the practice ofthe public health physician'specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	38.4
92527	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	87.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a public health physician in the practice ofthe public health physician'specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	74.25
92528	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	128.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a public health physician in the practice ofthe public health physician'specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	109.35
92610	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	136.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment).	116.35
92611	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment.	38.6
92612	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 15 minutes in duration but not more than 30 minutes in duration.	76.8
92613	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	125.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 30 minutes in duration but not more than 45 minutes in duration.	106.4
92614	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 45 minutes in duration.	135.45
92615	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	136.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment): (a) if the patient to whom the service is provided is admitted to hospital	116.35
92616	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment: (a) if the patient to whom the service is provided is admitted to hospital	38.6
92617	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	136.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment).	116.35
92618	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment.	38.6
92619	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 15 minutes in duration but not more than 30 minutes in duration.	76.8
92620	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	125.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 30 minutes in duration but not more than 45 minutes in duration.	106.4
92621	20/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 45 minutes in duration.	135.45

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92623	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	478.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of more than 60 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine, if: (a) the patient is at least 65 years old and referred by a medical practitioner practising in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and (b) the attendance is initiated by the referring practitioner for the provision of a comprehensive assessment and management plan; and (c) during the attendance: (i) all relevant aspects of the patient's health are evaluated in detail using appropriately validated assessment tools if indicated (the assessment); and (ii) the patient's various health problems and care needs are identified and prioritised (the formulation); and (iii) a detailed management plan is prepared (the management plan) setting out: (A) the prioritised list of health problems and care needs; and (B) short and longer term management goals; and (C) recommended actions or intervention strategies to be undertaken by the patient's general practitioner or another relevant health care provider that are likely to improve or maintain health status and are readily available and acceptable to the patient and the patient's family and carers; and (iv) the management plan is explained and discussed with the patient and, if appropriate, the patient's family and any carers; and (v) the management plan is communicated in writing to the referring practitioner; and (d) an attendance to which item 104, 105, 107, 108, 110, 116, 119 of the general medical services table or item, 91822, 91823, 91824, 91825, 91826 or 91836 applies has not been provided to the patient on the same day by the same practitioner; and (e) an attendance to which this item or item 145 of the general medical services table applies has not been provided to the patient by the same practitioner in the preceding 12 months	406.35
92624	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	298.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance of more than 30 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine to review a management plan previously prepared by that consultant physician or specialist under item 141, 92623 or 145, if: (a) the review is initiated by the referring medical practitioner practising in general practice or a participating nurse practitioner; and (b) during the attendance: (i) the patient's health status is reassessed; and (ii) a management plan prepared under item 141, 92623 or 145 is reviewed and revised; and (iii) the revised management plan is explained to the patient and (if appropriate) the patient's family and any carers and communicated in writing to the referring practitioner; and (c) an attendance to which item 104, 105, 107, 108, 110, 116, 119 of the general medical services table or item 91822, 91823, 91824, 91825, 91826 or 91836 applies was not provided to the patient on the same day by the same practitioner; and (d) an attendance to which item 141 or 145 of the general medical services table ontem 92623 applies has been provided to the patient by the same practitioner in the preceding 12 months; and (e) an attendance to which this item, or item 147 of the general medical services table applies has not been provided to the patient in the preceding 12 months, unless there has been a significant change in the patient's clinical condition or care circumstances that requires a further review	254.05
92625	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	136.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment): (a) if the patient to whom the service is provided is admitted to hospital	116.35
92626	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the fifth in a single course of treatment: (a) if the patient to whom the service is provided is admitted to hospital	38.6
92628	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	478.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance of more than 60 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine, if: (a) the patient is at least 65 years old and referred by a medical practitioner practising in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and (b) the attendance is initiated by the referring practitioner for the provision of a comprehensive assessment and management plan; and (c) during the attendance: (i) all relevant aspects of the patient's health are evaluated in detail using appropriately validated assessment tools if indicated (the assessment); and (ii) the patient's various health problems and care needs are identified and prioritised (the formulation); and (iii) a detailed management plan is prepared (the management plan) setting out: (A) the prioritised list of health problems and care needs; and (B) short and longer term management goals; and (C) recommended actions or intervention strategies to be undertaken by the patient's general practitioner or another relevant health care provider that are likely to improve or maintain health status and are readily available and acceptable to the patient and the patient's family and carers; and (iv) the management plan is explained and discussed with the patient and, if appropriate, the patient's family and any carers; and (v) the management plan is communicated in writing to the referring practitioner	406.35
92629	6/04/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	6/04/2020	1/07/2021	298.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance of more than 30 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine to review a management plan previously prepared by that consultant physician or specialist under item 141, 92623, 92628 or 145, if: (a) the review is initiated by the referring medical practitioner practising in general practice or a participating nurse practitioner; and (b) during the attendance: (i) the patient's health status is reassessed; and (ii) a management plan prepared under item 141, 92623, 92628 or 145 is reviewed and revised; and (iii) the revised management plan is explained to the patient and (if appropriate) the patient's family and any carers and communicated in writing to the referring practitioner; and (c) an attendance to which item104, 105, 107, 108, 110, 116, 119, 91822, 91823, 91824, 91825, 91826 or 91836 applies was not provided to the patient on the same day by the same practitioner; and (d) an attendance to which item 141, 92623, 92628 or 145 applies has been provided to the patient by the same practitioner in the preceding 12 months; and (e) an attendance to which this item or item 92624 or147 applies has not been provided to the patient in the preceding 12 months, unless there has been a significant change in the patient's clinical condition or care circumstances that requires a further review.	254.05
92701	22/05/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/05/2020	Telehealth attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply)	76.8
92702	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply): (a) if the patient to whom the service is provided is admitted to hospital	76.8
92712	22/05/2020	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes	76.8
92713	15/09/2021	[Table]	1	A40	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/08/2021	15/09/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply): (a) if the patient to whom the service is provided is admitted to hospital	76.8
92715	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	17.9	17.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of not more than 5 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note: Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92716	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	11	11	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) of not more than 5 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note: Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92717	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	14.3	14.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of not more than 5 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92718	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of more than 5 minutes in duration but not more than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note: Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92719	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) of more than 5 minutes in duration but not more than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92720	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	31.3	31.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of more than 5 minutes in duration but not more than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note: Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92721	1/07/2021	[Table]	1	A40	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of more than 20 minutes in duration but not more than 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note: Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.

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92722	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	38	38	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) of more than 20 minutes in duration but not more than 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92723	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	60.6	60.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of more than 20 minutes in duration but not more than 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92724	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	111.5	111.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner lasting at least 40 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92725	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	61	61	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 40 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92726	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	89.2	89.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Telehealth attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, lasting at least 40 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92731	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	17.9	17.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of not more than 5 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92732	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	11	11	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) of not more than 5 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92733	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	14.2	14.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of not more than 5 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92734	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	39.1	39.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of more than 5 minutes in duration but not more than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92735	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	21	21	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) of more than 5 minutes in duration but not more than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92736	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	31	31	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of more than 5 minutes in duration but not more than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92737	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.75	75.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of more than 20 minutes in duration but not more than 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92738	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	38	38	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) of more than 20 minutes in duration but not more than 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92739	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	60.05	60.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of more than 20 minutes in duration but not more than 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92740	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	111.5	111.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner lasting at least 40 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92741	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	61	61	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 40 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92742	1/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	89.2	89.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	8/10/2021	Phone attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, lasting at least 40 minutes in duration if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care Note:Consultations related to assisted reproductive technology and antenatal care are outside the scope of these items and cannot be rendered under these items.
92746	16/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	75.75	75.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Phone attendance by a general practitioner lasting at least 20 minutes in duration, if: (a)the attendance includes any of the following that are clinically relevant: (i) taking a detailed patient history; (ii) arranging any necessary investigation; (iii) implementing a management plan; (iv) providing appropriate preventative health care
92747	16/07/2021	ITable	1	A40	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	38	38	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 20 minutes in duration, if: (a)the attendance includes any of the following that are clinically relevant: (i) taking a detailed patient history; (ii) arranging any necessary investigation; (iii) implementing a management plan; (iv) providing appropriate preventative health care
92287	10/12/2020	ITable	1	A41	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Professional attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c)the service lasts at least 30 minutes, but less than 40 minutes
92288	10/12/2020	ITable	1	A41	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Professional attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 40 minutes

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93291	10/12/2020	[Table]	1	A41	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93292	10/12/2020	[Table]	1	A41	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b)the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 40 minutes
93300	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Professional attendance at consulting rooms by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93301	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Telehealth attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93302	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	96.5	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Phone attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93303	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Professional attendance at consulting rooms by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 40 minutes
93304	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Telehealth attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 40 minutes
93305	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	138.1	138.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Phone attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 40 minutes
93306	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93307	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93308	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	77.2	77.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Phone attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 30 minutes, but less than 40 minutes
93309	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if:(b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 40 minutes
93310	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 40 minutes
93311	7/08/2020	[Table]	1	A41	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	E	1/03/2022	1/03/2022	110.5	110.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Phone attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service lasts at least 40 minutes
93400	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a general practitioner who has not undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes, but less than 40 minutes
93401	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	109.85	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a general practitioner who has not undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93402	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	94.75	94.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance, by a general practitioner who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes, but less than 40 minutes
93403	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	139.55	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance, by a general practitioner who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93404	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a general practitioner who has not undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes but less than 40 minutes
93405	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	109.85	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a general practitioner who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93406	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	94.75	94.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a general practitioner who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes but less than 40 minutes
93407	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	139.55	139.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a general practitioner who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93421	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a general practitioner to review a GP mental health treatment plan which the general practitioner, or an associated medical practitioner has prepared, or to review a psychiatrist assessment and management plan (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) one of the following services has been provided to the patient: (i) a mental health treatment plan under items 93400 to 93411 or 93411 to 93442; or (ii) a psychiatrist assessment and management plan; and (c) the reviewing practitioner modifies the person's GP mental health treatment plan or psychiatrist assessment and management plan to record that they recommend the person have an additional number of better access treatment services
93422	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	74.6	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a general practitioner to review a GP mental health treatment plan which the general practitioner, or an associated medical practitioner has prepared, or to review a psychiatrist assessment and management plan (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) one of the following services has been provided to the patient: (i) a mental health treatment plan under items 93400 to 93411 or 93411 to 93442; or (ii) a psychiatrist assessment and management plan; and (c) the reviewing practitioner modifies the person's GP mental health treatment plan or psychiatrist assessment and management plan to record that they recommend the person have an additional number of better access treatment services
93423	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/03/2022	1/03/2022	87.75		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Phone attendance by a general practitioner to review a GP mental health treatment plan which the general practitioner, or an associated medical practitioner has prepared, or to review a psychiatrist assessment and management plan (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) one of the following services has been provided to the patient: (i) a mental health treatment plan under items 93400 to 93411 or 93411 to 93442; or (ii) a psychiatrist assessment and management plan; and (c) the reviewing practitioner modifies the person's GP mental health treatment plan or psychiatrist assessment and management plan to record that they recommend the person have an additional number of better access treatment services 74.6
93431	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	59.75	59.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner who has not undertaken mental health skills training (not including a general practitioner, specialist or a consultant physician), for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes, but less than 40 minutes
93432	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner who has not undertaken mental health skills training (not including a general practitioner, specialist or a consultant physician), for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes

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93433	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	75.85	75.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance, by a medical practitioner who has undertaken mental health skills training (but not including a general practitioner, specialist or consultant physician), for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes, but less than 40 minutes
93434	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	111.65	111.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance, by a medical practitioner who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93435	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), who has not undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes but less than 40 minutes
93436	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	87.9	87.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), who has not undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93437	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	75.8	75.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 20 minutes but less than 40 minutes
93438	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	111.65	111.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), who has undertaken mental health skills training, for the preparation of a GP mental health treatment plan for a patient (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) the service lasts at least 40 minutes
93451	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner to review a GP mental health treatment plan which the medical practitioner, or an associated medical practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) one of the following services has been provided to the patient: (i) a mental health treatment plan under items 93400 to 93411 or 93431 to 93442; or (ii) a psychiatrist assessment and management plan; and (c) the reviewing practitioner modifies the person's GP mental health treatment plan or psychiatrist assessment and management plan to record that they recommend the person have an additional number of better access treatment services
93452	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) to review a GP mental health treatment plan which the medical practitioner, or an associated medical practitioner has prepared, or to review a psychiatrist assessment and management plan (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) one of the following services has been provided to the patient: (i) a mental health treatment plan under items 93400 to 93411 or 93431 to 93442; or (ii) a psychiatrist assessment and management plan; and (c) the reviewing practitioner modifies the person's GP mental health treatment plan or psychiatrist assessment and management plan to record that they recommend the person have an additional number of better access treatment services
93453	10/12/2020	[Table]	1	A42	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	59.7	59.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) to review a GP mental health treatment plan which the medical practitioner, or an associated medical practitioner has prepared, or to review a psychiatrist assessment and management plan (but not as an admitted patient of a hospital) if: (a) the person is a care recipient in a residential aged care facility; and (b) one of the following services has been provided to the patient: (i) a mental health treatment plan under items 93400 to 93411 or 93431 to 93442; or (ii) a psychiatrist assessment and management plan; and (c) the reviewing practitioner modifies the person's GP mental health treatment plan or psychiatrist assessment and management plan to record that they recommend the person have an additional number of better access treatment services
93469	10/12/2020	[Table]	1	A43	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	73.25	73.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a general practitioner at a residential aged care facility to contribute to a multidisciplinary care plan, prepared by that facility, or to a review of such a plan prepared by such a facility, if the practitioner performs any of the following as a face-to-face service: (a) prepares part of a multidisciplinary care plan and adding a copy of that part of the plan to the person's medical records; or (b) preparing amendments to part of a multidisciplinary care plan and adding a copy of the amendments to the person's medical records; (c) giving advice to a practitioner who prepares part of a multidisciplinary care plan and recording in writing, on the person's medical records, any advice provided to the practitioner; or (d) giving advice to a practitioner who reviews part of a multidisciplinary care plan and recording in writing, on the person's medical records, any advice provided to the practitioner not more than once in a 3 month period
93470	10/12/2020	[Table]	1	A43	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	220.85	220.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional face-to-face attendance by a general practitioner at a residential aged care facility to perform a health assessment of a person who is: (a) of Aboriginal or Torres Strait Islander descent; and (b) a care recipient in a residential aged care facility not more than once in a 9 month period
93475	10/12/2020	[Table]	1	A43	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	58.6	58.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician) at a residential aged care facility to contribute to a multidisciplinary care plan, prepared by that facility, or to a review of such a plan prepared by such a facility, if the practitioner performs any of the following as a face-to-face service: (a) prepares part of a multidisciplinary care plan and adding a copy of that part of the plan to the person's medical records; or (b) preparing amendments to part of a multidisciplinary care plan and adding a copy of the amendments to the person's medical records; (c) giving advice to a practitioner who prepares part of a multidisciplinary care plan and recording in writing, on the person's medical records, any advice provided to the practitioner; or (d) giving advice to a practitioner who reviews part of a multidisciplinary care plan and recording in writing, on the person's medical records, any advice provided to the practitioner not more than once in a 3 month period
93479	10/12/2020	[Table]	1	A43	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	176.7	176.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Professional face-to-face attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician) at a residential aged care facility to perform a health assessment of a person who is: (a) of Aboriginal or Torres Strait Islander descent; and (b) a care recipient in a residential aged care facility not more than once in a 9 month period
93624	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	36.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 31.05
93625	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	44.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 37.7
93626	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 24.2
93627	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	40.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 34.1
93634	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	50.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 43.3
93635	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	58.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 49.9
93636	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	40.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 34.3
93637	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	51.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the first dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed. 43.9

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93644	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	28.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	24.45
93645	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	32.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	27.8
93646	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	20.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	17.65
93647	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	24.2
93653	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	43.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	36.75
93654	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	47.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a general practitioner for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	40.05
93655	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	32.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in a Modified Monash 1 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	27.75
93656	26/02/2021	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	26/02/2021	1/07/2021	39.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	31/05/2021	Professional attendance by a medical practitioner (other than a general practitioner) for the purpose of assessing a patient's suitability for the second or subsequent dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b) the service is bulk-billed; (c) the service is provided at, or from, a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area; (d) the service is rendered in an after-hours period Note: Effective 31 May 2021, age restrictions on the use of this item have been removed.	34
93660	1/01/2022	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	24.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Attendance by a relevant health professional on behalf of a medical practitioner for the purpose of assessing a patient's suitability for a dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b)the service is bulk-billed; (c) the service is not provided at a practice location; and (d) the service is provided from a practice location in a Modified Monash 1 area	21
93661	1/01/2022	[Table]	1	A44	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	28.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Attendance by a relevant health professional on behalf of a medical practitioner for the purpose of assessing a patient's suitability for a dose of a COVID-19 vaccine if all of the following apply: (a) one or both of the following is undertaken, where clinically relevant: (i) a short patient history; (ii) limited examination and management; (b)the service is bulk-billed; (c) the service is not provided at a practice location; and (d) the service is provided from a practice location in: (i) a Modified Monash 2 area; or (ii) a Modified Monash 3 area; or (iii) a Modified Monash 4 area; or (iv) a Modified Monash 5 area; or (v) a Modified Monash 6 area; or (vi) a Modified Monash 7 area	24
93666	23/12/2021	[Table]	1	A44	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	23/12/2021	23/12/2021	11.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23/12/2021	A medical service associated with a service to which Item 93644, 93645, 93646, 93647, 93653, 93654, 93655 or 93656 applies, if: (a) the service is bulk-billed; and (b) the service is for a patient being assessed for their suitability for the booster dose of a COVID-19 vaccine	10
93680	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Professional attendance for nicotine and smoking cessation counselling, care and advice by a general practitioner at consulting rooms lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation	
93681	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Professional attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) at consulting rooms lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation	
93682	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	31.3	31.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Professional attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) at consulting rooms, in an eligible area, lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation	
93683	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Professional attendance for nicotine and smoking cessation counselling, care and advice by a general practitioner at consulting rooms lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation	
93684	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Professional attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) at consulting rooms lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation	
93685	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	60.6	60.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Professional attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) at consulting rooms, in an eligible area, lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.	
93690	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance for nicotine and smoking cessation counselling, care and advice by a general practitioner lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.	

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93691	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93692	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	31.3	31.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93693	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance for nicotine and smoking cessation counselling, care and advice by a general practitioner lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93694	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93695	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	60.6	60.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Telehealth attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93700	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	39.1	39.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance for nicotine and smoking cessation counselling, care and advice by a general practitioner lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93701	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	21	21	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93702	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	31.3	31.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, lasting less than 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93703	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	75.75	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance for nicotine and smoking cessation counselling, care and advice by a general practitioner lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93704	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	38	38	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93705	21/07/2021	[Table]	1	A45	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	E	1/03/2022	1/03/2022	60.6	60.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21/07/2021	Phone attendance for nicotine and smoking cessation counselling, care and advice by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, lasting at least 20 minutes and must include any of the following: (a) taking a patient history, aimed at identifying disease risk factors attributable to nicotine use and smoking dependence, and/or identifying barriers and enablers to cessation; and (b) completing an assessment of the patient's nicotine dependence, including where clinically appropriate a basic physical examination; and (c) initiating interventions and referrals for the cessation of nicotine, if required; and (d) implementing a management plan for appropriate treatment; and (e) providing the patient with nicotine and smoking cessation advice and information, including modifiable lifestyle factors; with appropriate documentation.
93715	8/11/2021	[Table]	1	A46	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/11/2021	1/03/2022	29.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	18/01/2022	Attendance by a medical practitioner (other than a specialist or consultant physician) for the assessment and management of a person with COVID-19 infection of recent onset and confirmed by either: (a) laboratory testing; or (b) a COVID-19 rapid antigen self-test which has been approved for supply in Australia by the Therapeutic Goods Administration, where: (i) the treating practitioner makes a record in the patient's notes that the relevant state and territory reporting requirements have been met, if applicable, and either: a. confirms the patient has reported the positive test result to the relevant state or territory public health unit where reporting requirements are in place from time to time; or b. assists the patient to report the positive result to the relevant state or territory public health unit where reporting requirements are in place from time to time. 25
11000	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	128.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	ELECTROENCEPHALOGRAPHY, not being a service: (a)associated with a service to which Item 11003 or 11009 applies; or (b)involving quantitative topographic mapping using neurometrics or similar devices (Anaes.) 96.1 108.9 Y
11003	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	338.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Electroencephalography, prolonged recording lasting at least 3 hours, that requires multi-channel recording using: (a) for a service not associated with a service to which an item in Group T8 applies—standard 10-20 electrode placement; or (b) for a service associated with a service to which an item in Group T8 applies—either standard 10-20 electrode placement or a different electrode placement and number of recorded channels, other than a service: (c) associated with a service to which item11000, 11004 or 11005 applies; or (d) involving quantitative topographic mapping using neurometrics or similar devices. 254.15 288.05
11004	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	338.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Electroencephalography, ambulatory or video, prolonged recording lasting at least 3 hours and up to 24 hours, that requires multi channel recording using standard 10-20 electrode placement, first day, other than a service:(a) associated with a service to which item 11000, 11003 or 11005 applies; or(b) involving quantitative topographic mapping using neurometrics or similar devices. 254.15 288.05
11005	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	338.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Electroencephalography, ambulatory or video, prolonged recording lasting at least 3 hours and up to 24 hours, that requires multi channel recording using standard 10-20 electrode placement, each day after the first day, other than a service:(a) associated with a service to which item 11000, 11003 or 11004 applies; or(b) involving quantitative topographic mapping using neurometrics or similar devices. 254.15 288.05
11009	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	338.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ELECTROCORTICOGRAPHY 254.15 288.05
11012	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	116.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NEUROMUSCULAR ELECTRODIAGNOSISconduction studies on 1 nerve OR ELECTROMYOGRAPHY of 1 or more muscles using concentric needle electrodes OR both these examinations (not being a service associated with a service to which item 11015 or 11018 applies) 87.45 99.1
11015	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	156	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NEUROMUSCULAR ELECTRODIAGNOSISconduction studies on 2 or 3 nerves with or without electromyography (not being a service associated with a service to which item 11012 or 11018 applies) 117 132.6
11018	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	231.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NEUROMUSCULAR ELECTRODIAGNOSISconduction studies on 4 or more nerves with or without electromyography OR recordings from single fibres of nerves and muscles OR both of these examinations (not being a service associated with a service to which item 11012 or 11015 applies) 174.8 198.1
11021	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	156	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NEUROMUSCULAR ELECTRODIAGNOSISrepetitive stimulation for study of neuromuscular conduction OR electromyography with quantitative computerised analysis OR both of these examinations 117 132.6

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11024	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	118.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	CENTRAL NERVOUS SYSTEM EVOKED RESPONSES, INVESTIGATION OF, by computerised averaging techniques, not being a service involving quantitative topographic mapping of event-related potentials or multifocal multichannel objective perimetry - 1 or 2 studies	88.85	100.7
11027	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	175.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	CENTRAL NERVOUS SYSTEM EVOKED RESPONSES, INVESTIGATION OF, by computerised averaging techniques, not being a service involving quantitative topographic mapping of event-related potentials or multifocal multichannel objective perimetry - 3 or more studies	131.8	149.35
11200	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	42.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	PROVOCATIVE TEST OR TESTS FOR OPEN ANGLE GLAUCOMA, including water drinking	31.85	36.1
11204	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	ELECTRORETINOGRAPHY of one or both eyes by computerised averaging techniques, including 3 or more studies performed according to current professional guidelines or standards,performed by or on behalf of a specialist or consultant physician in the practice of his or her specialty.	84.5	95.8
11205	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	ELECTROOCULOGRAPHY of one or both eyes performed according to current professional guidelines or standards, performed by or on behalf of a specialist or consultant physician in the practice of his or her specialty.	84.5	95.8
11210	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	PATTERN ELECTRORETINOGRAPHY of one or both eyes by computerised averaging techniques, including 3 or more studies performed according to current professional guidelines or standards	84.5	95.8
11211	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	DARK ADAPTOMETRY of one or both eyes with a quantitative (log cd/m2) estimation of threshold in log lumens at 45 minutes of dark adaptations	84.5	95.8
11215	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	127.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	RETINAL ANGIOGRAPHY, multiple exposures of 1 eye with intravenous dye injection	96	108.8
11218	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	158.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	RETINAL ANGIOGRAPHY, multiple exposures of both eyes with intravenous dye injection	118.6	134.4
11219	1/11/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	41.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Optical coherence tomography for diagnosis of an ocular condition for the treatment of which there is a medication that is : (a) listed on the pharmaceutical benefits scheme; and (b) indicated for intraocular administration Applicable only once in any 12 month period	31.2	35.4
11220	1/12/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2016	1/07/2021	41.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2016	OPTICAL COHERENCE TOMOGRAPHY for the assessment of the need for treatment following provision of pharmaceutical benefits scheme-subsidised ocriplasmin. Maximum of one service per eye per lifetime.	31.2	35.4
11221	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	70.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Full quantitative computerised perimetry (automated absolute static threshold), other than a service involving multifocal multichannel objective perimetry, performed by or on behalf of a specialist in the practice of his or her specialty, if indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain with assessment and report, bilateral—to a maximum of 3 examinations (including examinations to which item 11224 applies) in any 12 month period	52.95	60
11224	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	42.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Full quantitative computerised perimetry (automated absolute static threshold), other than a service involving multifocal multichannel objective perimetry, performed by or on behalf of a specialist in the practice of his or her specialty, if indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain with assessment and report, unilateral—to a maximum of 3 examinations (including examinations to which item 11221 applies) in any 12 month period	31.9	36.15
11235	1/11/1996	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	127.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1996	EXAMINATION OF THE EYE BY IMPRESSION CYTOLOGY OF CORNEA for the investigation of ocular surface dysplasia, including the collection of cells, processing and all cytological examinations and preparation of slides	95.8	108.55
11237	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	84.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	OCULAR CONTENTS, simultaneous ultrasonic echography by both unidimensional and bidimensional techniques, diagnosis, monitoring or measurement of choroidal and ciliary body melanomas, retinoblastoma or suspicious naevi or simulating lesions, one eye, not being a service associated with a service to which items in Group I1 of Category 5 apply	63.6	72.05
11240	1/03/1999	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/1999	1/07/2021	84.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ORBITAL CONTENTS, unidimensional ultrasonic echography or partial coherence interferometry of, for the measurement of one eye prior to lens surgery on that eye, not being a service associated with a service to which items in Group I1 of Category 5 apply.	63.6	72.05
11241	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	107.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ORBITAL CONTENTS, unidimensional ultrasonic echography or partial coherence interferometry of, for bilateral eye measurement prior to lens surgery on both eyes, not being a service associated with a service to which items in Group I1 apply	80.9	91.7
11242	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	83.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ORBITAL CONTENTS, unidimensional ultrasonic echography or partial coherence interferometry of, for the measurement of an eye previously measured and on which lens surgery has been performed, and where further lens surgery is contemplated in that eye, not being a service associated with a service to which items in Group I1 apply	62.55	70.85
11243	1/11/2001	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	83.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ORBITAL CONTENTS, unidimensional ultrasonic echography or partial coherence interferometry of, for the measurement of a second eye where surgery for the first eye has resulted in more than 1 dioptre of error or where more than 3 years have elapsed since the surgery for the first eye, not being a service associated with a service to which items in Group I1 apply	62.55	70.85
11244	1/03/2013	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2013	1/07/2021	80.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2013	Orbital contents, diagnostic B-scan of, by a specialist practising in his or her speciality of ophthalmology, not being a service associated with a service to which an item in Group I1 of the diagnostic imaging services table applies.	60.1	68.1
11300	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	200.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BRAIN stem evoked response audiometry (Araes.)	150.25	170.3 Y
11303	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	200.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	ELECTROCOCHLEOGRAPHY, extratympanic method, 1 or both ears	150.25	170.3
11304	1/11/1994	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	329.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	ELECTROCOCHLEOGRAPHY, transtympanic membrane insertion technique, 1 or both ears	247.35	280.35
11306	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	22.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Nondeterminate AUDIOMETRY	17.1	19.4
11309	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	27.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AUDIOGRAM, air conduction	20.55	23.25
11312	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	38.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AUDIOGRAM, air and bone conduction or air conduction and speech discrimination	29	32.9
11315	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	51.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AUDIOGRAM, air and bone conduction and speech	38.4	43.55
11318	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	63.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AUDIOGRAM, air and bone conduction and speech, with other Cochlear tests	47.4	53.75
11324	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	34.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	IMPEDANCE AUDIOGRAM involving tympanometry and measurement of static compliance and acoustic reflex performed by, or on behalf of, a specialist in the practice of his or her specialty, where the patient is referred by a medical practitioner - not being a service associated with a service to which item 11309, 11312, 11315 or 11318 applies	25.65	29.1
11327	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	20.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	IMPEDANCE AUDIOGRAM involving tympanometry and measurement of static compliance and acoustic reflex performed by, or on behalf of, a specialist in the practice of his or her specialty, where the patient is referred by a medical practitioner - being a service associated with a service to which item 11309, 11312, 11315 or 11318 applies	15.45	17.5
11330	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	5.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	IMPEDANCE AUDIOGRAM where the patient is not referred by a medical practitioner - 1 examination in any 4 week period	6.15	7
11332	1/05/2000	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	45.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	OTO-ACOUSTIC EMISSION AUDIOMETRY for the detection of permanent congenital hearing impairment, performed by or on behalf of a specialist or consultant physician, on an infant or child who is at risk due to one or more of the following factors:- (i)admission to a neonatal intensive care unit; or (ii)family history of hearing impairment; or (iii)intra-uterine or perinatal infection (either suspected or confirmed); or (iv)birthweight less than 1.5kg; or (v)craniofacial deformity; or (vi)jaym asphixia; or (vii)chromosomal abnormality, including Down's Syndrome; or (viii)exchange transfusion; and where:- -the patient is referred by another medical practitioner; and -middle ear pathology has been excluded by specialist opinion	45.75	51.85
11333	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	46.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CALORIC TEST OF LABYRINTH OR LABYRINTHS	34.8	39.45
11336	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	46.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SIMULTANEOUS BITHERMAL CALORIC TEST OF LABYRINTHS	34.8	39.45
11339	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	46.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ELECTRONYSTAGMOGRAPHY	34.8	39.45
11342	1/03/2022	[Table]	2	D1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	1/03/2022	1/03/2022	160.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Programming by telehealth of an auditory implant, or the sound processor of an auditory implant, unilateral, performed by or on behalf of a medical practitioner, if a service to which item 82300, 82302 or 82304 applies has not been performed on the patient on the same day. Applicable up to a total of 4 services to which this item or item 11300 or 11345 apply on the same day		136.2
11345	1/03/2022	[Table]	2	D1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	1/03/2022	1/03/2022	160.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Programming by phone of an auditory implant, or the sound processor of an auditory implant, unilateral, performed by or on behalf of a medical practitioner, if a service to which item 82300, 82302 or 82304 applies has not been performed on the patient on the same day. Applicable up to a total of 4 services to which this item or item 11300 or 11342 apply on the same day		136.2
11503	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	144.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Complex measurement of properties of the respiratory system, including the lungs and respiratory muscles, that is performed: (a) in a respiratory laboratory; and (b) under the supervision of a specialist or consultant physician who is responsible for staff training, supervision, quality assurance and the issuing of written reports on tests performed; and (c) using any of the following tests: (i) measurement of absolute lung volumes by any method; (ii) measurement of carbon monoxide diffusing capacity by any method; (iii) measurement of airway or pulmonary resistance by any method; (iv) inhalation provocation testing, including pre-provocation spirometry and the construction of a dose response curve, using a recognised direct or indirect bronchoprovocation agent and post-bronchodilator spirometry; (v) provocation testing involving sequential measurement of lung function at baseline and after exposure to specific sensitising agents, including drugs, or occupational asthma triggers; (vi) spirometry performed before and after simple exercise testing undertaken as a provocation test for the investigation of asthma, in premises equipped with resuscitation equipment and personnel trained in Advanced Life Support; (vii) measurement of the strength of inspiratory and respiratory muscles at multiple lung volumes; (viii) simulated altitude test involving exposure to hypoxic gas mixtures and oxygen saturation at rest and/or during exercise with or without an observation of the effect of supplemental oxygen; (ix) calculation of pulmonary or cardiac shunt by measurement of arterial-oxygen partial pressure and haemoglobin concentration following the breathing of an inspired oxygen concentration of 100% for a duration of 15 minutes or greater; (x) if the measurement is for the purpose of determining eligibility for pulmonary arterial hypertension medications subsidised under the Pharmaceutical Benefits Scheme or eligibility for the provision of portable oxygen—functional exercise test by any method (including 6-minute walk test and shuttle walk test); each occasion at which one or more tests are performed Not applicable to a service performed in association with a spirometry or sleep study service to which item11505, 11506, 11507, 11508, 11512, 12203, 12204, 12205, 12207, 12208, 12210, 12211, 12215, 12217 or 12250 applies Not applicable to a service to which item11507 applies	108.2	122.65

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11505	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	42.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Measurement of spirometry, that: (a) involves a permanently recorded tracing, performed before and after inhalation of a bronchodilator; and (b) is performed to confirm diagnosis of: (i) asthma; or (ii) chronic obstructive pulmonary disease (COPD); or (iii) another cause of airflow limitation; each occasion at which 3 or more recordings are made Applicable only once in any 12 month period	32.1	36.4
11506	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	21.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Measurement of spirometry, that: (a) involves a permanently recorded tracing, performed before and after inhalation of a bronchodilator; and (b) is performed to: (i) confirm diagnosis of chronic obstructive pulmonary disease (COPD); or (ii) assess acute exacerbations of asthma; or (iii) monitor asthma and COPD; or (iv) assess other causes of obstructive lung disease or the presence of restrictive lung disease; each occasion at which recordings are made	16.05	18.2
11507	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	104.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Measurement of spirometry: (a) that includes continuous measurement of the relationship between flow and volume during expiration or during expiration and inspiration, performed before and after inhalation of a bronchodilator; and (b) fractional exhaled nitric oxide (FeNO) concentration in exhaled breath; if: (c) the measurement is performed: (i) under the supervision of a specialist or consultant physician; and (ii) with continuous attendance by a respiratory scientist; and (iii) in a respiratory laboratory equipped to perform complex lung function tests; and (d) a permanently recorded tracing and written report is provided; and (e) 1 or more spirometry recordings are performed unless difficult to achieve for clinical reasons; each occasion at which one or more such tests are performed Not applicable to a service associated with a service to which Item11503 or 11512 applies	78.25	88.7
11508	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	302.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Maximal symptom-limited incremental exercise test using a calibrated cycle ergometer or treadmill, if: (a) the test is performed for the evaluation of: (i) breathlessness of uncertain cause from tests performed at rest; or (ii) breathlessness out of proportion with impairment due to known conditions; or (iii) functional status and prognosis in a patient with significant cardiac or pulmonary disease for whom complex procedures such as organ transplantation are considered; or (iv) anaesthetic and perioperative risks in a patient undergoing major surgery who is assessed as substantially above average risk after standard evaluation; and (b) the test has been requested by a specialist or consultant physician following professional attendance on the patient by the specialist or consultant physician; and (c) a respiratory scientist and a medical practitioner are in constant attendance during the test; and (d) the test is performed in a respiratory laboratory equipped with airway management and defibrillator equipment; and (e) there is continuous measurement of at least the following: (i) work rate; (ii) pulse oximetry; (iii) respired oxygen and carbon dioxide partial pressures and respired volumes; (iv) ECG; (v) heart rate and blood pressure; and (f) interpretation and preparation of a permanent report is provided by aspecialist or consultant physician who is also responsible for the supervision of technical staff and quality assurance	226.95	257.25
11512	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	64.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Measurement of spirometry: (a) that includes continuous measurement of the relationship between flow and volume during expiration or during expiration and inspiration, performed before and after inhalation of a bronchodilator; and (b) that is performed with a respiratory scientist in continuous attendance; and (c) that is performed in a respiratory laboratory equipped to perform complex lung function tests; and (d) that is performed under the supervision of a specialist or consultant physician who is responsible for staff training, supervision, quality assurance and the issuing of written reports; and (e) for which a permanently recorded tracing and written report is provided; and (f) for which 3 or more spirometry recordings are performed; each occasion at which one or more such tests are performed Not applicable to a service associated with a service to which Item11503 or 11507 applies	48.2	54.65
11600	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	72.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	BLOOD PRESSURE MONITORING (venal venous, pulmonary arterial, systemic arterial or cardiac intracavity), by indwelling catheter – once only for each type of pressure on any calendar day up to a maximum of 4 times; not being a service to which Item 13876 applies and where not performed in association with the administration of general anaesthesia	54.1	61.3
11602	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	60.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Investigation of venous reflux or obstruction in one or more limbs at rest by CW Doppler or pulsed Doppler involving examination at multiple sites along each limb using intermittent limb compression or intrinsic manoeuvres, or both, to detect prograde and retrograde flow, other than a service associated with a service to which Item 32500 applies—hard copy trace and written report, the report component of which must be performed by a medical practitioner, maximum of 2 examinations in a 12 month period, not to be used in conjunction with sclerotherapy	45.1	51.1
11604	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	78.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Investigation of chronic venous disease in the upper and lower extremities, one or more limbs, by plethysmography (excluding photoplethysmography)—examination, hard copy trace and written report, not being a service associated with a service to which Item 32500 applies	59.1	66.95
11605	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	78.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Investigation of complex chronic lower limb reflux or obstruction, in one or more limbs, by infrared photoplethysmography, during and following exercise to determine surgical intervention or the conservative management of deep venous thrombotic disease—hard copy trace, calculation of 90% recovery time and written report, not being a service associated with a service to which Item 32500 applies	59.1	66.95
11607	1/11/2021	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	107.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Continuous ambulatory blood pressure recording for 24 hours or more for a patient if: (a) the patient has a clinic blood pressure measurement (using a sphygmomanometer or a validated oscillometric blood pressure monitoring device) of either or both of the following measurements: (i) systolic blood pressure greater than or equal to 140 mmHg and less than or equal to 180 mmHg; (ii) diastolic blood pressure greater than or equal to 90 mmHg and less than or equal to 110 mmHg; and (b) the patient has not commenced anti-hypertensive therapy; and (c) the recording includes the patient's resting blood pressure; and (d) the recording is conducted using microprocessor-based analysis equipment; and (e) the recording is interpreted by a medical practitioner and a report is prepared by the same medical practitioner; and (f) a treatment plan is provided for the patient; and (g) the service: (i) is not provided in association with ambulatory electrocardiogram recording, and (ii) is not associated with a service to which any of the following items apply: (A) 177; (B) 224 to 228; (C) 228 to 240; (D) 699; (E) 701 to 707; (F) 721 to 732; (G) 735 to 758. Applicable only once in any 12 month period	80.4	91.15
11610	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	66.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	MEASUREMENT OF ANKLE: BRACHIAL INDICES AND ARTERIAL WAVEFORM ANALYSIS, measurement of posterior tibial and dorsalis pedis (or toe) and brachial arterial pressures bilaterally using Doppler or plethysmographic techniques, the calculation of ankle (or toe) brachial systolic pressure indices and assessment of arterial waveforms for the evaluation of lower extremity arterial disease, examination, hard copy trace and report.	49.75	56.4
11611	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	66.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	MEASUREMENT OF WRIST: BRACHIAL INDICES AND ARTERIAL WAVEFORM ANALYSIS, measurement of radial and ulnar (or finger) and brachial arterial pressures bilaterally using Doppler or plethysmographic techniques, the calculation of the wrist (or finger)brachial systolic pressure indices and assessment of arterial waveforms for the evaluation of upper extremity arterial disease, examination, hard copy trace and report.	49.75	56.4
11612	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	116.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	EXERCISE STUDY FOR THE EVALUATION OF LOWER EXTREMITY ARTERIAL DISEASE, measurement of posterior tibial and dorsalis pedis (or toe) and brachial arterial pressures bilaterally using Doppler or plethysmographic techniques, the calculation of ankle (or toe) brachial systolic pressure indices for the evaluation of lower extremity arterial disease at rest and following exercise using a treadmill or bicycle ergometer or other such equipment where the exercise workload is quantifiably documented, examination and report.	87.75	99.45
11614	1/11/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	78.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	TRANSCRANIAL DOPPLER, examination of the intracranial arterial circulation using CW Doppler or pulsed Doppler with hard copy recording of waveforms, examination and report, not associated with a service to which Items 55229 or 55280 in Group G1 of Category 5 apply.	59.1	66.95
11615	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	108.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MEASUREMENT OF DIGITAL TEMPERATURE, 1 or more digits, (unilateral or bilateral) and report, with hard copy recording of temperature before and for 10 minutes or more after cold stress testing.	59.25	67.15
11627	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	237.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PULMONARY ARTERY pressure monitoring during open heart surgery, in apatient under 12 years of age	178.45	202.25
11704	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/08/2020	1/07/2021	32.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Twelve-lead electrocardiography, trace and formal report, by a specialist or a consultant physician, if the service: (a) is requested by a requesting practitioner; and (b) is not associated with a service to which Item12203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies. Note: the following are also requirements of the service: a formal report is completed; and a copy of the formal report is provided to the requesting practitioner; and the service is not provided to the patient as part of an episode of hospital treatment or hospital-substitute treatment; and is not provided in association with an attendance Item (Part 2 of the schedule); and the specialist or consultant physician who renders the service does not have a financial relationship with the requesting practitioner.		27.7
11705	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	19.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Twelve-lead electrocardiography, formal report only, by a specialist or a consultant physician, if the service: (a) is requested by a requesting practitioner; and (b) is not associated with a service to which Item12203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable not more than twice on the same day Note: the following are also requirements of the service: a formal report is completed; and a copy of the formal report is provided to the requesting practitioner; and the specialist or consultant physician who renders the service does not have a financial relationship with the requesting practitioner.	14.4	16.3
11707	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/08/2020	1/07/2021	19.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Twelve-lead electrocardiography, trace only, by a medical practitioner, if: (a) the trace: (i) is required to inform clinical decision making; and (ii) is reviewed in a clinically appropriate timeframe to identify potentially serious or life-threatening abnormalities; and (iii) does not need to be fully interpreted or reported on; and (b) the service is not associated with a service to which Item12203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable not more than twice on the same day Note: the service is not provided to the patient as part of an episode of: hospital treatment; or hospital-substitute treatment.		16.3
11713	1/07/1992	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	72.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	SIGNAL AVERAGED ECG RECORDING involving not more than 300 beats, using at least 3 leads with data acquisition at not less than 1000Hz of at least 100 QRS complexes, including analysis, interpretation and report of recording by a specialist physician or consultant physician	54.45	61.7
11714	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/08/2020	1/07/2021	25.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Twelve-lead electrocardiography, trace and clinical note, by a specialist or consultant physician, if the service is not associated with a service to which Item12203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable not more than twice on the same day Note: the service is not provided to the patient as part of an episode of: hospital treatment; or hospital-substitute treatment.		21.45
11716	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/08/2020	1/07/2021	174.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note:the service only applies if the patient meets one or more of the following and the requirements in Note: DR.1.1 Continuous ambulatory electrocardiogram recording for 12 or more hours, by a specialist or consultant physician, if the service: (a) is indicated for the evaluation of any of the following: (i) syncope; (ii) pre-syncopal episodes; (iii) palpitations where episodes are occuring more than once a week; (iv) another asymptomatic arrhythmia is suspected with an expected frequency of greater than once a week; (v) surveillance following cardiac surgical procedures that have an established risk of causing dysrhythmia; and (b) utilises a system capable of superimposition and full disclosure printout of at least 12 hours of recorded electrocardiogram data (including resting electrocardiogram and the recording of parameters) and microprocessor based scanning analysis; and (c) includes interpretation and report; and (d) is not provided in association with ambulatory blood pressure monitoring; and (e) is not associated with a service to which Item11704, 11705, 11707, 11714, 11717, 11719, 11731, 11733, 11735, 12203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable only once in any 4 week period Note: this services does not apply if the patient is being provided with the service as part of an episode of: hospital treatment; or hospital-substitute treatment.		148.2

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11717	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/08/2020	1/07/2021	102.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets one or more of the following and the requirements in Note: DR.1.1 Ambulatory electrocardiogram monitoring, by a specialist or consultant physician, if the service: (a) utilises a patient activated, single or multiple event memory recording device that: (i) is connected continuously to the patient for between 7 and 30 days; and (ii) is capable of recording for at least 20 seconds prior to each activation and for 15 seconds after each activation; and (b) includes transmission, analysis, interpretation and reporting (including the indication for the investigation); and (c) is for the investigation of recurrent episodes of: unexplained syncope; or palpitation; or other symptoms where a cardiac rhythm disturbance is suspected and where infrequent episodes have occurred; and (d) is not associated with a service to which Item11716, 11723, 11726, 12200, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable only once in any 3 month period Note: the service does not apply if the patient is being provided with the service as part of an episode of: hospital treatment; or hospital-substitute treatment.	87.05
11719	1/09/2015	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	69.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	IMPLANTED PACEMAKER (including cardiac resynchronisation pacemaker) REMOTE MONITORING involving reviews (without patient attendance) of arrhythmias, lead and device parameters, if at least one remote review is provided in a 12 month period. Payable only once in any 12 month period	52.15	59.1
11720	1/09/2015	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	69.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	IMPLANTED PACEMAKER TESTING, with patient attendance, following detection of abnormality by remote monitoring involving electrocardiography, measurement of rate, width and amplitude of stimulus including reprogramming when required, not being a service associated with a service to which Item11721 applies.	52.15	59.1
11721	1/07/1992	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	72.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	IMPLANTED PACEMAKER TESTING of atrioventricular (AV) sequential, rate responsive, or antitachycardia pacemakers, including reprogramming when required, not being a service associated with a service to which Item 11704, 11719, 11720, 11725 or 11726 applies	54.45	61.7
11723	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/08/2020	1/07/2021	54.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note the service only applies if the patient meets one or more of the following and the requirements in Note: DR.1.1 Ambulatory electrocardiogram monitoring, by a specialist or consultant physician, if the service: (a) utilises a patient activated, single or multiple event recording, on a memory recording device that: (i) is connected continuously to the patient for up to 7 days; and (ii) is capable of recording for at least 20 seconds prior to each activation and for 15 seconds after each activation; and (b) includes transmission, analysis, interpretation and formal report (including the indication for the investigation); and (c) is for the investigation of recurrent episodes of: (i) unexplained syncope; or (ii) palpitation; or (iii) other symptoms where a cardiac rhythm disturbance is suspected and where infrequent episodes have occurred; and (d) is not associated with a service to which Item11716, 11717, 11726, 12203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable only once in any 3 month period Note: The service does not apply if the patient is an admitted patient.	45.95
11724	1/07/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	175.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	UP-RIGHT TILT TABLE TESTING for the investigation of syncope of suspected cardiothoracic origin, including blood pressure monitoring, continuous ECG monitoring and the recording of the parameters, and involving an established intravenous line and the continuous attendance of a specialist or consultant physician - on premises equipped with a mechanical respirator and defibrillator	131.8	149.35
11725	1/09/2015	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	197.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	IMPLANTED DEFIBRILLATOR (including cardiac resynchronisation defibrillator) REMOTE MONITORING involving reviews (without patient attendance) of arrhythmias, lead and device parameters, if at least 2 remote reviews are provided in a 12 month period. Payable only once in any 12 month period	147.9	167.65
11726	1/09/2015	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	98.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	IMPLANTED DEFIBRILLATOR TESTING with patient attendance following detection of abnormality by remote monitoring involving electrocardiography, measurement of rate, width and amplitude of stimulus, not being a service associated with a service to which Item 11727 applies.	73.95	83.85
11727	1/11/2006	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	98.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	IMPLANTED DEFIBRILLATOR TESTING involving electrocardiography, assessment of pacing and sensing thresholds for pacing and defibrillation electrodes, download and interpretation of stored events and electrograms, including programming when required, not being a service associated with a service to which Item11719, 11720, 11721, 11725 or 11726 applies	73.95	83.85
11728	1/05/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2018	1/07/2021	36.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2018	Implanted loop recording for the investigation of atrial fibrillation if the patient to whom the service is provided has been diagnosed as having had an embolic stroke of undetermined source, including reprogramming when required, retrieval of stored data, analysis, interpretation and report, other than a service to which Item38288 applies For any particular patient—applicable not more than 4 times in any 12 months	27.15	30.75
11729	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	158.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/08/2021	Note the service only applies if the patient meets the requirements of the descriptor and the requirements in note DR.1.2 Multi channel electrocardiogram monitoring and recording during exercise (motorised treadmill or cycle ergometer capable of quantifying external workload in watts) or pharmacological stress, if: (a) the patient is 17 years or more; and (b) the patient: (i) has symptoms consistent with cardiac ischemia; or (ii) has other cardiac disease which may be exacerbated by exercise; or (iii) has a first degree relative with suspected heritable arrhythmia; and (c) the monitoring and recording: (i) is not less than 20 minutes; and (ii) includes resting electrocardiogram; and (d) a written report is produced by a medical practitioner that includes interpretation of the monitoring and recording data, commenting on the significance of the data, and the relationship of the data to clinical decision making for the patient in the clinical context; and (e) the service is not a service: (i) provided on the same occasion as a service to which Item11704, 11705, 11707 or 11714 applies; or (ii) performed within 24 months of a service to which Item 55141, 55143, 55145, 55146, 61311, 61324, 61329, 61332, 61345, 61349, 61357, 61365, 61377, 61380, 61394, 61398, 61406, 61410, 61414 or 61418 applies Applicable only once in any 24 month period	118.8	134.6
11730	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	158.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note the service only applies if the patient meets the requirements of the descriptor and the requirements in note DR.1.3 Multi channel electrocardiogram monitoring and recording during exercise (motorised treadmill or cycle ergometer capable of quantifying external workload in watts), if: (a) the patient is less than 17 years; and (b) the patient: (i) has symptoms consistent with cardiac ischemia; or (ii) has other cardiac disease which may be exacerbated by exercise; or (iii) has a first degree relative with suspected heritable arrhythmia; and (c) the monitoring and recording: (i) is not less than 20 minutes in duration; and (ii) includes resting electrocardiogram; and (d) a written report is produced by a medical practitioner that includes interpretation of the monitoring and recording data, commenting on the significance of the data, and the relationship of the data to clinical decision making for the patient in the clinical context; and (e) the service is not a service: (i) provided on the same occasion as a service to which Item11704, 11705, 11707 or 11714 applies; or (ii) performed within 24 months of a service to which Item 55141, 55143, 55145, 55146, 61311, 61324, 61329, 61332, 61345, 61349, 61357, 61365, 61377, 61380, 61394, 61398, 61406, 61410, 61414 or 61418 applies	118.8	134.6
11731	1/08/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	36.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Implanted electrocardiogram loop recording, by a medical practitioner, including reprogramming (if required), retrieval of stored data, analysis, interpretation and report, if the service is: (a) an investigation for a patient with: (i) cryptogenic stroke; or (ii) recurrent unexplained syncope; and (b) not a service to which Item38285 applies Applicable only once in any 4 week period	27.15	30.75
11735	15/09/2020	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	15/09/2020	1/07/2021	133.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets one or more of the following and the requirements in Note: DR.1.5 Continuous ambulatory electrocardiogram recording for 7 days, by a specialist or consultant physician, if the service: (a) utilises intelligent microprocessor based monitoring, with patient triggered recording and symptom reporting capability, real time analysis of electrocardiograms and alerts and daily or live data uploads; and (b) is for the investigation of: (i) episodes of suspected intermittent cardiac arrhythmia or episodes of syncope; or (ii) suspected intermittent cardiac arrhythmia in a patient who has had a previous cerebrovascular accident, is at risk of cerebrovascular accident or has had one or more previous transient ischemic attacks; and (c) includes interpretation and report; and (d) is not a service: (i) provided in association with ambulatory blood pressure monitoring; or (ii) associated with a service to which Item11716, 11717, 11723, 11203, 12204, 12205, 12207, 12208, 12210, 12213, 12215, 12217 or 12250 applies Applicable not more than 4 times in any 12 month period Note:The service does not apply if the patient is an admitted patient.	113.15
11800	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	181.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OESOPHAGEAL MOTILITY TEST, manometric	136.15	154.3
11801	1/09/2015	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	273.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	CLINICAL ASSESSMENT OF GASTRO-OESOPHAGEAL REFLUX DISEASE that involves 48 hour catheter-free wireless ambulatory oesophageal pH monitoring including administration of the device and associated endoscopy procedure for placement, analysis and interpretation of the data and all attendances for providing the service, if (a)a catheter-based ambulatory oesophageal pH monitoring: (i)has been attempted on the patient but failed due to clinical complications, or (ii)is not clinically appropriate for the patient due to anatomical reasons (nasopharyngeal anatomy) preventing the use of catheter-based pH monitoring; and (b)the service is performed by a specialist or consultant physician with endoscopic training that is recognised by The Conjoint Committee for the Recognition of Training in Gastrointestinal Endoscopy. Not in association with another item in Category 2, sub-group 7 (Areas.)	205.25	232.65 Y
11810	1/07/1992	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	181.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	CLINICAL ASSESSMENT of GASTRO-OESOPHAGEAL REFLUX DISEASE involving 24 hour pH monitoring, including analysis, interpretation and report and including any associated consultation	136.15	154.3
11820	1/05/2004	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2004	1/07/2021	1270.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Capsule endoscopy to investigate an episode of obscure gastrointestinal bleeding, using a capsule endoscopy device (including administration of the capsule, associated endoscopy procedure if required for placement, imaging, image reading and interpretation, and all attendances for providing the service on the day the capsule is administered) if: (a) the service is provided to a patient who: (i) has overt gastrointestinal bleeding; or (ii) has gastrointestinal bleeding that is recurrent or persistent, and iron deficiency anaemia that is not due to coeliac disease, and, if the patient also has menorrhagia, has had the menorrhagia considered and managed; and (b)an upper gastrointestinal endoscopy and a colonoscopy have been performed on the patient and have not identified the cause of thebleeding; and (c)the service has not been provided to the same patient on more than 2 occasions in the preceding 12 months; and (d)the service is performed by a specialist or consultant physician with endoscopic training that is recognised by the Conjoint Committee for the Recognition of Training in Gastrointestinal Endoscopy; and (e)the service is not associated with a service to which Item30680, 30682, 30684 or 30686 applies	959.4	1191.25
11823	1/03/2009	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2009	1/07/2021	1270.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2014	Capsule endoscopy to conduct small bowel surveillance of a patient diagnosed with Peutz-Jeghers Syndrome, using a capsule endoscopy device approved by the Therapeutic Goods Administration (including administration of the capsule, imaging, image reading and interpretation, and all attendances for providing the service on the day the capsule is administered) if: (a) the service is performed by a specialist or consultant physician with endoscopic training that is recognised by the Conjoint Committee for the Recognition of Training in Gastrointestinal Endoscopy; and (b) the item is performed only once in any 2 year period; and (c) the service is not associated with balloon enteroscopy.	959.4	1191.25
11830	1/07/1992	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	194.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	DIAGNOSIS of ABNORMALITIES of the PELVIC FLOOR involving anal manometry or measurement of anorectal sensation or measurement of the rectosphincteric reflex	145.8	165.25
11833	1/07/1992	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	259.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	DIAGNOSIS of ABNORMALITIES of the PELVIC FLOOR and sphincter muscles involving electromyography or measurement of pudendal and spinal nerve motor latency	194.9	220.9
11900	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	28.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Urine flow study, including peak urine flow measurement, not being a service associated with a service to which Item 11912, 11917 or 11919 applies	21.5	24.4

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11912	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/03/2022	205.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cystometrography (a) with measurement of any one or more of the following: (i) urine flow rate; (ii) urethral pressure profile; (iii) urethral sphincter electromyography; and(b) with simultaneous measurement of: (i) rectal pressure; or (ii) stomal or vaginal pressure if rectal pressure is not possible;not being a service associated with a service to which any of items 11912 to 11927, 11900, 11917, 11919 and 36800 or an item in Group I3 of the diagnostic imaging services table applies (Anaes.)	154.15	174.7 Y
11917	1/11/2002	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	445.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cystometrography, in conjunction with real time ultrasound of one or more components of the urinary tract:(a) with measurement of any one or more of the following: (i) urine flow rate; (ii) urethral pressure profile; (iii) urethral sphincter electromyography; and(b) with simultaneous measurement of: (i) rectal pressure; or (ii) stomal or vaginal pressure if rectal pressure is not possible;including all imaging associated with cystometrography; not being a service associated with a service to which any of items 11912 to 11927, 11900, 11912, 11919 and 36800 or an item in Group I3 of the diagnostic imaging services table applies (Anaes.)	334.35	378.9 Y
11919	1/05/2003	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	445.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	CYSTOMETROGRAPHY IN CONJUNCTION WITH CONTRAST MICTURATING CYSTOURETHROGRAPHY, with measurement of any one or more of urine flow rate, urethral pressure profile, rectal pressure, urethral sphincter electromyography, being a service associated with a service to which items 60506 or 60509 applies;other than a service associated with a service to which items 11912-11927, 11900-11917 and 36800 apply (Anaes.)	334.35	378.9 Y
12000	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	40.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Skin prick testing for aeroallergens by a specialist or consultant physician in the practice of the specialist or consultant physician's specialty, including all allergens tested on the same day, not being a service associated with a service to which item 12001, 12002, 12005, 12012, 12017, 12021, 12022 or 12024 applies	30.4	34.45
12001	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	40.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Skin prick testing for aeroallergens, including all allergens tested on the same day, not being a service associated with a service to which item12000, 12002, 12005, 12012, 12017, 12021, 12022 or 12024 applies. Applicable only once in any 12 month period	30.4	34.45
12002	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	40.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Repeat skin prick testing of a patient for aeroallergens, including all allergens tested on the same day, if: (a) further testing for aeroallergens is indicated in the same 12 month period to which item12001 applies to a service for the patient; and (b) the service is not associated with a service to which item12000, 12001, 12005, 12012, 12017, 12021, 12022 or 12024 applies Applicable only once in any 12 month period	30.4	34.45
12003	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	40.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Skin prick testing for food and latex allergens, including all allergens tested on the same day, not being a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies	30.4	34.45
12004	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	61.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Skin testing for medication allergens (antibiotics or non-general anaesthetics agents) and venoms (including prick testing and intradermal testing with a number of dilutions), including all allergens tested on the same day, not being a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies	45.95	52.1
12005	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Skin testing: (a) performed by or on behalf of a specialist or consultant physician in the practice of the specialist or consultant physician's specialty; and (b) for agents used in the perioperative period (including prick testing and intradermal testing with a number of dilutions), to investigate anaphylaxis in a patient with a history of prior anaphylactic reaction or cardiovascular collapse associated with the administration of an anaesthetic agent, including all allergens tested on the same day; and (d) not being a service associated with a service to which item 12000, 12001, 12002, 12003, 12012, 12017, 12021, 12022 or 12024 applies	61.8	70.05
12012	1/11/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	21.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Epicutaneous patch testing in the investigation of allergic dermatitis using not more than 25 allergens	16.25	18.45
12017	1/11/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	73.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Epicutaneous patch testing in the investigation of allergic dermatitis using more than 25 allergens but not more than 50 allergens	54.85	62.15
12021	1/11/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	120.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 50 allergens but not more than 75 allergens	90.15	102.15
12022	1/11/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	141.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 75 allergens but not more than 100 allergens	105.85	119.95
12024	1/11/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	160.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 100 allergens	120.6	136.65
12200	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	38.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COLLECTION OF SPECIMEN OF SWEAT by iontophoresis	29.05	32.9
12201	1/05/2004	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2004	1/07/2021	2489.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	Administration, by a specialist or consultant physician in the practice of the specialist's or consultant physician's specialty, of thyrotropin alfa-rch (recombinant human thyroid-stimulating hormone), and arranging services to which both items 61426 and 66650 apply, for the detection of recurrent well-differentiated thyroid cancer in a patient if: (a) the patient has had a total thyroidectomy and 1 ablative dose of radioactive iodine; and (b) the patient is maintained on thyroid hormone therapy; and (c) the patient is at risk of recurrence; and (d) on at least 1 previous whole body scan or serum thyroglobulin test when withdrawn from thyroid hormone therapy, the patient did not have evidence of well-differentiated thyroid cancer; and (e) either: (i) withdrawal from thyroid hormone therapy resulted in severe psychiatric disturbances when hypothyroid; or (ii) withdrawal is medically contra-indicated because the patient has: (a) unstable coronary artery disease; or (b) hypopituitarism; or (c) a high risk of relapse or exacerbation of a previous severe psychiatric illness applicable once only in a 12 month period	1867.4	2401.95
12203	1/12/1991	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	611.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Overnight diagnostic assessment of sleep, for at least 6 hours, for a patient aged 18 years or more, to confirm diagnosis of a sleep disorder, if: (a) either: (i) the patient has been referred by a medical practitioner to a qualified adult sleep medicine practitioner or a consultant respiratory physician who has determined that the patient has a high probability for symptomatic, moderate to severe obstructive sleep apnoea based on a STOP-Bang score of3 or more, an OSA50 score of 5 or more or a high risk score on the Berlin Questionnaire, and an Epworth Sleepiness Scale score of 8 or more; or (ii) following professional attendance on the patient (either face-to-face or by video conference) by a qualified adult sleep medicine practitioner or a consultant respiratory physician, the qualified adult sleep medicine practitioner or consultant respiratory physician determines that assessment is necessary to confirm the diagnosis of a sleep disorder; and (b) the overnight diagnostic assessment is performed to investigate: (i) suspected obstructive sleep apnoea syndrome where the patient is assessed as not suitable for an unattended sleep study; or (ii) suspected central sleep apnoea syndrome; or (iii) suspected sleep hypoventilation syndrome; or (iv) suspected sleep-related breathing disorders in association with non-respiratory co-morbid conditions including heart failure, significant cardiac arrhythmias, neurological disease, acromegaly or hypothyroidism; or (v) unexplained hypersomnolence which is not attributed to inadequate sleep hygiene or environmental factors; or (vi) suspected parasomnia or seizure disorder where clinical diagnosis cannot be established on clinical features alone (including associated atypical features, vigilance behaviours or failure to respond to conventional therapy); or (vii) suspected sleep-related movement disorder, where the diagnosis of restless legs syndrome is not evident on clinical assessment; and (c) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (d) there is continuous monitoring and recording, performed in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement (chest and abdomen); (ix) position; and (x) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw	458.85	523.9
12204	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	611.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Overnight assessment of positive airway pressure, for at least 8 hours, for a patient aged 18 years or more, if: (a) the necessity for an intervention sleep study is determined by a qualified adult sleep medicine practitioner or consultant respiratory physician where a diagnosis of a sleep-related breathing disorder has been made; and (b) the patient has not undergone positive airway pressure therapy in the previous 6 months; and (c) following professional attendance on the patient by a qualified adult sleep medicine practitioner or a consultant respiratory physician (either face-to-face or by video conference), the qualified adult sleep medicine practitioner or consultant respiratory physician establishes that the sleep-related breathing disorder is responsible for the patient's symptoms; and (d) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (e) there is continuous monitoring and recording, performed in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement; (ix) position; and (f) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (g) interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (h) the overnight assessment is not provided to the patient on the same occasion that a service mentioned in any of items11000, 11003, 11004, 11005, 11503, 11704, 11705, 11707, 11713, 11714, 11716,11717, 11723, 11735or 12250 is provided to the patient Applicable only once in any 12 month period	458.85	523.9
12205	1/11/2018	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	611.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Follow-up study for a patient aged 18 years or more with a sleep-related breathing disorder, following professional attendance on the patient by a qualified adult sleep medicine practitioner or consultant respiratory physician (either face-to-face or by video conference), if: (a) any of the following subparagraphs applies: (i) there has been a recurrence of symptoms not explained by known or identifiable factors such as inadequate usage of treatment, sleep duration or significant recent illness; (ii) there has been a significant change in weight or changes in co-morbid conditions that could affect sleep-related breathing disorders, and either means of assessing treatment efficacy (including review of data stored by a therapy device used by the patient) are unavailable or have been equivocal; (iii) the patient has undergone a therapeutic intervention (including, but not limited to, positive airway pressure, upper airway surgery, positional therapy, appropriate oral appliance, weight loss of more than 10% in the previous 6 months or oxygen therapy), and there is either clinical evidence of sub-optimal response or uncertainty about control of sleep-disordered breathing; and (b) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (c) there is continuous monitoring and recording, performed in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement (chest and abdomen); (ix) position; and (d) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (e) interpretation and preparation of a permanent report is provided by a qualifiedadult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (f) the follow-up study is not provided to the patient on the same occasion that a service mentioned in any of items 11000, 11003, 11004,11005, 11503, 11704, 11705, 11707, 11713, 11714, 11716, 11717, 11723, 11735or 12250 is provided to the patient Applicable only once in any 12 month period	458.85	523.9

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12207	19/06/1997	ITable	2	D1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	611.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Overnight investigation, for a patient aged 18 years or more, for a sleep-related breathing disorder, following professional attendance by a qualified adult sleep medicine practitioner or a consultant respiratory physician (either face-to-face or by video conference), if: (a) the patient is referred by a medical practitioner; and (b) the necessity for the investigation is determined by a qualified adult sleep medicine practitioner before the investigation; and (c) there is continuous monitoring and recording, in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement (chest and abdomen) (ix) position; and (d) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events and assessment of clinically significant alterations in heart rate and limb movement) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the investigation is not provided to the patient on the same occasion that a service mentioned in any of Items 11000, 11003, 11004, 11005, 11503, 11704, 11705, 11707, 11713, 11714, 11716, 11717, 11723, 11735 or 12210 is provided to the patient; and (h) previous studies have demonstrated failure of continuous positive airway pressure or oxygen; and (i) if the patient has severe respiratory failure—a further investigation is indicated in the same 12 month period to which Items12204 and 12205 apply to a service for the patient, for the adjustment or testing, or both, of the effectiveness of a positive pressure ventilatory support device (other than continuous positive airway pressure) in sleep Applicable only once in any 12 month period	458.85	523.9
12208	1/11/2018	ITable	2	D1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	611.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Overnight investigation, for sleep apnoea for at least 8 hours, for a patient aged 18 years or more, if: (a) a qualified adult sleep medicine practitioner or consultant respiratory physician has determined that the investigation is necessary to confirm the diagnosis of a sleep disorder; and (b) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (c) there is continuous monitoring and recording, in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement (chest and abdomen); (ix) position; and (d) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (e) interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (f) a further investigation is indicated in the same 12 month period to which Item12203 applies to a service for the patient because insufficient sleep was acquired, as evidenced by a sleep efficiency of 25% or less, during the previous investigation to which that item applied; and (g) the investigation is not provided to the patient on the same occasion that a service mentioned in any of Items 11000, 11003, 11004, 11005, 11503, 11704, 11705, 11707, 11713, 11714, 11717, 11723, 11735 or 12210 is provided to the patient Applicable only once in any 12 month period	458.85	523.9
12210	1/11/2001	ITable	2	D1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	730.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Overnight paediatric investigation, for at least 8 hours, for a patient less than 12 years of age, if: (a) the patient is referred by a medical practitioner; and (b) the necessity for the investigation is determined by a qualified paediatric sleep medicine practitioner before the investigation; and (c) there is continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following are made, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (d) a sleep technician, or registered nurse with sleep technology training, is in continuous attendance under the supervision of a qualified paediatric sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, and maturation of sleep indices, arousals, respiratory events and assessment of clinically significant alterations in heart rate and body movement) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and report are provided by a qualified paediatric sleep medicine practitioner based on reviewing the direct original recording of polygraphic data from the patient; and (g) the investigation is not provided to the patient on the same occasion that a service to which Item11704, 11705, 11707, 11714, 11716, 11717, 11723 or 11735 applies is provided to the patient For each particular patient—applicable only in relation to each of the first 3 occasions the investigation is performed in any 12 month period	547.75	642.4
12213	1/11/2001	ITable	2	D1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	657.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Overnight paediatric investigation, for at least 8 hours, for a patient aged at least 12 years but less than 18 years, if: (a) the patient is referred by a medical practitioner; and (b) the necessity for the investigation is determined by a qualified sleep medicine practitioner before the investigation; and (c) there is continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following are made, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (d) a sleep technician, or registered nurse with sleep technology training, is in continuous attendance under the supervision of a qualified sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, and maturation of sleep indices, arousals, respiratory events and assessment of clinically significant alterations in heart rate and body movement) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and report are provided by a qualified sleep medicine practitioner based on reviewing the direct original recording of polygraphic data from the patient; and (g) the investigation is not provided to the patient on the same occasion that a service to which Item11704, 11705, 11707, 11714, 11716, 11717, 11723 or 11735 applies is provided to the patient For each particular patient—applicable only in relation to each of the first 3 occasions the investigation is performed in any 12 month period	493.45	570
12215	1/11/2001	ITable	2	D1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	730.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Overnight paediatric investigation, for at least 8 hours, for a patient less than 12 years of age, if: (a) the patient is referred by a medical practitioner; and (b) the necessity for the investigation is determined by a qualified paediatric sleep medicine practitioner before the investigation; and (c) there is continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following are made, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (d) a sleep technician, or registered nurse with sleep technology training, is in continuous attendance under the supervision of a qualified paediatric sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, and maturation of sleep indices, arousals, respiratory events and assessment of clinically significant alterations in heart rate and body movement) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and report are provided by a qualified paediatric sleep medicine practitioner based on reviewing the direct original recording of polygraphic data from the patient; and (g) a further investigation is indicated in the same 12 month period to which Item12210 applies to a service for the patient, for a patient using Continuous Positive Airway Pressure (CPAP) or non-invasive or invasive ventilation, or supplemental oxygen, in either or both of the following circumstances: (i) there is ongoing hypoxia or hypoventilation on the third study to which Item12210 applied for the patient, and further titration of respiratory support is needed to optimise therapy; (ii) there is clear and significant change in clinical status (for example lung function or functional status) or an intervening treatment that may affect ventilation in the period since the third study to which Item12210 applied for the patient, and repeat study is therefore required to determine the need for or the adequacy of respiratory support; and (h) the investigation is not provided to the patient on the same occasion that a service to which Item11704, 11705, 11707, 11714, 11716, 11717, 11723 or 11735 applies is provided to the patient Applicable only once in the same 12 month period to which Item12210 applies	547.75	642.4
12217	1/11/2001	ITable	2	D1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	657.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Overnight paediatric investigation, for at least 8 hours, for a patient aged at least 12 years but less than 18 years, if: (a) the patient is referred by a medical practitioner; and (b) the necessity for the investigation is determined by a qualified sleep medicine practitioner before the investigation; and (c) there is continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following are made, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (d) a sleep technician, or registered nurse with sleep technology training, is in continuous attendance under the supervision of a qualified sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, and maturation of sleep indices, arousals, respiratory events and assessment of clinically significant alterations in heart rate and body movement) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and report are provided by a qualified sleep medicine practitioner based on reviewing the direct original recording of polygraphic data from the patient; and (g) a further investigation is indicated in the same 12 month period to which Item12213 applies to a service for the patient, for a patient using Continuous Positive Airway Pressure (CPAP) or non-invasive or invasive ventilation, or supplemental oxygen, in either or both of the following circumstances: (i) there is ongoing hypoxia or hypoventilation on the third study to which Item12213 applied for the patient, and further titration is needed to optimise therapy; (ii) there is clear and significant change in clinical status (for example lung function or functional status) or an intervening treatment that may affect ventilation in the period since the third study to which Item12213 applied for the patient, and repeat study is therefore required to determine the need for or the adequacy of respiratory support; and (h) the investigation is not provided to the patient on the same occasion that a service to which Item11704, 11705, 11707, 11714, 11716, 11717, 11723 or 11735 applies is provided to the patient Applicable only once in the same 12 month period to which Item12213 applies	493.45	570

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12250	1/10/2008	ITable1	2	D1	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	C	1/11/2012	1/07/2021	348.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/03/2021	Overnight investigation of sleep for at least 8 hours of a patient aged 18 years or more to confirm diagnosis of obstructive sleep apnoea, if: (a) either: (i) the patient has been referred by a medical practitioner to a qualified adult sleep medicine practitioner or a consultant respiratory physician who has determined that the patient has a high probability for symptomatic, moderate to severe obstructive sleep apnoea based on a STOP-Bang score of3 or more, an OSAGI score of 5 or more or a high risk score on the Berlin Questionnaire, and an Epworth Sleepiness Scale score of 8 or more; or (ii) following professional attendance on the patient (either face-to-face or by video conference) by a qualified adult sleep medicine practitioner or a consultant respiratory physician, the qualified adult sleep medicine practitioner or consultant respiratory physician determines that investigation is necessary to confirm the diagnosis of obstructive sleep apnoea; and (b) during a period of sleep, there is continuous monitoring and recording, performed in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) continuous ECG; (iv) continuous EEG; (v) EOG; (vi) oxygen saturation; (vii) respiratory effort; and (c) the investigation is performed under the supervision of a qualified adult sleep medicine practitioner; and (d) either: (i) the equipment is applied to the patient by a sleep technician; or (ii) if this is not possible—the reason it is not possible for the sleep technician to apply the equipment to the patient is documented and the patient is given instructions on how to apply the equipment by a sleep technician supported by written instructions; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events and cardiac abnormalities) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the investigation is not provided to the patient on the same occasion that a service mentioned in any of Items11000, 11003, 11004, 11005, 11503, 11704, 11705, 11707, 11714, 11716, 11717, 11721, 11726 and 12203 is provided to the patient Applicable only once in any 12 month period	261.65	296.55
12254	1/11/2018	ITable1	2	D1	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	950.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Multiple sleep latency test for the assessment of unexplained hypersomnolence in a patient aged 18 years or more, if: (a) a qualified adult sleep medicine practitioner or neurologist determines that testing is necessary to confirm the diagnosis of a central disorder of hypersomnolence or to determine whether the eligibility criteria under the pharmaceutical benefits scheme for drugs relevant to treat that condition are met; and (b) an overnight diagnostic assessment of sleep is performed for at least 8 hours, with continuous monitoring and recording, in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement (chest and abdomen); (ix) position; and (c) immediately following the overnight investigation a daytime investigation is performed where at least 4 nap periods are conducted, during which there is continuous recording of EEG, EMG, EOG and ECG; and (d) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the diagnostic assessment is not provided to the patient on the same occasion that a service described in Item 11003, 12203, 12204, 12205, 12208, 12250 or 12258 is provided to the patient Applicable only once in a 12 month period	713.05	862.8
12258	1/11/2018	ITable1	2	D1	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	950.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Maintenance of wakefulness test for the assessment of the ability to maintain wakefulness in a patient aged 18 years or more, if: (a) a qualified adult sleep medicine practitioner or neurologist determines that testing is necessary to objectively confirm the ability to maintain wakefulness; and (b) an overnight diagnostic assessment of sleep is performed for at least 8 hours, with continuous monitoring and recording, in accordance with current professional guidelines, of the following measures: (i) airflow; (ii) continuous EMG; (iii) anterior tibial EMG; (iv) continuous ECG; (v) continuous EEG; (vi) EOG; (vii) oxygen saturation; (viii) respiratory movement (chest and abdomen); (ix) position; and (c) immediately following the overnight investigation, a daytime investigation is performed where at least 4 wakefulness trials are conducted, during which there is continuous recording of EEG, EMG, EOG and ECG; and (d) a sleep technician is in continuous attendance under the supervision of a qualified adult sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f)interpretation and preparation of a permanent report is provided by a qualified adult sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the diagnostic assessment is not provided to the patient on the same occasion that a service described in Item 11003, 12203, 12204, 12205, 12208, 12250 or 12254 is provided to the patient Applicable only once in a 12 month period	713.05	862.8
12261	1/11/2018	ITable1	2	D1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	996.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Multiple sleep latency test for the assessment of unexplained hypersomnolence in a patient aged at least 12 years but less than 18 years, if: (a) a qualified sleep medicine practitioner determines that testing is necessary to confirm the diagnosis of a central disorder of hypersomnolence or to determine whether the eligibility criteria under the pharmaceutical benefits scheme for drugs relevant to treat that condition are met; and (b) an overnight diagnostic assessment of sleep is performed for at least 8 hours, with continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (c) immediately following the overnight investigation, a daytime investigation is performed where at least 4 nap periods are conducted, during which there is continuous recording of EEG, EMG, EOG and ECG; and (d) a sleep technician is in continuous attendance under the supervision of a qualified sleep medicine practitioner; and (e) polygraphic records are: (i) analysed (for assessment of sleep stage, and maturation of sleep indices, arousals, respiratory events and assessment of clinically significant alterations in heart rate and body movement) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f) interpretation and preparation of a permanent report is provided by a qualified sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the diagnostic assessment is not provided to the patient on the same occasion that a service described in Item 11003, 12213, 12217 or 12265 is provided to the patient Applicable only once in a 12 month period	747.65	908.95
12265	1/11/2018	ITable1	2	D1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	996.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Maintenance of wakefulness test for the assessment of the ability to maintain wakefulness in a patient aged at least 12 years but less than 18 years, if: (a)a qualified sleep medicine practitioner determines that testing to objectively confirm the ability to maintain wakefulness is necessary; and (b) an overnight diagnostic assessment of sleep is performed for at least 8 hours, with continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (c)immediately following the overnight investigation, a daytime investigation is performed where at least 4 wakefulness trials are conducted, during which there is continuous recording of EEG, EMG, EOG and ECG; and (d)a sleep technician is in continuous attendance under the supervision of a qualified sleep medicine practitioner; and (e)polygraphic records are: (i)analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii) stored for interpretation and preparation of a report; and (f)interpretation and preparation of a permanent report is provided by a qualified sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the diagnostic assessment is not provided to the patient on the same occasion that a service described in Item 11003, 12213, 12217 or 12261 is provided to the patient Applicable only once in a 12 month period	747.65	908.95
12268	1/11/2018	ITable1	2	D1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	1069.2	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Multiple sleep latency test for the assessment of unexplained hypersomnolence for a patient less than 12 years of age, if: (a) a qualified paediatric sleep-medicine practitioner determines that testing is necessary to confirm the diagnosis of a central disorder of hypersomnolence or to determine whether the eligibility criteria under the pharmaceutical benefits scheme for drugs relevant to treat that condition are met; and (b) an overnight diagnostic assessment of sleep is performed for at least 8 hours, with continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (c)immediately following the overnight investigation, a daytime investigation is performed where at least 4 nap periods are conducted, during which there is continuous recording of EEG, EMG, EOG and ECG; and (d) a sleep technician is in continuous attendance under the supervision of a qualified paediatric sleep medicine practitioner; and (e)polygraphic records are: (i)analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii)stored for interpretation and preparation of a report; and (f)interpretation and preparation of a permanent report is provided by a qualified paediatric sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the diagnostic assessment is not provided to the patient on the same occasion that a service described in Item 11003, 12210, 12215 or 12272 is provided to the patient Applicable only once in a 12 month period	801.9	981.3
12272	1/11/2018	ITable1	2	D1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	1069.2	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/10/2020	Maintenance of wakefulness test for the assessment of the ability to maintain wakefulness for a patient less than 12 years of age, if: (a)a qualified paediatric sleep-medicine practitioner determines that testing to objectively confirm the ability to maintain wakefulness is necessary; and (b) an overnight diagnostic assessment of sleep is performed for at least 8 hours, with continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of the following, in accordance with current professional guidelines: (i) airflow; (ii) continuous EMG; (iii) ECG; (iv) EEG (with a minimum of 4 EEG leads or, in selected investigations, a minimum of 6 EEG leads); (v) EOG; (vi) oxygen saturation; (vii) respiratory movement of rib and abdomen (whether movement of rib is recorded separately from, or together with, movement of abdomen); (viii) measurement of carbon dioxide (either end-tidal or transcutaneous); and (c)immediately following the overnight investigation, a daytime investigation is performed where at least 4 wakefulness trials are conducted, during which there is continuous recording of EEG, EMG, EOG and ECG; and (d)a sleep technician is in continuous attendance under the supervision of a qualified paediatric sleep medicine practitioner; and (e) polygraphic records are: (i)analysed (for assessment of sleep stage, arousals, respiratory events, cardiac abnormalities and limb movements) with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute; and (ii)stored for interpretation and preparation of a report; and (f)interpretation and preparation of a permanent report is provided by a qualified paediatric sleep medicine practitioner with personal direct review of raw data from the original recording of polygraphic data from the patient; and (g) the diagnostic assessment is not provided to the patient on the same occasion that a service described in Item 11003, 12210, 12215 or 12268 is provided to the patient Applicable only once in a 12 month period	801.9	981.3

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12306	31/10/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2012	1/07/2021	106.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Bone densitometry, using dual energy X-ray absorptiometry, involving the measurement of 2 or more sites (including interpretation and reporting), for: (a) confirmation of a presumptive diagnosis of low bone mineral density made on the basis of one or more fractures occurring after minimal trauma; or (b) monitoring of low bone mineral density proven by bone densitometry at least 12 months previously; other than a service associated with a service to which item12312, 12315 or 12321 applies For any particular patient, once only in a 24 month period	79.95	90.6
12312	31/10/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/08/1996	1/07/2021	106.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Bone densitometry, using dual energy X-ray absorptiometry, involving the measurement of 2 or more sites (including interpretation and reporting) for diagnosis and monitoring of bone loss associated with one or more of the following: (a) prolonged glucocorticoid therapy; (b) any condition associated with excess glucocorticoid secretion; (c) male hypogonadism; (d) female hypogonadism lasting more than 6 months before the age of 45; other than a service associated with a service to which item12306, 12315 or 12321 applies For any particular patient, once only in a 12 month period	79.95	90.6
12315	31/10/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/08/1996	1/07/2021	106.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Bone densitometry, using dual energy X-ray absorptiometry, involving the measurement of 2 or more sites (including interpretation and reporting) for diagnosis and monitoring of bone loss associated with one or more of the following conditions: (a) primary hyperparathyroidism; (b) chronic liver disease; (c) chronic renal disease; (d) any proven malabsorptive disorder; (e) rheumatoid arthritis; (f) any condition associated with thyroxine excess; other than a service associated with a service to which item12306, 12312 or 12321 applies For any particular patient, once only in a 24 monthperiod	79.95	90.6
12320	1/11/2017	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2017	1/07/2021	106.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Bone densitometry, using dual energy X-ray absorptiometry or quantitative computed tomography, involving the measurement of 2 or more sites (including interpretation and reporting) for measurement of bone mineral density, if (a) the patient is 70 years of age or over, and (b) either: (i) the patient has not previously had bone densitometry; or (ii) the t-score for the patient's bone mineral density is -1.5 or more; other than a service associated with a service to which item 12306, 12312, 12315, 12321 or 12322 applies For any particular patient, once only in a 5-year period	79.95	90.6
12321	31/10/1995	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/08/1996	1/07/2021	106.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Bone densitometry, using dual energy X-ray absorptiometry, involving the measurement of 2 or more sites at least 12 months after a significant change in therapy (including interpretation and reporting), for: (a) established low bone mineral density; or (b) confirming a presumptive diagnosis of low bone mineral density made on the basis of one or more fractures occurring after minimal trauma; other than a service associated with a service to which item12306, 12312 or 12315 applies For any particular patient, once only in a 12 monthperiod	79.95	90.6
12322	1/11/2017	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2017	1/07/2021	106.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Bone densitometry, using dual energy X-ray absorptiometry or quantitative computed tomography, involving the measurement of 2 or more sites (including interpretation and reporting) for measurement of bone mineral density, if (a) the patient is 70 years of age or over; and (b) the t-score for the patient's bone mineral density is less than -1.5 but more than -2.5; other than a service associated with a service to which item 12306, 12312, 12315, 12320 or 12321 applies For any particular patient, once only in a 2 year period	79.95	90.6
12325	1/11/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2016	1/07/2021	52	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Assessment of visual acuity and bilateral retinal photography with a non-mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if: (a)the patient is of Aboriginal and Torres Strait Islander descent, and (b)the assessment is performed by the medical practitioner (other than an optometrist or ophthalmologist) providing the primary glycaemic management of the patient's diabetes; and (c)the item 12325 and item 12326 have not applied to the patient in the preceding 12 months; and (d)the patient does not have: (i)an existing diagnosis of diabetic retinopathy; or (ii)visual acuity of less than 6/12 in either eye; or (iii) a difference of more than 2 lines of vision between the 2 eyes at the time of presentation	39	44.2
12326	1/11/2016	[Table]	2	D1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2016	1/07/2021	52	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Assessment of visual acuity and bilateral retinal photography with a non-mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if: (a)the assessment is performed by the medical practitioner (other than an optometrist or ophthalmologist) providing the primary glycaemic management of the patient's diabetes; and (b)the item 12325 have not applied to the patient in the preceding 24 months; and (c)the patient does not have: (i)an existing diagnosis of diabetic retinopathy; or (ii)visual acuity of less than 6/12 in either eye; or (iii)a difference of more than 2 lines of vision between the 2 eyes at the time of presentation	39	44.2
12500	1/12/1991	[Table]	2	D2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	225.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLOOD VOLUME ESTIMATION	169.05	191.6
12524	1/12/1991	[Table]	2	D2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	164.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL FUNCTION TEST (without imaging procedure)	123.6	140.05
12527	1/12/1991	[Table]	2	D2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	88.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL FUNCTION TEST (with imaging and at least 2 blood samples)	66.3	75.15
12533	1/07/1995	[Table]	2	D2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	88.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	CARBON-LABELLED UREA BREATH TEST using oral C-13 or C-14 urea, performed by a specialist or consultant physician, including the measurement of exhaled 13CO2 or 14CO2, for either:- (a)the confirmation of Helicobacter pylori colonisation, OR (b)the monitoring of the success of eradication of Helicobacter pylori in patients with peptic ulcer disease. not being a service to which 66900 applies	66.1	74.9
13015	1/11/2001	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2001	1/07/2021	265.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	HYPERBARIC OXYGEN THERAPY, for treatment of localised non-neurological soft tissue radiation injuries excluding radiation-induced soft tissue lymphoedema of the arm after treatment for breast cancer, performed in a comprehensive hyperbaric medicine facility, under the supervision of a medical practitioner qualified in hyperbaric medicine, for a period in the hyperbaric chamber of between 1 hour 30 minutes and 3 hours, including any associated attendance.	198.85	225.35
13020	1/07/1996	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1996	1/07/2021	269.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2002	HYPERBARIC OXYGEN THERAPY, for treatment of decompression illness, gas gangrene, air or gas embolism; diabetic wounds including diabetic gangrene and diabetic foot ulcers; necrotising soft tissue infections including necrotising fasciitis or Fournier's gangrene; or for the prevention and treatment of osteoradionecrosis, performed in a comprehensive hyperbaric medicine facility, under the supervision of a medical practitioner qualified in hyperbaric medicine, for a period in the hyperbaric chamber of between 1 hour 30 minutes and 3 hours, including any associated attendance	202.05	228.95
13025	1/07/1996	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1996	1/07/2021	120.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	HYPERBARIC OXYGEN THERAPY for treatment of decompression illness, air or gas embolism, performed in a comprehensive hyperbaric medicine facility, under the supervision of a medical practitioner qualified in hyperbaric medicine, for a period in the hyperbaric chamber greater than 3 hours, including any associated attendance - per hour (or part of an hour)	90.3	102.3
13030	1/07/1996	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1996	1/07/2021	127.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	HYPERBARIC OXYGEN THERAPY performed in a comprehensive hyperbaric medicine facility where the medical practitioner is pressurised in the hyperbaric chamber for the purpose of providing continuous life saving emergency treatment, including any associated attendance - per hour (or part of an hour)	127.55	144.55
13100	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	142.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUPERVISION IN HOSPITAL by a medical specialist ofhaemodialysis, haemofiltration, haemoperfusion or peritoneal dialysis, including all professional attendances, where the total attendance time on the patient by the supervising medical specialist exceeds 45 minutes in 1 day	106.65	120.9
13103	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	74.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUPERVISION IN HOSPITAL by a medical specialist ofhaemodialysis, haemofiltration, haemoperfusion or peritoneal dialysis, including all professional attendances, where the total attendance time on the patient by the supervising medical specialist does not exceed 45 minutes in 1 day	55.6	63
13104	1/11/2005	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	B	1/11/2005	1/07/2021	152.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Planning and management of home dialysis (either haemodialysis or peritoneal dialysis), by a consultant physician in the practice of his or her specialty of renal medicine, for a patient with end-stage renal disease, and supervision of that patient on self-administered dialysis, to a maximum of 12 claims per year		130.85
13105	1/11/2018	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	E	1/11/2018	1/07/2021	615.95	615.95	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Haemodialysis for a patient with end-stage renal disease if: (a) the service is provided by a registered nurse, an Aboriginal health worker or an Aboriginal and Torres Strait Islander health practitioner on behalf of a medical practitioner; and (b) the service is supervised by the medical practitioner (either in person or remotely); and (c) the patient's care is managed by a nephrologist; and (d) the patient is treated or reviewed by the nephrologist every 3 to 6 months (either in person or remotely); and (e) the patient is not an admitted patient of a hospital; and (f) the service is provided in a Modified Monash 7 area		
13106	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	126.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DECLOTTING OF AN ARTERIOVENOUS SHUNT	94.75	107.4
13109	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	236.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INDWELLING PERITONEAL CATHETER (Tenckhoff or similar) FOR DIALYSISINSERTION AND FIXATION OF (Anaes.)	177.75	201.45 Y
13110	1/05/1997	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/05/1997	1/07/2021	237.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	INDWELLING PERITONEAL CATHETER (Tenckhoff or similar) FOR DIALYSIS , removal of (including catheter cuff(s) (Anaes.)	178.35	202.1 Y
13200	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	F	C	1/12/1991	1/07/2021	3236.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	ASSISTED REPRODUCTIVE TECHNOLOGIES SUPEROVULATED TREATMENT CYCLE PROCEEDING TO OOCYTE RETRIEVAL, involving the use of drugs to induce superovulation, and including quantitative estimation of hormones, semen preparation, ultrasound examinations, all treatment counselling and embryology laboratory services but excluding artificial insemination or transfer of frozen embryos or donated embryos or ova or a service to which item13201, 13202, 13203, 13218 applies - being services rendered during 1 treatment cycle - INITIAL cycle in a single calendar year	2427.6	3148.85
13201	1/01/2010	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	F	C	1/01/2010	1/07/2021	3027.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	ASSISTED REPRODUCTIVE TECHNOLOGIES SUPEROVULATED TREATMENT CYCLE PROCEEDING TO OOCYTE RETRIEVAL, involving the use of drugs to induce superovulation, and including quantitative estimation of hormones, semen preparation, ultrasound examinations, all treatment counselling and embryology laboratory services but excluding artificial inseminiation or transfer of frozen embryos or donated embryos or ova or a service to which item12200, 13202, 13203, 13218 applies - being services rendered during 1 treatment cycle - each cycle SUBSEQUENT to the first in a single calendar year	2270.75	2939.75
13202	1/01/2010	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	F	C	1/01/2010	1/07/2021	484.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	ASSISTED REPRODUCTIVE TECHNOLOGIES SUPEROVULATED TREATMENT CYCLE THAT IS CANCELLED BEFORE OOCYTE RETRIEVAL, involving the use of drugs to induce superovulation and including quantitative estimation of hormones, semen preparation, ultrasound examinations, but excluding artificial insemination or transfer of frozen embryos or donated embryos or ova or a service to which item 12200, 13201, 13203, 13218, applies being services rendered during 1 treatment cycle	363.3	411.75
13203	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	F	C	1/12/1991	1/07/2021	506.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Ovulation monitoring services for artificial insemination or gonadotrophin, stimulated-ovulation induction, including quantitative estimation of hormones and ultrasound examinations, being services rendered during one treatment cycle but excluding a service to which item 12200, 13201, 13202, 13212, 13215 or 13218 applies	379.85	430.5
13207	1/11/2021	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2021	1/11/2021	115	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Biopsy of an embryo, from a patient who is eligible for a service described in item 73384 under clause 2.7.3A of the pathology services table (see PR.7.1), for the purpose of providing a sample for pre-implantation genetic testing—applicable to one or more tests performed in one assisted reproductive treatment cycle	86.25	97.75
13209	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	F	C	1/12/1991	1/07/2021	88.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2010	PLANNING and MANAGEMENT of a referred patient by a specialist for the purpose of treatment by assisted reproductive technologies or for artificial insemination payable once only during 1 treatment cycle	66.15	74.95

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13212	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	368.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Oocyte retrieval for the purpose of assisted reproductive technologies–only if rendered in connection with a service to which item 13200 or 13201 applies (Anaes.)	276.6	313.5	Y
13215	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	115.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Transfer of embryos or both ova and sperm to the uterus or Fallopian tubes, excluding artificial insemination–only if rendered in connection with a service to which Item 13200, 13201 or 13218 applies, being services rendered in one treatment cycle (Anaes.)	86.75	98.35	Y
13218	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	825.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	PREPARATION of frozen or donated embryos or donated oocytes for transfer to the uterus or fallopian tubes, by any means and including quantitative estimation of hormones and all treatment counselling but excluding artificial insemination services rendered in 1 treatment cycle and excluding a service to which item 13200, 13201, 13202, 13203, 13212 applies (Anaes.)	619.3	737.8	Y
13221	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	52.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Preparation of semen for the purpose of artificial insemination–only if rendered in connection with a service to which Item 13203 applies	39.6	46.9	
13241	1/03/2022	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	884.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Open surgical testicular sperm retrieval, unilateral, using operating microscope, including the exploration of scrotal contents, with biopsy, for the purposes of intracytoplasmic sperm injection, for male factor infertility, not being a service associated with a service to which item 13218 or 37604 applies (Ki) (Anaes.)	663.35		Y
13251	1/05/2007	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/05/2007	1/07/2021	424.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2010	INTRACYTOPLASMIC SPERM INJECTION for the purposes of assisted reproductive technologies, for male factor infertility, excluding a service to which item 13203 or 13218 applies	326.2	369.7	
13260	1/11/2018	[Table]	3	T1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	C	1/11/2018	1/07/2021	431.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Processing and cryopreservation of semen for fertility preservation treatment before or after completion of gonadotoxic treatment for malignant or non-malignant conditions, in a post-pubertal male in Tanner stages II-V, up to 60 years old, if the patient is referred by a specialist or consultant physician, initial cryopreservation of semen (not including storage) - one of a maximum of two semen collection cycles per patient in a lifetime.	323.85	367.05	
13290	1/05/1997	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	212.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	SEMEN, collection of, from a patient with spinal injuries or medically induced impotence, for the purposes of analysis, storage or assisted reproduction, bya medical practitioner using a vibrator or electro-ejaculation device including catheterisation and drainage of bladder where required	159.4	180.65	
13300	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	59.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	UMBILICAL OR SCALP VEIN CATHETERISATION in a NEONATE with or without infusion; or cannulation of a vein in a neonate	44.45	50.4	
13303	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	87.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	UMBILICAL ARTERY CATHETERISATION with or without infusion	65.9	74.7	
13306	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	347.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLOOD TRANSFUSION with venesection and complete replacement of blood, including collection from donor	260.75	295.55	
13309	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	296.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLOOD TRANSFUSION with venesection and complete replacement of blood, using blood already collected	222.3	251.95	
13312	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	29.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLOOD for pathology test, collection of, BY FEMORAL OR EXTERNAL JUGULAR VEIN PUNCTURE IN INFANTS	22.2	25.2	
13318	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	236.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VEIN CATHETERISATION - Subject to Note 2 in a patient under 12 years of age (Anaes.)	177.5	201.2	Y
13319	1/05/1997	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	236.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	CENTRAL VEIN CATHETERISATION in a neonate via peripheral vein (Anaes.)	177.5	201.2	Y
13400	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	100.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Restoration of cardiac rhythm by electrical stimulation (cardioversion), other than in the course of cardiac surgery or cardiac arrest	75.6		Y
13506	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	191.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	GASTROESOPHAGEAL balloon intubation, for control of bleeding from gastric oesophageal varices	144	163.2	
13700	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	346.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HARVESTING OF HOMOLOGOUS (including allogeneic) or AUTOLOGOUS bone marrow for the purpose of transplantation (Anaes.)	260.1	294.8	Y
13703	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	124.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Defrosting of blood, including collection from donor, when used for intra-operative normovolaemic haemodilution	93.25	105.7	
13706	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	86.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	TRANSFUSION OF BLOOD or bone marrow already collected	65.05	73.7	
13750	1/07/1996	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	142.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	THERAPEUTIC HAEMAPHERESIS for the removal of plasma or cellular (or both) elements of blood, utilising continuous or intermittent flow techniques; including morphological tests for cell counts and viability studies, if performed; continuous monitoring of vital signs, fluid balance, blood volume and other parameters with continuous registered nurse attendance under the supervision of a consultant physician, not being a service associated with a service to which item 13755 applies -payable once per day	106.65	120.9	
13755	1/07/1996	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	142.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	DONOR HAEMAPHERESIS for the collection of blood products for transfusion, utilising continuous or intermittent flow techniqes; including morphological tests for cell counts and viability studies; continuous monitoring of vital signs, fluid balance, blood volume and other parameters; with continuous registered nurse attendance under the supervision of a consultant physician; not being a service associated with a service to which item 13750 applies - payable once per day	106.65	120.9	
13757	1/05/1997	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	75.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	THERAPEUTIC VENESECTION for the management of haemochromatosis, polycythemia vera or porphyria cutanea tanda	56.95	64.55	
13760	1/07/1996	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	793.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	In vitro processing with cryopreservation of bone marrow or peripheral blood, for autologous stem cell transplantation for a patient receiving high-dose chemotherapy for management of: (a) aggressive malignancy; or (b) malignancy that has proven refractory to prior treatment	595.15	705.6	
13761	1/03/2022	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2022	1/03/2022	1908.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Extracorporeal photopheresis for the treatment of chronic graft-versus-host disease, if: (a) the person is: (i) has received allogeneic haematopoietic stem cell transplantation; and (ii) has been diagnosed with chronic graft versus host disease following the transplantation; and (iii) steroid treatment is clinically unsuitable as the disease is steroid refractory or the person is steroid-dependent or steroid-intolerant; and (b) the person has not previously received an extracorporeal photopheresis treatment cycle; and (c) the service is delivered using an integrated, closed extracorporeal photopheresis system; and (d) the service is provided in combination with the use of methoxalen that is listed on the Pharmaceutical Benefits Scheme; and (e) the service is provided by, or on behalf of, a specialist or consultant physician who: (i) is practising in the speciality of haematology or oncology; and (ii) has experience with allogeneic bone marrow transplantation. Applicable once per treatment cycle	1431.3	1820.45	
13762	1/03/2022	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2022	1/03/2022	1908.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Extracorporeal photopheresis for the treatment of chronic graft-versus-host disease, if: (a) the person is: (i) has received allogeneic haematopoietic stem cell transplantation; and (ii) has been diagnosed with chronic graft versus host disease following the transplantation; and (iii) steroid treatment is clinically unsuitable as the disease is steroid refractory or the person is steroid-dependent or steroid-intolerant; and (b) the person has previously received an extracorporeal photopheresis treatment cycle and had a partial or complete response in at least one organ in response to treatment; and (c) the person requires further extracorporeal photopheresis; and (d) the service is delivered using an integrated, closed extracorporeal photopheresis system; and (e) the service is provided in combination with the use of methoxalen that is listed on the Pharmaceutical Benefits Scheme; and (f) the service is provided by, or on behalf of, a specialist or consultant physician who: (i) is practising in the speciality of haematology or oncology; and (ii) has experience with allogeneic bone marrow transplantation. Applicable once per treatment cycle	1431.3	1820.45	
13815	1/07/1993	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	118.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Central vein catheterisation, including under ultrasound guidance where clinically appropriate, by percutaneous or open exposure other than a service to which item 13118 applies (Anaes.) No separate ultrasound item is payable with this item. (Anaes.)	88.7	100.55	Y
13818	1/07/1993	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	118.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	RIGHT HEART BALLOON CATHETER, insertion of, including pulmonary wedge pressure and cardiac output measurement (Anaes.)	88.75	100.6	Y
13830	1/07/1993	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	78.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	INTRACRANIAL PRESSURE, monitoring of, by intraventricular or subdural catheter, subarachnoid bolt or similar, by a specialist or consultant physician - each day	58.8	66.65	
13832	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	917.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Peripheral cannulation, including under ultrasound guidance where clinically appropriate, for veno-arterial cardiopulmonary extracorporeal life support No separate ultrasound item is payable with this item	688.15	829.6	
13834	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	513.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Veno–arterial cardiopulmonary extracorporeal life support, management of—the first day	385.25	436.65	
13835	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	119.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Veno–arterial cardiopulmonary extracorporeal life support, management of—each day after the first	89.65	101.6	
13837	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	513.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Veno-venous pulmonary extracorporeal life support, management of—the first day	385.25	436.65	
13838	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	119.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Veno-venous pulmonary extracorporeal life support, management of—each day after the first	89.65	101.6	
13839	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	23.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	ARTERIAL PUNCTURE and collection of blood for diagnostic purposes	18	20.4	
13840	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	614.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Peripheral cannulation, including under ultrasound guidance where clinically appropriate, for veno-venous pulmonary extracorporeal life support No separate ultrasound item is payable with this item	461.05	526.8	
13842	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	97.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Intra-arterial cannulation, including under ultrasound guidance where clinically appropriate, for the purpose of intra-arterial pressure monitoring or arterial blood sampling (or both) No separate ultrasound item is payable with this item	73.05	82.75	
13848	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	142.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Counterpulsation by intra-aortic balloon-management including associated consultations and monitoring of parameters by means of full haemodynamic assessment and management on several occasions on a day – each day	121.85	138.1	
13851	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	513.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Ventricular assist device, management of,for a patient admitted to an intensive care unit for implantation of the device or for complications arising from implantation or management of the device –first day	385.25	436.65	
13854	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	119.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Ventricular assist device, management of, for a patient admitted to an intensive care unit, including management ofcomplications arising from implantation or management of the device – each day after the first day	89.65	101.6	
13857	1/11/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	152.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	AIRWAY ACCESS, ESTABLISHMENT OF AND INITIATION OF MECHANICAL VENTILATION (other than in the context of an anaesthetic for surgery), outside an Intensive Care Unit, for the purpose of subsequent ventilatory support in an Intensive Care Unit	114.3	129.5	
13870	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	376.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	(Note: See para T1.8 of Explanatory Notes to this Category for definition of an Intensive Care Unit) MANAGEMENT of a patient in an Intensive Care Unit by a specialist or consultant physician who is immediately available and exclusively rostered for intensive care – including initial and subsequent attendances, electrocardiographic monitoring, arterial sampling and bladder catheterisation - management on the first day (Ki)	282.6		

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13873	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	279.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	MANAGEMENT of a patient in an Intensive Care Unit by a specialist or consultant physician who is: immediately available and exclusively rostered for intensive care - including all attendances, electrocardiographic monitoring, arterial sampling and bladder catheterisation - management on each day subsequent to the first day (H)	209.65	
13876	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	80	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	CENTRAL VENOUS PRESSURE, pulmonary arterial pressure, systemic arterial pressure or cardiac intracavity pressure, continuous monitoring by indwelling catheter in an Intensive care unit and managed by a specialist or consultant physician who is immediately available and exclusively rostered for intensive care - once only for each type of pressure on any calendar day (up to a maximum of 4 pressures) (H)	60	
13881	1/11/2005	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	152.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	AIRWAY ACCESS, ESTABLISHMENT OF AND INITIATION OF MECHANICAL VENTILATION, in an Intensive Care Unit, not in association with any anaesthetic service, by a specialist or consultant physician for the purpose of subsequent ventilatory support (H)	114.3	
13882	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	119.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	VENTILATORY SUPPORT in an Intensive Care Unit, management of, by invasive means, or by non-invasive means where the only alternative to non-invasive ventilatory support would be invasive ventilatory support, by a specialist or consultant physician who is immediately available and exclusively rostered for intensive care, each day (H)	89.95	
13885	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	159.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	CONTINUOUS ARTERIO VENOUS OR VENO VENOUS HAEMOFILTRATION, in an intensive care unit, management by a specialist or consultant physician who is immediately available and exclusively rostered for intensive care - on the first day (H)	119.95	
13888	1/05/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	80	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	CONTINUOUS ARTERIO VENOUS OR VENO VENOUS HAEMOFILTRATION, in an intensive care unit, management by a specialist or consultant physician who is immediately available and exclusively rostered for intensive care - on each day subsequent to the first day(H)	60	
13899	1/03/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/03/2020	1/07/2021	278.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Preparation of Goals of Care is provided outside of an intensive care unit. Refer to explanatory note TN.1.11 for further information aboutGoals of Care attendance Professional attendance, outside an intensive care unit, for at least 60 minutes spent in preparation of goals of care for a gravely ill patient lacking current goals of care, by especialist in the specialty of intensive care who takes overall responsibility for the preparation of the goals of care for the patient Item 13899 cannot be co-claimed with Item 13870 or Item 13873 on the same day	209.1	236.95
13950	1/11/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	112.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Parenteral administration of one or more antineoplastic agents, including agents used in cytotoxic chemotherapy or monoclonal antibody therapy but not agents used in anti-resorptive bone therapy or hormonal therapy, by or on behalf of a specialist or consultant physician—attendance for one or more episodes of administration Note: The fee for Item 13950 contains a component which covers the accessing of a long-term drug delivery device. TN.1.27 refers	84.3	95.55
14050	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	54.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	UVA or UVB phototherapy administered in a whole body cabinet or hand and foot cabinet including associated consultations other than the initial consultation, if treatment is initiated and supervised by a specialist in the specialty of dermatology. Applicable not more than 150 times in a 12 month period	41.2	46.7
14100	1/11/1995	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1995	1/07/2021	158.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Laser photocoagulation using laser radiation in the treatment of vascular abnormalities of the head or neck, including any associated consultation, if: (i) the abnormality is visible from 3 metres; and (b) photographic evidence demonstrating the need for this service is documented in the patient notes; to a maximum of 6 sessions (including any sessions to which this item or any of items14106 to 14118 apply) in any 12 month period—area	119	134.9 Y
14106	1/11/1995	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	166.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Laser photocoagulation using laser radiation in the treatment of vascular malformations, infantile haemangiomas, café au lait macules and naevi of Ota, other than melanocytic naevi (common moles), if the abnormality is visible from 3 metres, including any associated consultation, up to a maximum of 6 sessions (including any sessions to which this item or any of items 14100 to 14118 apply) in any 12 month period—area of treatment less than 150 cm2 (Anaes.)	125	141.7 Y
14115	1/11/1995	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	266.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Laser photocoagulation using laser radiation in the treatment of vascular malformations, infantile haemangiomas, café au lait macules and naevi of Ota, other than melanocytic naevi (common moles), including any associated consultation, up to a maximum of 6 sessions (including any sessions to which this item or any of items 14100 to 14118 apply) in any 12 month period—area of treatment 150 cm2 to 300 cm2 (Anaes.)	200.2	226.9 Y
14118	1/11/1995	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	338.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Laser photocoagulation using laser radiation in the treatment of vascular malformations, infantile haemangiomas, café au lait macules and naevi of Ota, other than melanocytic naevi (common moles), including any associated consultation, up to a maximum of 6 sessions (including any sessions to which this item or any of items 14100 to 14115 apply) in any 12 month period—area of treatment more than 300 cm2 (Anaes.)	254.2	288.1 Y
14124	19/06/1997	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	158.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Laser photocoagulation using laser radiation in the treatment of vascular malformations, infantile haemangiomas, café-au-lait macules and naevi of Ota, other than melanocytic naevi (common moles), including any associated consultation, if: (a) a seventh or subsequent session (including any sessions to which this item or any of items14100 to 14118 apply) is indicated in a 12 month period commencing on the day of the first session; and (b) photographic evidence demonstrating the need for this service is documented in the patient notes (Anaes.)	119	134.9 Y
14201	1/07/2011	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/2011	1/07/2021	246.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	POLY-L-LACTIC ACID, one or more injections of, for the initial session only, for the treatment of severe facial lipoatrophy caused by antiretroviral therapy, when prescribed in accordance with the National Health Act 1953 - once per patient	184.85	209.5
14202	1/07/2011	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/2011	1/07/2021	124.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	POLY-L-LACTIC ACID, one or more injections of (subsequent sessions), for the continuation of treatment of severe facial lipoatrophy caused by antiretroviral therapy, when prescribed in accordance with the National Health Act 1953	93.6	106.05
14203	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	53.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	HORMONE OR LIVING TISSUE IMPLANTATION, by direct implantation involving incision and suture (Anaes.)	39.9	45.25 Y
14206	1/12/1991	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	27.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HORMONE OR LIVING TISSUE IMPLANTATIONby cannula	27.8	31.5
14212	1/11/1994	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	192.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	INTUSSUSCEPTION, management of fluid or gas reduction for (Anaes.)	144.6	163.85 Y
14216	1/11/2021	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2021	1/11/2021	186.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Professional attendance on a patient by a psychiatrist, who has undertaken training in Repetitive Transcranial Magnetic Stimulation (rTMS), for treatment mapping for rTMS, if the patient: (a) has not previously received any prior transcranial magnetic stimulation therapy in a public or private setting; and (b) is at least 18 years old; and (c) is diagnosed with a major depressive episode; and (d) has failed to receive satisfactory improvement for the major depressive episode despite the adequate trialling of at least 2 different classes of antidepressant medications, unless contraindicated, and all of the following apply: (i) the patient's adherence to antidepressant treatment has been formally assessed; (ii) the trialling of each antidepressant medication has been at the recommended therapeutic dose for a minimum of 2 weeks; (iii) where clinically appropriate, the treatment has been titrated to the maximum tolerated therapeutic dose; and (iv) has undertaken psychological therapy, if clinically appropriate	139.8	158.45
14217	1/11/2021	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2021	1/11/2021	140	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Repetitive Transcranial Magnetic Stimulation (rTMS) treatment of up to 35 services provided by, or on behalf of, a psychiatrist who has undertaken training in rTMS, if the patient has previously received a service under item 14216—each service up to 35 services	120	136
14218	1/03/1999	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/1999	1/07/2021	58.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Implanted infusion pump, refilling of reservoir with a therapeutic agent or agents for infusion to the subarachnoid space or accessing the side port to assess catheter patency, with or without pump reprogramming, for the management of chronic pain, including cancer pain	76.45	86.65
14219	1/11/2021	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2021	1/11/2021	186.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Professional attendance on a patient by a psychiatrist, who has undertaken training in Repetitive Transcranial Magnetic Stimulation (rTMS), for treatment mapping for rTMS, if the patient: (a) is at least 18 years old; and (b) is diagnosed with a major depressive episode; and (c) has failed to receive satisfactory improvement for the major depressive episode despite the adequate trialling of at least 2 different classes of antidepressant medications, unless contraindicated, and all of the following apply: (i) the patient's adherence to antidepressant treatment has been formally assessed; (ii) the trialling of each antidepressant medication has been at the recommended therapeutic dose for a minimum of 2 weeks; (iii) where clinically appropriate, the treatment has been titrated to the maximum tolerated therapeutic dose; and (iv) has undertaken psychological therapy, if clinically appropriate; and (v) has previously received an initial service under item 14217 and the patient: (i) has relapsed after a remission following the initial service; and (ii) has had a satisfactory clinical response to the service under item14217 (which has been assessed by a validated major depressive disorder tool at least 4 months after receiving that service)	139.8	158.45
14220	1/11/2021	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2021	1/11/2021	140	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Repetitive Transcranial Magnetic Stimulation (rTMS) treatment of up to 35 services provided by, or on behalf of, a psychiatrist who has undertaken training in rTMS, if the patient has previously received: (a) a service under item14217 (which was not provided in the previous 4 months); and (b) a service under Item14219 Each service up to 35 services	120	136
14221	1/03/1999	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/1999	1/07/2021	54.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	LONG-TERM IMPLANTED DEVICE FOR DELIVERY OF THERAPEUTIC AGENTS, accessing of, not being a service associated with a service to which item 13950 applies	41	46.5
14224	1/03/1999	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/1999	1/07/2021	73.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/1999	ELECTROCONVULSIVE THERAPY, with or without the use of stimulus dosing techniques, including any electroencephalographic monitoring and associated consultation (Anaes.)	54.9	62.25 Y
14227	1/05/2006	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/07/2021	101.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	IMPLANTED INFUSION PUMP, REFILLING of reservoir, with baclofen, for infusion to the subarachnoid or epidural space, with or without re-programming of a programmable pump, for the management of severe chronic spasticity	76.45	86.65
14234	1/11/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	376.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Infusion pump or components of an infusion pump, removal or replacement of, and connection to intrathecal or epidural catheter, and loading of reservoir with baclofen, with or without programming of the pump, for the management of severe chronic spasticity (Anaes.)	282.45	Y
14237	1/11/2020	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	686.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Infusion pump or components of an infusion pump, subcutaneous implantation of, and intrathecal or epidural spinal catheter insertion, and connection of pump to catheter, and loading of reservoir with baclofen, with or without programming of the pump, for the management of severe chronic spasticity (Anaes.)	515	Y
14245	1/11/2006	[Table]	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	101.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	IMMUNOMODULATING AGENT, administration of, by intravenous infusion for at least 2 hours duration - payable once only on the same day and where the agent is provided under section 100 of the Pharmaceutical Benefits Scheme	76.45	86.65
14247	1/11/2020	[Table]	3	T1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	1925.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Extracorporeal photopheresis for the treatment of erythrodermic stage III-IVa T4 MD cutaneous T-cell lymphoma; if the service is provided in the initial six months of treatment; and the service is delivered using an integrated, closed extracorporeal photopheresis system; and the patient is 18 years old or over; and the patient has received prior systemic treatment for this condition and experienced either disease progression or unacceptable toxicity while on this treatment; and the service is provided in combination with the use of Pharmaceutical Benefits Scheme-subsidised methoxsalen; and the service is supervised by a specialist or consultant physician in the speciality of haematology. Applicable once per treatment cycle	1444.2	1837.65

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14249	1/11/2020	ITable	3	T1	ITable	ITable	D	N	ITable	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	1925.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Extracorporeal photopheresis for the continuing treatment of erythrodermic stage III-IVa T4 M0 cutaneous T-cell lymphoma; if in the preceding 6 months:(i) a service to which Item 14247 applies has been provided; and(ii) the patient has demonstrated a response to this service; and(iii)the patient requires further treatment; and the service is delivered using an integrated, closed extracorporeal photopheresis system; and the patient is 18 years old or over; and the service is provided in combination with the use of Pharmaceutical Benefits Scheme-subsidised methoxsalen; and the service is supervised by a specialist or consultant physician in the speciality of haematology. Applicable once per treatment cycle	1444.2	1837.65
14255	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	154.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Resuscitation of a patient provided for at least 30 minutes but less than 1 hour, by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the specialist described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017 or 5019 (Anaes.)	115.8	131.25 Y
14256	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	296.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Resuscitation of a patient provided for at least 1 hour but less than 2 hours, by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the specialist described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017 or 5019 (Anaes.)	222.7	252.4 Y
14257	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	591.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Resuscitation of a patient provided for at least 2 hours, by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the specialist described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017 or 5019 (Anaes.)	443.45	503.35 Y
14258	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	115.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Resuscitation of a patient provided for at least 30 minutes but less than 1 hour, by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the practitioner described in Item 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036 (Anaes.)	86.9	98.5 Y
14259	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	222.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Resuscitation of a patient provided for at least 1 hour but less than 2 hours, by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the practitioner described in Item 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036 (Anaes.)	167.05	189.3 Y
14260	1/03/2020	ITable	3	T1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	443.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Resuscitation of a patient provided for at least 2 hours, by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the practitioner described in Item 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036 (Anaes.)	332.6	376.95 Y
14263	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	54.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Minor procedure on a patient by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the specialist described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017 or 5019 (Anaes.)	40.8	46.2 Y
14264	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	122.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Procedure (except a minor procedure) on a patient by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the specialist described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017 or 5019 (Anaes.)	91.8	104 Y
14265	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	40.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Minor procedure on a patient by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the practitioner described in Item 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036 (Anaes.)	30.6	34.65 Y
14266	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	91.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Procedure (except a minor procedure) on a patient by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital, in conjunction with an attendance on the patient by the practitioner described in Item 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036 (Anaes.)	68.85	78 Y
14270	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	137.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Management, without aftercare, of all fractures and dislocations suffered by a patient that: (a) is provided by a specialist in the practice of the specialist's specialty of emergency medicine in conjunction with an attendance on the patient by the specialist described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017 or 5019; and (b) occurs at a recognised emergency department of a private hospital (Anaes.)	102.9	116.6 Y
14272	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	102.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Management, without aftercare, of all fractures and dislocations suffered by a patient that: (a) is provided by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) in conjunction with an attendance on the patient by thepractitioner described in Item 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036; and (b) occurs at a recognised emergency department of a private hospital (Anaes.)	77.2	87.5 Y
14277	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	154.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Application of chemical or physical restraint of a patient by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital	115.8	131.25
14278	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	115.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Application of chemical or physical restraint of a patient by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital	86.9	98.5
14280	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	154.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Anaesthesia (whether general anaesthesia or not) of a patient that: (a) is managed by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital; and (b) occurs in conjunction with an attendance on the patient that is described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017, 5019, 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036; and (c) is not anaesthesia provided by a specialist anaesthetist to which an item in Group T7 or T10 applies	115.8	131.25
14283	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	115.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Anaesthesia (whether general anaesthesia or not) of a patient that: (a) is managed by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital; and (b) occurs in conjunction with an attendance on the patient that is described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017, 5019, 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036; and (c) is not anaesthesia provided by a specialist anaesthetist to which an item in Group T7 or T10 applies	86.9	98.5
14285	1/03/2020	ITable	3	T1	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	154.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Emergent intubation, airway management or both of a patient that: (a) is managed by a specialist in the practice of the specialist's specialty of emergency medicine at a recognised emergency department of a private hospital; and (b) occurs in conjunction with an attendance on the patient that is described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017, 5019, 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036; and (c) is not anaesthesia provided by a specialist anaesthetist to which an item in Group T7 or T10 applies	115.8	131.25
14288	1/03/2020	ITable	3	T1	[Table]	[Table]	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2020	1/07/2021	115.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2020	Emergent intubation, airway management or both of a patient that: (a) is managed by a medical practitioner (except a specialist in the practice of the specialist's specialty of emergency medicine) at a recognised emergency department of a private hospital; and (b) occurs in conjunction with an attendance on the patient that is described in Item 5001, 5004, 5011, 5012, 5013, 5014, 5016, 5017, 5019, 5021, 5022, 5027, 5030, 5031, 5032, 5033, 5035 or 5036; and (c) is not anaesthesia provided by a specialist anaesthetist to which an item in Group T7 or T10 applies	86.9	98.5
15000	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	(Benefits for administration of general anaesthetic for radiotherapy are payable under Group T10) RADIOTHERAPY, SUPERFICIAL (including treatment with xrays, radium rays or other radioactive substances), not being a service to which another item in this Group applies each attendance at which fractionated treatment is given - 1 field	33.25	37.7
15003	1/12/1991	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/12/1991			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	Radiotherapy, superficial (including treatment with x-rays, radium rays or other radioactive substances), not being a service to which another item in this Group applies - each attendance at which fractionated treatment is given - 2 or more fields up to a maximum of 5 additional fields		1/07/2021 The fee for item 15000 plus for each field in excess of 1 an amount of $17.75
15006	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	66.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RADIOTHERAPY, SUPERFICIAL, attendance at which single dose technique is applied - 1 field	73.65	83.5
15009	1/12/1991	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/12/1991			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	Radiotherapy, superficial attendance at which a single dose technique is applied - 2 or more fields up to a maximum of 5 additional fields		1/07/2021 The fee for item 15006 plus for each field in excess of 1 an amount of $19.30
15012	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	55.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RADIOTHERAPY, SUPERFICIALeach attendance at which treatment is given to an eye	41.7	47.3
15100	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	49.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RADIOTHERAPY, DEEP OR ORTHOVOLTAGE each attendance at which fractionated treatment is given at 3 or more treatments per week - 1 field	37.25	42.25
15103	1/12/1991	ITable	3	T2	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/12/1991			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Radiotherapy, deep or orthovoltage each attendance at which fractionated treatment is given at 3 or more treatments per week - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields)		1/07/2021 The fee for item 15100 plus for each field in excess of 1, an amount of $19.55
15106	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	58.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RADIOTHERAPY, DEEP OR ORTHOVOLTAGEeach attendance at which fractionated treatment is given at 2 treatments per week or less frequently - 1 field	43.95	49.8
15109	1/12/1991	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/12/1991			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	Radiotherapy, deep or orthovoltage each attendance at which fractionated treatment is given at 2 treatments per week or less frequently - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields)		1/07/2021 The fee for item 15106 plus for each field in excess of 1 an amount of $23.60
15112	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	125.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RADIOTHERAPY, DEEP OR ORTHOVOLTAGEattendance at which single dose technique is applied 1 field	93.85	106.35
15115	1/12/1991	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/12/1991			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	Radiotherapy, deep or orthovoltage attendance at which a single dose technique is applied - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields)		1/07/2021 The fee for item 15112 plus for each field in excess of 1 an amount of $49.20
15211	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	56.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RADIATION ONCOLOGY TREATMENT, using cobalt unit or caesium teletherapy unitEach attendance at which treatment is given - 1 field	42.75	48.45
15214	1/12/1991	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/12/1991			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	Radiation oncology treatment, using cobalt unit or caesium teletherapy unit - each attendance at which treatment is given 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields)		1/07/2021 The fee for item 15211 plus for each field in excess of 1 an amount of $33.20
15215	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site (lung)	46.55	52.75
15218	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site (prostate)	46.55	52.75
15221	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site (breast)	46.55	52.75

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15224	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site for diseases and conditions not covered by items 15215, 15218 and 15221		46.55	52.75	
15227	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to secondary site		46.55	52.75	
15230	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (lung)	1/07/2021 The fee for item 15215 plus for each field in excess of 1, an amount of $39.50			
15233	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (prostate)	1/07/2021 The fee for item 15218 plus for each field in excess of 1, an amount of $39.50			
15236	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (breast)	1/07/2021 The fee for item 15221 plus for each field in excess of 1, an amount of $39.50			
15239	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site for diseases and conditions not covered by items 15230, 15233 or 15236	1/07/2021 The fee for item 15224 plus for each field in excess of 1, an amount of $39.50			
15242	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to secondary site	1/07/2021 The fee for item 15227 plus for each field in excess of 1, an amount of $39.50			
15245	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site (lung)		46.55	52.75	
15248	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site (prostate)		46.55	52.75	
15251	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site (breast)		46.55	52.75	
15254	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to primary site for diseases and conditions not covered by items 15245, 15248 or 15251		46.55	52.75	
15257	1/05/2003	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	62.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 1 field - treatment delivered to secondary site		46.55	52.75	
15260	1/05/2003	ITable	3	T2	[Table]	[Table]	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (lung)	1/07/2021 The fee for item 15245 plus for each field in excess of 1, an amount of $39.50			
15263	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (prostate)	1/07/2021 The fee for item 15248 plus for each field in excess of 1, an amount of $39.50			
15266	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (breast)	1/07/2021 The fee for item 15251 plus for each field in excess of 1, an amount of $39.50			
15269	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site for diseases and conditions not covered by items 15260, 15263 or 15266	1/07/2021 The fee for item 15254 plus for each field in excess of 1, an amount of $39.50			
15272	1/05/2003	ITable	3	T2	ITable	ITable	S	D	ITable	N	N	N	N	N	N	N	C	1/05/2003			ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MeV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to secondary site	1/07/2021 The fee for item 15257 plus for each field in excess of 1, an amount of $39.50			
15275	1/01/2016	ITable	3	T2	[Table]	[Table]	S	N	ITable	N	N	N	N	N	N	N	C	1/01/2016	1/07/2021	190.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ITable	1/07/2016	RADIATION ONCOLOGY TREATMENT with IGRT imaging facilities undertaken: (a) to implement an IMRT dosimetry plan prepared in accordance with item 15565; and (b) utilising an intensity modulated treatment delivery mode (delivered by a fixed or dynamic gantry linear accelerator or by a helical non C-arm based linear accelerator), once only at each attendance at which treatment is given.		142.8	161.8	
15303	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	371.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAUTERINE TREATMENT ALONE using radioactive sealed sources having a half-life greater than 115 days using manual afterloading techniques (Anses.)		278.6	315.75	Y
15304	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	371.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAUTERINE TREATMENT ALONE using radioactive sealed sources having a half-life greater than 115 days using automatic afterloading techniques (Anses.)		278.6	315.75	Y
15307	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	704.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAUTERINE TREATMENT ALONE using radioactive sealed sources having a half-life of less than 115 days including iodine, gold, iridium or tantalum using manual afterloading techniques (Anses.)		528.2	616.35	Y
15308	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	704.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAUTERINE TREATMENT ALONE using radioactive sealed sources having a half-life of less than 115 days including iodine, gold, iridium or tantalum using automatic afterloading techniques (Anses.)		528.2	616.35	Y
15311	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	252.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAVAGINAL TREATMENT ALONE using radioactive sealed sources having a half-life greater than 115 days using manual afterloading techniques (Anses.)		260.1	294.75	Y
15312	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	254.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAVAGINAL TREATMENT ALONE using radioactive sealed sources having a half-life greater than 115 days using automatic afterloading techniques (Anses.)		258.15	292.6	Y
15315	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	680.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAVAGINAL TREATMENT ALONE using radioactive sealed sources having a half-life of less than 115 days including iodine, gold, iridium or tantalum using manual afterloading techniques (Anses.)		510.55	592.8	Y
15316	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	680.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRAVAGINAL TREATMENT ALONE using radioactive sealed sources having a half-life of less than 115 days including iodine, gold, iridium or tantalum using automatic afterloading techniques (Anses.)		510.55	592.8	Y
15319	1/12/1991	ITable	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COMBINED INTRAUTERINE AND INTRAVAGINAL TREATMENT using radioactive sealed sources having a half-life greater than 115 days using manual afterloading techniques (Anses.)		316.9	359.15	Y
15320	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	422.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	COMBINED INTRAUTERINE AND INTRAVAGINAL TREATMENT using radioactive sealed sources having a half-life greater than 115 days using automatic afterloading techniques (Anses.)		316.9	359.15	Y
15323	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	751.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	COMBINED INTRAUTERINE AND INTRAVAGINAL TREATMENT using radioactive sealed sources having a half-life of less than 115 days including iodine, gold, iridium or tantalum using manual afterloading techniques (Anses.)		563.45	663.35	Y
15324	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	751.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	COMBINED INTRAUTERINE AND INTRAVAGINAL TREATMENT using radioactive sealed sources having a half-life of less than 115 days including iodine, gold, iridium or tantalum using automatic afterloading techniques (Anses.)		563.45	663.35	Y
15327	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	817.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	IMPLANTATION OF A SEALED RADIOACTIVE SOURCE (having a half-life of less than 115 days including iodine, gold, iridium or tantalum) to a region, under general anaesthesia, or epidural or spinal (intrathecal) nerve block, requiring surgical exposure and using manual afterloading techniques (Anses.)		612.95	729.35	Y
15328	1/12/1991	ITable	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	817.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	IMPLANTATION OF A SEALED RADIOACTIVE SOURCE (having a half-life of less than 115 days including iodine, gold, iridium or tantalum) to a region, under general anaesthesia, or epidural or spinal (intrathecal) nerve block, requiring surgical exposure and using automatic afterloading techniques (Anses.)		612.95	729.35	Y
15331	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	776	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	IMPLANTATION OF A SEALED RADIOACTIVE SOURCE (having a half-life of less than 115 days including iodine, gold, iridium or tantalum) to a site (including the tongue, mouth, salivary gland, axilla, subcutaneous sites), where the volume treated involves multiple planes but does not require surgical exposure and using manual afterloading techniques (Anses.)		582	688.1	Y
15332	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	776	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	IMPLANTATION OF A SEALED RADIOACTIVE SOURCE (having a half-life of less than 115 days including iodine, gold, iridium or tantalum) to a site (including the tongue, mouth, salivary gland, axilla, subcutaneous sites), where the volume treated involves multiple planes but does not require surgical exposure and using automatic afterloading techniques (Anses.)		582	688.1	Y
15335	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	704.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	IMPLANTATION OF A SEALED RADIOACTIVE SOURCE (having a half-life of less than 115 days including iodine, gold, iridium or tantalum) to a site where the volume treated involves only a single plane but does not require surgical exposure and using manual afterloading techniques (Anses.)		528.2	616.35	Y
15336	1/12/1991	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	704.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	IMPLANTATION OF A SEALED RADIOACTIVE SOURCE (having a half-life of less than 115 days including iodine, gold, iridium or tantalum) to a site where the volume treated involves only a single plane but does not require surgical exposure and using automatic afterloading techniques (Anses.)		528.2	616.35	Y
15338	1/11/2001	ITable	3	T2	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	973.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, radioactive seed implantation of, radiation oncology component, using transrectal ultrasound guidance: (a) for a patient with: (i) localised prostatic malignancy at clinical stages T1 (clinically inapparent tumour not palpable or visible by imaging) or T2 (tumour confined within prostate); and (ii) a Gleason score of less than or equal to 7 (Grade Group 1 to Grade Group 3); and (iii) a prostate specific antigen (PSA) of not more than 10ng/ml at the time of diagnosis; and (b) performed by an oncologist at an approved site in association with a urologist; and (c) being a service associated with: (i) services to which items 37220 and 55603 apply; and (ii) a service to which item 60506or 60509 applies		730.15	886.6	
15339	1/12/1991	ITable	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	79.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	REMOVAL OF A SEALED RADIOACTIVE SOURCE under general anaesthesia, or under epidural or spinal nerve block (Anses.)		59.45	67.4	Y

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15342	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	198	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONSTRUCTION AND APPLICATION OF A RADIOACTIVE MOULD using a sealed source having a half-life of greater than 115 days, to treat intracavity, intraoral or intranasal site	148.5	168.3
15345	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	528.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONSTRUCTION AND APPLICATION OF A RADIOACTIVE MOULD using a sealed source having a half-life of less than 115 days including iodine, gold, iridium or tantalum to treat intracavity, intraoral or intranasal sites	396.3	449.1
15348	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	60.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUBSEQUENT APPLICATIONS OF RADIOACTIVE MOULD referred to in item 15342 or 15345each attendance	45.6	51.7
15351	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	121.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	CONSTRUCTION WITH OR WITHOUT INITIAL APPLICATION OF RADIOACTIVE MOULD not exceeding 5 cm. diameter to an external surface	91.05	103.15
15354	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	147.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONSTRUCTION AND INITIAL APPLICATION OF RADIOACTIVE MOULD 5 cm. or more in diameter to an external surface	110.4	125.15
15357	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	41.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	"SUBSEQUENT APPLICATIONS OF RADIOACTIVE MOULD, attendance upon a patient to apply a radioactive mould constructed for application to an external surface of the patient other than an attendance which is the first attendance to apply the mould each attendance"	31.25	35.45
15500	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	252.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIOTHERAPY PLANNINGRADIATION FIELD SETTING using a simulator or isocentric xray or megavoltage machine or CT of a single area for treatment by a single field or parallel opposed fields (not being a service associated with a service to which item 15509 applies)	189.4	214.65
15503	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	324.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION FIELD SETTING using a simulator or isocentric xray or megavoltage machine or CT of a single area, where views in more than 1 plane are required for treatment by multiple fields, or of 2 areas (not being a service associated with a service to which item 15512 applies)	243.15	275.6
15506	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	484.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION FIELD SETTING using a simulator or isocentric xray or megavoltage machine or CT of 3 or more areas, or of total body or half body irradiation, or of mantle therapy or inverted Y fields, or of irregularly shaped fields using multiple blocks, or of offaxis fields or several joined fields (not being a service associated with a service to which item 15515 applies)	363.15	411.55
15509	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	218.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RADIATION FIELD SETTING using a diagnostic xray unit of a single area for treatment by a single field or parallel opposed fields (not being a service associated with a service to which item 15500 applies)	164.1	186
15512	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	282.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RADIATION FIELD SETTING using a diagnostic xray unit of a single area, where views in more than 1 plane are required for treatment by multiple fields, or of 2 areas (not being a service associated with a service to which item 15503 applies)	211.6	239.8
15513	1/11/2001	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	318.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	RADIATION SOURCE LOCALISATION using a simulator or x-ray machine or CT of a single area, where views in more than 1 plane are required, for brachytherapy treatment planning for I125 seed implantation of localised prostate cancer, in association with item 15338	239.25	271.15
15515	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	408.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RADIATION FIELD SETTING using a diagnostic xray unit of 3 or more areas, or of total body or half body irradiation, or of mantle therapy or inverted Y fields, or of irregularly shaped fields using multiple blocks, or of offaxis fields or several joined fields (not being a service associated with a service to which item 15506 applies)	306.35	347.2
15518	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	80.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION DOSIMETRY by a CT interfacing planning computer for megavoltage or teletherapy radiotherapy by a single field or parallel opposed fields to 1 area with up to 2 shielding blocks	60.1	68.1
15521	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	353.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION DOSIMETRY by a CT interfacing planning computer for megavoltage or teletherapy radiotherapy by a single field or parallel opposed fields to 2 areas, or by a single field or parallel opposed fields to 2 areas, or where wedges are used	265.3	300.65
15524	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	663.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION DOSIMETRY by a CT interfacing planning computer for megavoltage or teletherapy radiotherapy to 3 or more areas, or by mantle fields or inverted Y fields or tangential fields or irregularly shaped fields using multiple blocks, or offaxis fields, or several joined fields	497.4	575.25
15527	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	82.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION DOSIMETRY by a non CT interfacing planning computer for megavoltage or teletherapy radiotherapy by a single field or parallel opposed fields to 1 area with up to 2 shielding blocks	61.65	69.85
15530	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	366.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION DOSIMETRY by a non CT interfacing planning computer for megavoltage or teletherapy radiotherapy to a single area by 3 or more fields, or by a single field or parallel opposed fields to 2 areas, or where wedges are used	274.8	311.45
15533	1/12/1991	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	694.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	RADIATION DOSIMETRY by a non CT interfacing planning computer for megavoltage or teletherapy radiotherapy to 3 or more areas, or by mantle fields or inverted Y fields, or tangential fields or irregularly shaped fields using multiple blocks, or offaxis fields, or several joined fields	521.1	606.9
15536	1/11/1993	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	277.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	BRACHYTHERAPY PLANNING, computerised radiation dosimetry	208.3	236.05
15539	1/11/2001	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	652.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	BRACHYTHERAPY PLANNING, computerised radiation dosimetry for I125 seed implantation of localised prostate cancer, in association with item 15338	489.55	564.8
15550	1/05/2006	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/07/2021	685.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	SIMULATION FOR THREE DIMENSIONAL CONFORMAL RADIOTHERAPY without intravenous contrast medium, where: (a)treatment set-up and technique specifications are in preparations for three dimensional conformal radiotherapy dose planning; and (b)patient set-up and immobilisation techniques are suitable for reliable CT image volume data acquisition and three dimensional conformal radiotherapy treatment; and (c)a high-quality CT-image volume dataset must be acquired for the relevant region of interest to be planned and treated; and (d)the image set must be suitable for the generation of quality digitally reconstructed radiographic images	514	597.4
15553	1/05/2006	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/07/2021	730.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	SIMULATION FOR THREE DIMENSIONAL CONFORMAL RADIOTHERAPY pre and post intravenous contrast medium, where: (a)treatment set-up and technique specifications are in preparations for three dimensional conformal radiotherapy dose planning; and (b)patient set-up and immobilisation techniques are suitable for reliable CT image volume data acquisition and three dimensional conformal radiotherapy treatment; and (c)a high-quality CT-image volume dataset must be acquired for the relevant region of interest to be planned and treated; and (d)the image set must be suitable for the generation of quality digitally reconstructed radiographic images	554.55	651.45
15555	1/01/2016	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2016	1/07/2021	730.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	SIMULATION FOR INTENSITY-MODULATED RADIATION THERAPY (IMRT), with or without intravenous contrast medium, if: 1.treatment set-up and technique specifications are in preparations for three-dimensional conformal radiotherapy dose planning; and 2.patient set-up and immobilisation techniques are suitable for reliable CT-image volume data acquisition and three-dimensional conformal radiotherapy; and 3.a high-quality CT-image volume dataset is acquired for the relevant region of interest to be planned and treated; and 4.the image set is suitable for the generation of quality digitally-reconstructed radiographic images.	554.55	651.45
15556	1/05/2006	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/07/2021	891.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	DOSIMETRY FOR THREE DIMENSIONAL CONFORMAL RADIOTHERAPY OF LEVEL 1 COMPLEXITY where: (a)dosimetry for a single phase three dimensional conformal treatment plan using CT image volume dataset and having a single treatment target volume and organ at risk; and (b)one gross tumour volume or clinical target volume, plus one planning target volume plus at least one relevant organ at risk as defined in the prescription; or (b)dosimetry for a one phase three dimensional conformal treatment plan using CT image volume datasets with at least one gross tumour volume, one planning target volume and two organ at risk dose goals or constraints defined in the prescription; or (c)image fusion with a secondary image (CT, MRI or PET) volume dataset used to define target and organ at risk volumes in conjunction with and as specified in dosimetry for three dimensional conformal radiotherapy of level 1 complexity. All gross tumour targets, clinical targets, planning targets and organs at risk as defined in the prescription must be rendered as volumes. The organ at risk must be nominated as planning dose goals or constraints and the prescription must specify the organs at risk as dose goals or constraints. Dose volume histograms must be generated, approved and recorded with the plan; and (d)dose volume histograms must be generated, approved and recorded with the plan; and (e)a CT image volume dataset must be used for the relevant region to be planned and treated; and (f)the CT images must be suitable for the generation of quality digitally reconstructed radiographic images	518.55	603.45
15559	1/05/2006	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/07/2021	901.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	DOSIMETRY FOR THREE DIMENSIONAL CONFORMAL RADIOTHERAPY OF LEVEL 2 COMPLEXITY where: (a)dosimetry for a two phase three dimensional conformal treatment plan using CT image volume dataset(s) with at least one gross tumour volume, two planning target volumes and one organ at risk defined in the prescription; or (b)dosimetry for a one phase three dimensional conformal treatment plan using CT image volume datasets with at least one gross tumour volume, one planning target volume and two organ at risk dose goals or constraints defined in the prescription; or (c)image fusion with a secondary image (CT, MRI or PET) volume dataset used to define target and organ at risk volumes in conjunction with and as specified in dosimetry for three dimensional conformal radiotherapy of level 1 complexity. All gross tumour targets, clinical targets, planning targets and organs at risk as defined in the prescription must be rendered as volumes. The organ at risk must be nominated as planning dose goals or constraints and the prescription must specify the organs at risk as dose goals or constraints. Dose volume histograms must be generated, approved and recorded with the plan. A CT image volume dataset must be used for the relevant region to be planned and treated. The CT images must be suitable for the generation of quality digitally reconstructed radiographic images	676.25	813.75
15562	1/05/2006	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/07/2021	1166.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	DOSIMETRY FOR THREE DIMENSIONAL CONFORMAL RADIOTHERAPY OF LEVEL 3 COMPLEXITY - where: (a)dosimetry for a three or more phase three dimensional conformal treatment plan using CT image volume dataset(s) with at least one gross tumour volume, three planning target volumes and one organ at risk defined in the prescription; or (b)dosimetry for a two phase three dimensional conformal treatment plan using CT image volume datasets with at least one gross tumour volume, and (i) two planning target volumes; or (ii) two organ at risk dose goals or constraints defined in the prescription. or (c)dosimetry for a one phase three dimensional conformal treatment plan using CT image volume datasets with at least one gross tumour volume, one planning target volume and three organ at risk dose goals or constraints defined in the prescription; or (d)image fusion with a secondary image (CT, MRI or PET) volume dataset used to define target and organ at risk volumes in conjunction with and as specified in dosimetry for three dimensional conformal radiotherapy of level 2 complexity. All gross tumour targets, clinical targets, planning targets and organs at risk as defined in the prescription must be rendered as volumes. The organ at risk must be nominated as planning dose goals or constraints and the prescription must specify the organs at risk as dose goals or constraints. Dose volume histograms must be generated, approved and recorded with the plan. A CT image volume dataset must be used for the relevant region to be planned and treated. The CT images must be suitable for the generation of quality digitally reconstructed radiographic images	874.65	1078.3
15565	1/01/2016	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2016	1/07/2021	3448.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2018	Preparation of an IMRT DOSIMETRY PLAN, which uses one or more CT image volume datasets, if: (a)in preparing the IMRT dosimetry plan: (i)the differential between target dose and normal tissue dose is maximised, based on a review and assessmentby a radiation oncologist; and (ii)all gross tumour targets, clinical targets, planning targets and organs at risk are rendered as volumes as defined in the prescription; and (iii)organs at risk are nominated as planning dose goals or constraints and the prescription specifies the organs at risk as dose goals or constraints; and (iv)dose calculations and dose volume histograms are generated in an inverse planned process, using a specialised calculation algorithm, with prescription and plan details approved and recorded in the plan; and (v)a CT image volume dataset is used for the relevant region to be planned and treated; and (vi)the CT images are suitable for the generation of quality digitally reconstructed radiographic images; and (b)the final IMRT dosimetry plan is validated by the radiation therapist and the medical physicist, using robust quality assurance processes that include: (i)determination of the accuracy of the dose fluence delivered by the multi-leaf collimator and gantrypositon (static or dynamic); and (ii)ensuring that the plan is deliverable, data transfer is acceptable and validation checks are completed on a linear accelerator; and (iii)validating the accuracy of the derived IMRT dosimetry plan; and (c)the final IMRT dosimetry plan is approved by the radiation oncologist prior to delivery.	2586.1	3360.2

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15600	19/06/1997	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	1771.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	STEREOTACTIC RADIOSURGERY, including all radiation oncology consultations, planning, simulation, dosimetry and treatment	1328.5	1683.4
15700	1/07/2008	[Table]	3	T2	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	47.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	RADIATION ONCOLOGY TREATMENT VERIFICATION - single projection (with single or double exposure) - when prescribed and reviewed by a radiation oncologist and not associated with item 15705 or 15710 - each attendance at which treatment is verified (ie maximum one per attendance).	35.9	40.7
15705	1/07/2008	[Table]	3	T2	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	79.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	RADIATION ONCOLOGY TREATMENT VERIFICATION - multiple projection acquisition when prescribed and reviewed by a radiation oncologist and not associated with item 15700 or 15710 - each attendance at which treatment involving three or more fields is verified (ie maximum one per attendance).	59.8	67.75
15710	1/05/2010	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/07/2021	79.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	RADIATION ONCOLOGY TREATMENT VERIFICATION - volumetric acquisition, when prescribed and reviewedby a radiation oncologist and not associated with item 15700 or 15705 - each attendance at which treatment involving three fields or more is verified (ie maximum one per attendance). (see para T2.5 of explanatory notes to this Category)	59.8	67.75
15715	1/01/2016	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2016	1/07/2021	79.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	RADIATION ONCOLOGY TREATMENT VERIFICATION of planar or volumetric IGRT for IMRT, involving the use of at least 2 planar image views or projections or 1 volumetric image set to facilitate a 3-dimensional adjustment to radiation treatment field positioning, if: (a) the treatment technique is classified as IMRT; and (b) the margins applied to volumes (clinical target volume or planning target volume) are tailored or reduced to minimise treatment related exposure of healthy or normal tissues; and (c) the decisions made using acquired images are based on action algorithms and are given effect immediately prior to or during treatment delivery by qualified and trained staff considering complex competing factors and using software driven modelling programs; and (d) the radiation treatment field positioning requires accuracy levels of less than 5mm (curative cases) or up to 10mm (palliative cases) to ensure accurate dose delivery to the target; and (e) the image decisions and actions are documented in the patient's record; and (f) the radiation oncologist is responsible for supervising the process, including specifying the type and frequency of imaging, tolerance and action levels to be incorporated in the process, reviewing the trend analysis and any reports and relevant images during the treatment course and specifying action protocols as required; and (g) when treatment adjustments are inadequate to satisfy treatment protocol requirements, replanning is required; and (h) the imaging infrastructure (hardware and software) is linked to the treatment unit and networked to an image database, enabling both on line and off line reviews.	59.8	67.75
15800	1/07/2008	[Table]	3	T2	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	100.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	BRACHYTHERAPY TREATMENT VERIFICATION - maximum of one only for each attendance.	75.15	85.2
15850	1/07/2008	[Table]	3	T2	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	207.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	RADIATION SOURCE LOCALISATION using a simulator, x-ray machine, CT or ultrasound of a single area, where views in more than one plane are required, for brachytherapy treatment planning, not being a service to which Item 15513 applies.	155.7	176.5
15900	1/09/2015	[Table]	3	T2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	260.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	BREAST, MALIGNANT TUMOUR, targeted intraoperative radiation therapy, using an Intrabeam™or Xoft® Axxent® device, delivered at the time of breast-conserving surgery (partial mastectomy or lumpectomy) for a patient who: a) is 45 years of age or more; and b) has a T1 or small T2 (less than or equal to 3cm in diameter) primary tumour; and c) has an histologic Grade 1 or 2 tumour; and d) has an oestrogen-receptor positive tumour; and e) has a node negative malignancy; and f) is suitable for wide local excision of a primary invasive breast carcinoma that was diagnosed as unifocal on conventional examination and imaging; and g) has no contra-indications to breast irradiation Applicable only once per breast per lifetime (a)	195.1	
16003	1/12/1991	[Table]	3	T3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	676.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	INTRACAVITY ADMINISTRATION OF A THERAPEUTIC DOSE OF YTTRIUM 90 not including preliminary paracentesis, operative therapy associated with selective internal radiation therapy or to which Item 35404, 35406 or 35408 applies (Anaes.)	507.65	588.95 Y
16006	1/12/1991	[Table]	3	T3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	520.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ADMINISTRATION OF A THERAPEUTIC DOSE OF IODINE 131 for thyroid cancer by single dose technique	390.1	442.1
16009	1/12/1991	[Table]	3	T3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	314.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ADMINISTRATION OF A THERAPEUTIC DOSE OF IODINE 131 for thyrotoxicosis by single dose technique	266.25	301.75
16012	1/12/1991	[Table]	3	T3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	307.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INTRAVENOUS ADMINISTRATION OF A THERAPEUTIC DOSE OF PHOSPHORUS 32	230.35	261.05
16015	1/05/1997	[Table]	3	T3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	4251.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	ADMINISTRATION OF STRONTIUM 89 for painful bony metastases from carcinoma of the prostate where hormone therapy has failed and either: (i)the disease is poorly controlled by conventional radiotherapy; or (ii)conventional radiotherapy is inappropriate, due to the wide distribution of sites of bone pain	3188.4	4163.3
16018	22/12/1999	[Table]	3	T3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	2561.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	ADMINISTRATION OF 153 SM-LEXIDRONAM for the relief of bone pain due to skeletal metastases (as indicated by a positive bone scan) where hormonal therapy and/or chemotherapy have failed and either the disease is poorly controlled by conventional radiotherapy or conventional radiotherapy is inappropriate, due to the wide distribution of sites of bone pain.	1906.05	2453.5
16400	1/11/2006	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	B	1/11/2006	1/07/2021	28.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2012	ANTENATAL CARE Antenatal service provided by a midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner: (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; (b) the service is provided at, or from, a practice location in a regional, rural or remote area; (c) the service is not performed in conjunction with another antenatal attendance item (same patient, same practitioner on the same day); (d) the service is not provided for an admitted patient of a hospital; and to a maximum of 10 service per pregnancy		24.1
16401	1/01/2010	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/01/2010	1/07/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Professional attendance at consulting rooms or a hospital by a specialist in the practice of his or her specialty of obstetrics, after referral of the patient to him or her - each attendance, other than a second or subsequent attendance in a single course of treatment	66.75	75.65
16404	1/01/2010	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/01/2010	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2010	Professional attendance at consulting rooms or a hospital by a specialist in the practice of his or her specialty of obstetrics after referral of the patient to him or her - each attendance SUBSEQUENT to the first attendance in a single course of treatment.	33.6	38.05
16406	1/11/2010	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	139.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Antenatal professional attendance, by an obstetrician or general practitioner, as part of a single course of treatment when the patient is referred by a participating midwife. Payable only once for a pregnancy	104.55	118.5
16407	1/11/2017	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Postnatal professional attendance (other than a service to which any other item applies) if the attendance: (a) is by an obstetrician or general practitioner; and (b) is in hospital or at consulting rooms; and (c) is between 4 and 8 weeks after the birth; and (d) lasts at least 20 minutes; and (e) includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and (f) is for a pregnancy in relation to which a service to which Item 82140 applies is not provided Payable once only for a pregnancy	55.95	63.45
16408	1/11/2017	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	55.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Postnatal attendance (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which any other item applies) if the attendance: (a) is by: (i) a midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or (ii) an obstetrician; or (iii) a general practitioner; and (b) is between 1 week and 4 weeks after the birth; and (c) lasts at least 20 minutes; and (d) is for a patient who was privately admitted for the birth; and (e) is for a pregnancy in relation to which a service to which Item 82130, 82135 or 82140 applies is not provided Payable once only for a pregnancy		47.25
16500	1/12/1991	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	ANTENATAL ATTENDANCE	36.8	41.7
16501	1/11/2000	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	146.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	EXTERNAL CEPHALIC VERSION for breech presentation, after 36 weeks where no contraindication exists, in a Unit with facilities for Caesarean Section, including pre- and post version CTG, with or without tocolysis, not being a service to which items 55718 to 55728 and 55768 to 55774 apply - chargeable whether or not the version is successful and limited to a maximum of 2 ECV's per pregnancy	109.7	124.35
16502	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	POLYHYDRAMNIOS, UNSTABLE LIE, MULTIPLE PREGNANCY, PREGNANCY COMPLICATED BY DIABETES OR ANAEMIA, THREATENED PREMATURE LABOUR treated by bed rest only or oral medication, requiring admission to hospitleach attendance that is not a routine antenatal attendance, to a maximum of 1 visit per day	36.8	41.7
16505	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	THREATENED ABORTION, THREATENED MISCARRIAGE OR HYPEREMESIS GRAVIDARUM, requiring admission to hospital, treatment ofeach attendance that is not a routine antenatal attendance	36.8	41.7
16508	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Pregnancy complicatedby acute intercurrent infection, fetal growth restriction, threatened premature labour with ruptured membranes or threatened premature labour treated by intravenous therapy, requiring admission to hospital - each professional attendance (other than a service to which item 16533 applies) that is not a routine antenatal attendance, to a maximum of one visit per day	36.8	41.7
16509	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Pre-eclampsia,eclampsia or antepartum haemorrhage, treatment of- each professional attendance (other than a service to which item 16534 applies) that is not a routine antenatal attendance	36.8	41.7
16511	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	228.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	CERVIX, purse string ligation of (Anaes.)	171.65	194.55 Y
16512	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	CERVIX, removal of purse string ligature of (Anaes.)	49.55	56.15 Y
16514	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	38.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	ANTENATAL CARDIOTOCOGRAPHY in the management of high-risk pregnancy (not during the course of the confinement)	28.65	32.45
16515	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	656.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of vaginal birth as an independent procedure, if the patient's care has been transferred by another medical practitioner for management of the birth and the attending medical practitioner has not provided antenatal care to the patient, including all attendances related to the birth (Anaes.)	492.3	568.5 Y
16518	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	468.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of labour, incomplete, if the patient's care has been transferred to another medical practitioner for completion of the birth (Anaes.)	351.7	398.6 Y
16519	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	722.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of labourand birth by any means (including Caesarean section) including post-partum care for 5 days (Anaes.)	541.6	634.2 Y
16520	1/12/1991	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	656.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Caesarean section and post-operative care for 7 days, if the patient's care has been transferred by another medical practitioner for management of the confinement and the attending medical practitioner has not provided any of the antenatal care (Anaes.)	492.3	568.5 Y

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16522	1/11/1988	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	1695.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of vaginal birth, or birth mode, (including caesarean section), on or after 20 weeks gestation, if in the course of antenatal supervision or intrapartum management one or more of the following conditions is present, including postnatal care for 7 days: (a) fetal loss; (b) multiple pregnancy; (c) antepartum haemorrhage that is: (i) of greater than 200 ml; or (ii) associated with disseminated intravascular coagulation; (d) placenta praevia on ultrasound in the third trimester with the placenta within 2 cm of the internal cervical os; (e) baby with a birth weight less than or equal to 2,500 g; (f) trial of vaginal birth in a patient with uterine scar where there has been a planned vaginal birth after caesarean section; (g) trial of vaginal breech birth where there has been a planned vaginal breech birth; (h) prolonged labour greater than 12 hours with partogram evidence of abnormal cervimetric progress as evidenced by cervical dilatation at less than 1 cm/hr in the active phase of labour (after 3 cm cervical dilatation and effacement until full dilatation of the cervix); (i) acute fetal compromise evidenced by: (i) scalp pH less than 7.15; or (ii) scalp lactate greater than 4.0; (j) acute fetal compromise evidenced by at least one of the following significant cardiotocograph abnormalities: (i) prolonged bradycardia (less than 100 bpm for more than 2 minutes); (ii) absent baseline variability (less than 3 bpm); (iii) sinusoidal pattern; (iv) complicated variable decelerations with reduced (3 to 5 bpm) or absent baseline variability; (v) late decelerations; (k) pregnancy induced hypertension of at least 140/90 mm Hg associated with: (i) at least 2+ proteinuria on urinalysis; or (ii) protein-creatinine ratio greater than 30 mg/mmol; or (iii) platelet count less than 150 x 10(9)/L; or (iv) uric acid greater than 0.36 mmol/L; (l) gestational diabetes mellitus requiring at least daily blood glucose monitoring; (m) mental health disorder (whether arising prior to pregnancy, during pregnancy or postpartum) that is demonstrated by: (i) the patient requiring hospitalisation; or (ii) the patient receiving ongoing care by a psychologist or psychiatrist to treat the symptoms of a mental health disorder; or (iii) the patient having a GP mental health treatment plan; or (iv) the patient having a management plan prepared in accordance with Item 291; (n) disclosure or evidence of domestic violence; (o) any of the following conditions either diagnosed pre-pregnancy or evident at the first antenatal visit before 20 weeks gestation: (i) pre-existing hypertension requiring antihypertensive medication prior to pregnancy; (ii) cardiac disease (co-managed with a specialist physician and with echocardiographic evidence of myocardial dysfunction); (iii) previous renal or liver transplant; (iv) renal dialysis; (v) chronic liver disease with documented oesophageal varices; (vi) renal insufficiency in early	1271.55	Y
16527	1/11/2010	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	656.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of vaginal birth, if the patient's care has been transferred by a participating midwife for management of the birth, including all attendances related to the birth.Payable once only for a pregnancy. (Anaes.)	492.3	568.5	Y
16528	1/11/2010	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	656.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Caesarean section and post-operative care for 7 days, if the patient's care has been transferred by a participating midwife for management of the birth.Payable once only for a pregnancy. (Anaes.)	492.3	568.5	Y
16530	1/11/2017	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2017	1/07/2021	399.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of pregnancy loss, from 14 weeks to 15 weeks and 6 days gestation, other than a service to which item 16531, 35640 or 35643 applies (Anaes.)	299.95	339.95	Y
16531	1/11/2017	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	799.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Management of pregnancy loss, from 16 weeks to 22 weeks and 6 days gestation, other than a service to which item 16530, 35640 or 35643 applies (Anaes.)	599.9		Y
16533	1/11/2017	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Pregnancy complicated by acute intercurrent infection, fetal growth restriction, threatened premature labour with ruptured membranes or threatened premature labour treated by intravenous therapy, requiring admission to hospital—each professional attendance lasting at least 40 minutes that is not a routine antenatal attendance, to a maximum of 3 services per pregnancy	82.4		
16534	1/11/2017	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	109.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Pre-eclampsia, eclampsia or antepartum haemorrhage, treatment of—each professional attendance lasting at least 40 minutes that is not a routine antenatal attendance, to a maximum of 3 services per pregnancy	82.4		
16564	1/12/1991	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	226.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	POST-PARTUM CARE (EVACUATION OF RETAINED PRODUCTS OF CONCEPTION (placenta, membranes or mole) as a consequence of confinement, with or without curettage of the uterus, as an independent procedure (Anaes.)	170.1	192.8	Y
16567	1/12/1991	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	331.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	MANAGEMENT OF POST-PARTUM HAEMORRHAGE by special measures such as packing of uterus, as an independent procedure (Anaes.)	248.8	281.95	Y
16570	1/12/1991	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	432.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	ACUTE INVERSION OF THE UTERUS, vaginal correction of, as an independent procedure (Anaes.)	324.7	368.1	Y
16571	1/11/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/1995	1/07/2021	331.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	CERVIX, repair of extensive laceration or lacerations (Anaes.)	248.8	281.95	Y
16573	1/12/1991	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/12/1991	1/07/2021	270.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	THIRD DEGREE TEAR, involving anal sphincter muscles and rectal mucosa, repair of, as an independent procedure (Anaes.)	202.75	229.8	Y
16590	1/11/2005	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2005	1/07/2021	387.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Planning and management, by a practitioner, of a pregnancy if: (a) the practitioner intends to take primary responsibility for management of the pregnancy and any complications, and to be available for the birth; and (b) the patient intends to be privately admitted for the birth; and (c) the pregnancy has progressed beyond 28 weeks gestation; and (d) the practitioner has maternity privileges at a hospital or birth centre; and (e) the service includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and (f) a service to which item 16591 applies is not provided in relation to the same pregnancy.Payable once only for a pregnancy	290.9	329.7	
16591	1/01/2010	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/01/2010	1/07/2021	148.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Planning and management, by a practitioner, of a pregnancy if: (a) the pregnancy has progressed beyond 28 weeks gestation; and (b) the service includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and (c) a service to which item 16590 applies is not provided in relation to the same pregnancy.Payable once only for a pregnancy	111.3	126.15	
16600	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	INTERVENTIONAL TECHNIQUES AMNIOCENTESIS, diagnostic	49.55	56.15	
16603	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	126.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	CHORIONIC VILLUS SAMPLING, by any route	95.1	107.8	
16606	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	253.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Fetal blood sampling, using interventional techniques from umbilical cord or fetus, including fetal neuromuscular blockade and amniocentesis (Anaes.)	189.85	215.15	Y
16609	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	516.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	FOETAL INTRAVASCULAR BLOOD TRANSFUSION, using blood already collected, including neuromuscular blockade, amniocentesis and foetal blood sampling (Anaes.)	387.1	438.7	Y
16612	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	406.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	FOETAL INTRAPERITONEAL BLOOD TRANSFUSION, using blood already collected, including neuromuscular blockade, amniocentesis and foetal blood sampling - not performed in conjunction with a service described in Item 16609 (Anaes.)	304.55	345.15	Y
16615	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	216.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	FOETAL INTRAPERITONEAL BLOOD TRANSFUSION, using blood already collected, including neuromuscular blockade, amniocentesis and foetal blood sampling - performed in conjunction with a service described in Item 16609 (Anaes.)	162.25	183.9	Y
16618	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	216.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	AMNIOCENTESIS, THERAPEUTIC, when indicated because of polyhydramnios with at least 500ml being aspirated	162.25	183.9	
16621	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	216.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	AMNIOINFUSION, for diagnostic or therapeutic purposes in the presence of severe oligohydramnios	162.25	183.9	
16624	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	311.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	FOETAL FLUID FILLED CAVITY, drainage of	233.45	264.6	
16627	1/07/1995	[Table]	3	T4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/07/1995	1/07/2021	633.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	FETO-AMNIOTIC SHUNT, insertion of, into fetal fluid filled cavity, including neuromuscular blockade and amniocentesis	475.25	545.75	
17610	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	ANAESTHETIST, PRE-ANAESTHESIA CONSULTATION (Professional attendance by a medical practitionerin the practice of ANAESTHESIA) -a BRIEF consultation involving a targeted history and limited examination (including the cardio-respiratory system) -AND of not more than 15 minutes s duration, not being a service associated with a service to which Items 2801 - 3000 apply	34.05	38.6	
17615	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and an extensive examination of multiple systems and the formulation of a written patient management plan documented in the patient notes - and of more than 15 minutes but not more than 30 minutes duration, not being a service associated with a service to which Items 2801 - 3000 applies	67.8	76.8	
17620	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	125.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems involving a detailed history and comprehensive examination of multiple systems and the formulation of a written patient management plan documented in the patient notes - and of more than 30 minutes but not more than 45 minutes duration, not being a service associated with a service to which Items 2801 - 3000 apply	93.9	106.4	
17625	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems involving an exhaustive history and comprehensive examination of multiple systems , the formulation of a written patient management plan following discussion with relevant health care professionals and/or the patient, involving medical planning of high complexity documented in the patient notes - and of more than 45 minutes duration, not being a service associated with a service to which Items 2801 - 3000 apply	119.55	135.45	
17640	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	ANAESTHETIST, REFERRED CONSULTATION (other than prior to anaesthesia) (Professional attendance by a specialist anaesthetist in the practice of ANAESTHESIA where the patient is referred to him or her) a BRIEF consultation involving a short history and limited examination -AND of not more than 15 minutesduration, not being a service associated with a service to which Items 2801 - 3000 apply	34.05	38.6	
17645	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	-a consultation involving a selective history and examination of multiple systems andthe formulation of a written patient management plan -AND of more than 15 minutes but not more than 30 minutes duration, not being a service associated with a service to which Items 2801 - 3000 apply.	67.8	76.8	
17650	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	125.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	-a consultation involving a detailed history and comprehensive examination of multiple systems and the formulation of a written patient management plan -AND of more than 30 minutes but not more than 45 minutes duration, not being a service associated with a service to which Items 2801 - 3000 apply	93.9	106.4	
17655	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	159.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	-a consultation involving an exhaustive history and comprehensive examination of multiple systems andthe formulation of a written patient management plan following discussion with relevant health care professionals and/or the patient, involving medical planning of high complexity, -AND of more than 45 minutes duration, not being a service associated with a service to which Items 2801 - 3000 apply.	119.55	135.45	
17680	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	ANAESTHETIST, CONSULTATION, OTHER (Professional attendance by an anaesthetist in the practice of ANAESTHESIA) -a consultation immediately prior to the institution of a major regional blockade in a patient in labour, where no previous anaesthesia consultation has occurred, not being a service associated with a service to which Items 2801 - 3000 apply.	67.8	76.8	

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17690	1/11/2006	[Table]	3	T6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2006	1/07/2021	41.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	-Where a pre-anaesthesia consultation covered by an item in the range 17615-17625 is performed in-rooms: If: (a) the service is provided to a patient prior to an admitted patient episode of care involving anaesthesia; and (b) the service is not providedto an admitted patient of a hospital; and (c) the service is not provided on the day of admission to hospital for the subsequent episode of care involving anaesthesia services; and (d) the service is of more than 15 minutes duration not being a service associated with a service to which items 2801 - 3000 apply.		31.35	35.5
18213	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Intravenous regional anaesthesia of limb by retrograde perfusion of local anaesthetic agent		69.15	78.4
18216	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	197.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, including up to 1 hour of continuous attendance by the medical practitioner Applicable once per presentation, per medical practitioner, per complete new procedure (Anaes.)		148.2	168 Y
18219	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/1993			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, if continuous attendance by the medical practitioner extends beyond the first hour (Anaes.)	The fee for item 18216 plus $19.80 for each additional 15 minutes or part thereof beyond the first 1/07/2021 hour of attendance by the medical practitioner.		Y
18222	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	39.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Continuous infusion or injection by catheter of a therapeutic substance (not contrast agent) to maintain regional anaesthesia or analgesia, subsequent injection or revision of, if the period of continuous medical practitioner attendance is 15 minutes or less		29.4	33.3
18225	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	52.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Continuous infusion or injection by catheter of a therapeutic substance (not contrast agent) to maintain regional anaesthesia or analgesia, subsequent injection or revision of, if the period of continuous medical practitioner attendance is more than 15 minutes		39.05	44.25
18226	1/11/2002	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	296.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, including up to 1 hour of continuous attendance by the medical practitioner, for a patient in labour, where the service is provided in the after hours period, being the period from 6pm to 8am on any weekday, or any time on a Saturday, a Sunday or a public holiday. Applicable once per presentation, per medical practitioner, per complete new procedure		222.3	251.9
18227	1/11/2002	[Table]	3	T7	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/2002			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, where continuous attendance by a medical practitioner extends beyond the first hour, for a patient in labour, where the service is provided in the after hours period, being the period from 6pm to 8am on any weekday, or any time on a Saturday, a Sunday or a public holiday.	The fee for item 18226 plus $29.75 for each additional 15 minutes or part there of beyond the first 1/07/2021 hour of attendance by the medical practitioner.		
18228	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Interpleural block, initial injection or commencement of infusion of a therapeutic substance, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		48.8	55.3
18230	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	248.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Intrathecal or epidural injection of neurolytic substance (not contrast agent) by any route, including transforaminal route (Anaes.)		186.1	210.9 Y
18232	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	197.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Intrathecal or epidural injection (including transforaminal and transforaminal approaches) of therapeutic substance or substances (anaesthetic agent(s) or chemotherapeutic agent(s)) other than a service to which another item in this Group applies, and (b) not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach (Anaes.)		148.2	168 Y
18233	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	197.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	EPIDURAL INJECTIONS and/or blood patch (Anaes.)		148.2	168 Y
18234	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Trigeminal nerve, peripheral branch (ophthalmic, maxillary or mandibular branches, excluding infraorbital nerve), injection of an anaesthetic agent or steroid, but not in association with a service to which an item in Group T8 applies, unless a targeted percutaneous technique is used (Anaes.)		97.45	110.45 Y
18236	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Trigeminal nerve, peripheral branch (including infraorbital nerve), injection of an anaesthetic agent, but not in association with a service to which an item in Group T8 applies, unless a targeted percutaneous technique is used (Anaes.)		48.8	55.3 Y
18238	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	39.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Facial nerve, injection of an anaesthetic agent, other than a service associated with a service to which item 18240 applies, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		29.4	33.3
18240	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	97.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	RETROBULBAR OR PERIBULBAR INJECTION of an anaesthetic agent		73.05	82.8
18242	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	39.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	GREATER OCCIPITAL NERVE, injection of an anaesthetic agent (Anaes.)		29.4	33.3 Y
18244	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	104.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Vagus nerve, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		78.7	89.2
18248	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	PHRENIC NERVE, injection of an anaesthetic agent		69.15	78.4
18250	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	SPINAL ACCESSORY NERVE, injection of an anaesthetic agent		48.8	55.3
18252	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	104.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervical plexus, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		78.7	89.2
18254	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	104.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Brachial plexus, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		78.7	89.2
18256	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	SUPRASCAPULAR NERVE, injection of an anaesthetic agent		48.8	55.3
18258	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	INTERCOSTAL NERVE (single), injection of an anaesthetic agent		48.8	55.3
18260	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	INTERCOSTAL NERVES (multiple), injection of an anaesthetic agent		69.15	78.4
18262	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Ilio inguinal, iliohypogastric or genitofemoral nerves, one or more of, injections of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach (Anaes.)		48.8	55.3 Y
18264	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	104.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Pudendal nerve or dorsal nerve (or both), injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		78.7	89.2
18266	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Ulnar, radial or median nerve, main trunk of, one or more of, injections of an anaesthetic agent, not being associated with a brachial plexus block, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		48.8	55.3
18268	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	OBTURATOR NERVE, injection of an anaesthetic agent		69.15	78.4
18270	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	FEMORAL NERVE, injection of an anaesthetic agent		69.15	78.4
18272	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	SAPHENOUS, SURAL, PORLITEAL OR POSTERIOR TIBIAL NERVE, MAIN TRUNK OF, 1 or more of, injection of an anaesthetic agent		48.8	55.3
18276	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	PARAVERTEBRAL NERVES, injection of an anaesthetic agent, (multiple levels)		97.45	110.45
18278	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Sciatic nerve, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach		69.15	78.4
18280	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Sphenopalatine ganglion, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach (Anaes.)		97.45	110.45 Y
18282	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	104.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	CAROTID SINUS, injection of an anaesthetic agent, as an independent percutaneous procedure		78.7	89.2
18284	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	153.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervical or thoracic sympathetic chain, injection of an anaesthetic agent (Anaes.)		115.2	130.6 Y
18286	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	153.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Lumbar or pelvic sympathetic chain, injection of an anaesthetic agent (Anaes.)		115.2	130.6 Y
18288	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	153.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Coeliac plexus or splanchnic nerves, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach (Anaes.)		115.2	130.6 Y
18290	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	259.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cranial nerve other than trigeminal, destruction by a neurolytic agent under image guidance, other than a service associated with the injection of botulinum toxin (Anaes.)		194.9	220.9 Y
18292	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Nerve branch, destruction by a neurolytic agent under image guidance, other than a service to which another item in this Group applies or a service associated with the injection of botulinum toxin except a service to which item 18354 applies (Anaes.)		97.45	110.45 Y
18294	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	183.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Coeliac plexus or splanchnic nerves, destruction by a neurolytic agent under image guidance (Anaes.)		137.4	155.7 Y
18296	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	156.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Lumbar or pelvic sympathetic chain, destruction by a neurolytic agent under image guidance (Anaes.)		117.5	133.2 Y
18297	1/11/2019	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	61.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Assistance at the administration of an epidural blood patch (a service to which item 18233 applies) by another medical practitioner		46.35	52.5
18298	1/11/1993	[Table]	3	T7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	183.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1993	CERVICAL OR THORACIC SYMPATHETIC CHAIN, destruction by a neurolytic agent (Anaes.)		137.4	155.7 Y
18350	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of hemifacial spasm in a patient who is at least 12 years of age, including all such injections on any one day		97.45	110.45
18351	1/11/2005	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport), injection of, for the treatment of hemifacial spasm in a patient who is at least 18 years of age, including all such injections on any one day		97.45	110.45
18353	1/04/2015	[Table]	3	T11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2015	1/07/2021	259.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2015	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox) or Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport), injection of, for the treatment of cervical dystonia (spasmodic torticollis), including all such injections on any one day		194.9	220.9
18354	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox) or Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport), injection of, for the treatment of dynamic equinus foot deformity (including equinovarus and equinovalgus) due to spasticity in an ambulant cerebral palsy patient, if (a) the patient is at least 2 years of age; and (b) the treatment is for all or any of the muscles subserving one functional activity and supplied by one motor nerve, with a maximum of 4 sets of injections for the patient on any one day (with a maximum of 2 sets of injections for each lower limb), including all injections per set (Anaes.)		97.45	110.45 Y

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18360	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), or Clostridium Botulinum Type A Toxin Haemagglutinin Complex (Dysport)injection of, for the treatment of moderate to severe focal spasticity, if: (a)the patient is at least 18 years of age; and (b)the spasticity is associated with a previously diagnosed neurological disorder; and (c)treatment is provided as: (i)second line therapy when standard treatment for the conditions has failed; or (ii)an adjunct to physical therapy; and (d)the treatment is for all or any of the muscles subserving one functional activity and supplied by one motor nerve, with a maximum of 4 sets of injections for the patient on any one day (with a maximum of 2 sets of injections for each limb), including all injections per set; and (e)the treatment is not provided on the same occasion as a service mentioned in item 18161	97.45	110.45
18361	1/07/2011	[Table]	3	T11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2020	Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport) or Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of moderate to severe upper limb spasticity due to cerebral palsy if: (a) the patient is at least 2 years of age; and (b) the treatment is for all or any of the muscles subserving one functional activity and supplied by one motor nerve, with a maximum of 4 sets of injections for the patient on any one day (with a maximum of 2 sets of injections for each upper limb), including all injections per set (Anaes.)	97.45	110.45	Y
18362	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	256.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of severe primary axillary hyperhidrosis, including all injections on any one day, if: (a)the patient is at least 12 years of age; and (b)the patient has been implanted of, or has not responded to, topical aluminium chloride hexahydrate; and (c)the patient has not had treatment with botulinum toxin within the immediately preceding 4 months; and (d)if the patient has had treatment with botulinum toxin within the previous 12 months - the patient had treatment on no more than 2 separate occasions (Anaes.)	192.55	218.2	Y
18365	1/04/2015	[Table]	3	T11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2015	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/08/2020	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox) or Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport) or IncobotulinumtoxinA (Xeomin), injection of, for the treatment of moderate to severe spasticity of the upper limb following an acute event,if: (a) the patient is at least 18 years of age; and (b) treatment is provided as: (i)second line therapy when standard treatment for the condition has failed; or (ii) an adjunct to physical therapy; and (c) the patient does not have established severe contracture in the limb that is to be treated; and (d) the treatment is for all or any of the muscles subserving one functional activity and supplied by one motor nerve, with a maximum of 4 sets of injections for the patient on any one day (with a maximum of 2 sets of injections for each upper limb), including all injections per set; and (e) for a patient who has received treatment on 2 previous separate occasions - the patient has responded to the treatment	97.45	110.45	
18366	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	142.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of strabismus, including all such injections on any one day and associated electromyography (Anaes.)	122.1	138.35	Y
18368	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	277.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of spasmodic dysphonia, including all such injections on any one day	208.4	236.2	
18369	1/04/2015	[Table]	3	T11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2015	1/07/2021	46.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2015	Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport) or IncobotulinumtoxinA (Xeomin), injection of, for the treatment of unilateral blepharospasm in a patient who is at least 18 years of age, including all such injections on any one day (Anaes.)	35.15	39.85	Y
18370	1/05/2003	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	46.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of unilateral blepharospasm in a person who is at least 12 years of age, including all such injections on any one day (Anaes.)	35.15	39.85	Y
18372	1/11/2006	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of bilateral blepharospasm, in a patient who is at least 12 years of age; including all such injections on any one day (Anaes.)	97.45	110.45	Y
18374	1/04/2015	[Table]	3	T11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2015	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2015	Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport) or IncobotulinumtoxinA (Xeomin), injection of, for the treatment of bilateral blepharospasm in a patient who is at least 18 years of age, including all such injections on any one day (Anaes.)	97.45	110.45	Y
18375	1/10/2013	[Table]	3	T11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	A	1/10/2013	1/07/2021	239.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/10/2013	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), intravesical injection of, with cystoscopy, for the treatment of urinary incontinence, including all such injections on any one day, if: (a) the urinary incontinence is due to neurogenic detrusor overactivity as demonstrated by urodynamic study of a patient with: (i) multiple sclerosis; or (ii) spinal cord injury; or (iii) spina bifida and who is at least 18 years of age; and (b) the patient has urinary incontinence that is inadequately controlled by anti-cholinergic therapy, as manifested by having experienced at least 14 episodes of urinary incontinence per week before commencement of treatment with botulinum toxin type A; and (c)the patient is willing and able to self-catheterise; and (d) the requirements relating to botulinum toxin type A under the Pharmaceutical Benefits Scheme are complied with; and (e) treatment is not provided on the same occasion as a service described in item 104, 105, 110, 116, 119, 11800 or 11919 For each patient - applicable not more than once except if the patient achieves at least a 50% reduction in urinary incontinence episodes from baseline at any time during the period of 6 to 12 weeks after first treatment (Anaes.)	179.4		Y
18377	1/03/2014	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2014	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of chronic migraine, including all injections in 1 day, if: (a)the patient is at least 18 years of age; and (b) the patient has experienced an inadequate response, intolerance or contraindication to at least 3 prophylactic migraine medications before commencement of treatment with botulinum toxin, as manifested by an average of 15 or more headache days per month, with at least 8 days of migraine, over a period of at least 6 months, before commencement of treatment with botulinum toxin; and (c)the requirements relating to botulinum toxin type A under the Pharmaceutical Benefits Scheme are complied with For each patient-applicable not more than twice except if the patient achieves and maintains at least a 50% reduction in the number of headache days per month from baseline after 2 treatment cycles (each of 12 weeks duration)	97.45	110.45	
18379	1/11/2014	[Table]	3	T11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2014	1/07/2021	239.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), intravesical injection of, with cystoscopy, for the treatment of urinary incontinence, including all such injections on any one day, if: (a)the urinary incontinence is due to idiopathic overactive bladder in a patient: and (b)the patient is at least 18 years of age; and (c)the patient has urinary incontinence that is inadequately controlled by at least 2 alternative anti- cholinergic agents, as manifested by having experienced at least 14 episodes of urinary incontinence per week before commencement of treatment with botulinum toxin; and (d)the patient is willing and able to self-catheterise; and (e)treatment is not provided on the same occasion as a service mentioned in item 104, 105, 110, 116, 119, 11800 or 11919 For each patient-applicable not more than once except if the patient achieves at least a 50% reduction in urinary incontinence episodes from baseline at any time during the period of 6 to 12 weeks after first treatment (H) (Anaes.)	179.4		Y
20100	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin, subcutaneous tissue, muscles, salivary glands or superficial vessels of the head including biopsy, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55	
20102	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for plastic repair of cleft lip (6 basic units)	92.7	105.1	
20104	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for electroconvulsive therapy (4 basic units)	61.8	70.05	
20120	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on external, middle or inner ear, including biopsy, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55	
20124	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for otoscopy (4 basic units)	61.8	70.05	
20140	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on eye, not being a service to which another item in this Group applies (5 basic units)	77.25	87.55	
20142	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for lens surgery (5 basic units)	77.25	87.55	
20143	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for retinal surgery (6 basic units)	92.7	105.1	
20144	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for corneal transplant (7 basic units)	108.15	122.6	
20145	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for orbitectomy (7 basic units)	108.15	122.6	
20146	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for biopsy of conjunctiva (5 basic units)	77.25	87.55	
20147	1/07/2008	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for squint repair (6 basic units)	92.7	105.1	
20148	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for ophthalmoscopy (4 basic units)	61.8	70.05	
20160	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Initiation of the management of anaesthesia for intranasal or accessory sinuses, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1	
20162	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Initiation of the management of anaesthesia for intranasal surgery for malignancy or for intranasal ablation (7 basic units)	108.15	122.6	
20164	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for biopsy of soft tissue of the nose and accessory sinuses (4 basic units)	61.8	70.05	
20170	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for intraoral procedures, including biopsy, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1	
20172	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for repair of cleft palate (7 basic units)	108.15	122.6	
20174	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision of retropharyngeal tumour (9 basic units)	139.05	157.6	
20176	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical intraoral surgery (10 basic units)	154.5	175.1	
20190	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on facial bones, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55	
20192	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for extensive surgery on facial bones (including prognathism and extensive facial bone reconstruction) (10 basic units)	154.5	175.1	
20210	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for intracranial procedures, not being a service to which another item in this Subgroup applies (15 basic units)	231.75	262.65	
20212	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for subdural taps (5 basic units)	77.25	87.55	
20214	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for burr holes of the cranium (9 basic units)	139.05	157.6	
20216	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	412	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for intracranial vascular procedures including those for aneurysms or arterio-venous abnormalities (20 basic units)	309	350.2	
20220	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for spinal fluid shunt procedures (10 basic units)	154.5	175.1	

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20222	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for ablation of an intracranial nerve (6 basic units)	92.7	105.1
20225	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	247.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for all cranial bone procedures (12 basic units)	185.4	210.15
20230	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	247.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the head or face (12 basic units)	185.4	210.15
20300	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the neck not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
20305	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for incision and drainage of large haematoma, large abscess, cellulitis or similar lesion or epiglottitis causing life threatening airway obstruction (15 basic units)	231.75	262.65
20320	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on oesophagus, thyroid, larynx, trachea, lymphatic system, muscles, nerves or other deep tissues of the neck, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
20321	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for laryngectomy, hemi laryngectomy, laryngopharyngectomy or pharyngectomy (10 basic units)	154.5	175.1
20330	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for laser surgery to the airway (excluding nose and mouth) (8 basic units)	123.6	140.1
20350	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on major vessels of neck, not being a service to which another item in this Subgroup applies (10 basic units)	154.5	175.1
20352	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for simple ligation of major vessels of neck (5 basic units)	77.25	87.55
20355	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	247.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the neck (12 basic units)	185.4	210.15
20400	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the anterior part of the chest, not being a service to which another item in this Subgroup applies (3 basic units)	46.35	52.55
20401	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the breast, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
20402	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/03/2022	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Initiation of management of anaesthesia for reconstructive procedures on breast including implant reconstruction and exchange (5 basic units)	77.25	87.55
20403	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Initiation of management of anaesthesia for axillary dissection or sentinel node biopsy (5 basic units)	77.25	87.55
20404	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for mastectomy (6 basic units)	92.7	105.1
20405	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for reconstructive procedures on the breast using myocutaneous flaps (8 basic units)	123.6	140.1
20406	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical or modified radical procedures on breast with internal mammary node dissection (13 basic units)	200.85	227.65
20410	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for electrical conversion of arrhythmias (4 basic units)	61.8	70.05
20420	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2022	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the posterior part of the chest not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
20440	1/05/2003	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2003	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous bone marrow biopsy of the sternum (4 basic units)	61.8	70.05
20450	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on clavicle, scapula or sternum, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
20452	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical surgery on clavicle, scapula or sternum (6 basic units)	92.7	105.1
20470	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for partial rib resection, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
20472	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for thoracoplasty (10 basic units)	154.5	175.1
20474	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical procedures on chest wall (13 basic units)	200.85	227.65
20475	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the anterior or posterior thorax (10 basic units)	154.5	175.1
20500	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on the oesophagus (15 basic units)	231.75	262.65
20520	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for all closed chest procedures (including rigid oesophagoscopy or bronchoscopy), not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
20522	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for needle biopsy of pleura (4 basic units)	61.8	70.05
20524	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for pneumocentesis (4 basic units)	61.8	70.05
20526	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for thoracoscopy (10 basic units)	154.5	175.1
20528	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for mediastinoscopy (8 basic units)	123.6	140.1
20540	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for thoracotomy procedures involving lungs, pleura, diaphragm, or mediastinum, not being a service to which another item in this Subgroup applies (13 basic units)	200.85	227.65
20542	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for pulmonary decortication (15 basic units)	231.75	262.65
20546	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for pulmonary resection with thoracoplasty (15 basic units)	231.75	262.65
20548	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for intrathoracic repair of trauma to trachea and bronchi (15 basic units)	231.75	262.65
20560	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	412	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2017	Initiation of the management of anaesthesia for: (a) open procedures on the heart, pericardium or great vessels of the chest; or (b) percutaneous insertion of a valvular prosthesis (20 basic units)	309	350.2
20600	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on cervical spine and/or cord, not being a service to which another item in this Subgroup applies (for myelography and discography see Items 23808 and 23814) (10 basic units)	154.5	175.1
20604	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for posterior cervical laminectomy with the patient in the sitting position (13 basic units)	200.85	227.65
20620	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on thoracic spine and/or cord, not being a service to which another item in this Subgroup applies (10 basic units)	154.5	175.1
20622	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for thoracolumbar sympathectomy (13 basic units)	200.85	227.65
20630	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures in lumbar region, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
20632	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for lumbar sympathectomy (7 basic units)	108.15	122.6
20634	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for chemonucleolysis (10 basic units)	154.5	175.1
20670	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for extensive spine and/or spinal cord procedures (13 basic units)	200.85	227.65
20680	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for manipulation of spine when performed in the operating theatre of a hospital (3 basic units)	46.35	52.55
20690	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous spinal procedures, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
20700	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the upper anterior abdominal wall, not being a service to which another item in this Subgroup applies (3 basic units)	46.35	52.55
20702	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous liver biopsy (4 basic units)	61.8	70.05
20703	1/11/2005	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2005	INITIATION OF MANAGEMENT OF ANAESTHESIA for all procedures on the nerves, muscles, tendons and fascia of the upper abdominal wall, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
20704	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the anterior or posterior upper abdomen (10 basic units)	154.5	175.1
20706	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Initiation of the management of anaesthesia for laparoscopic procedures in the upper abdomen, including laparoscopic cholecystectomy, not being a service to which another item in this Subgroup applies (7 basic units)	108.15	122.6
20730	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the upper posterior abdominal wall, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
20740	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for upper gastrointestinal endoscopic procedures (5 basic units)	77.25	87.55

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20745	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Initiation of the management of anaesthesia for any of the following:(a) upper gastrointestinal endoscopic procedures in association with acute gastrointestinal haemorrhage;(b) endoscopic retrograde cholangiopancreatography;(c) upper gastrointestinal endoscopic ultrasound;(d) percutaneous endoscopic gastrostomy;(e) upper gastrointestinal endoscopic mucosal resection of tumour. (7 basic units)	108.15	122.6
20750	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Initiation of the management of anaesthesia for hernia repairs to the upper abdominal wall, other than a service to which another item in this Subgroup applies. (5 basic units)	77.25	87.55
20752	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for repair of incisional hernia and/or wound dehiscence (6 basic units)	92.7	105.1
20754	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on an omphalocele (7 basic units)	108.15	122.6
20756	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	185.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for transabdominal repair of diaphragmatic hernia (9 basic units)	139.05	157.6
20770	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on major upper abdominal blood vessels (15 basic units)	231.75	262.65
20790	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Initiation of the management of anaesthesia for procedures within the peritoneal cavity in upper abdomen, including any of the following:(a) open cholecystectomy;(b) gastrectomy;(c) laparoscopically assisted nephrectomy;(d) bowel shunts (8 basic units)	123.6	140.1
20791	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2014	Initiation of the management of anaesthesia for bariatric surgery in a patient with clinically severe obesity (10 basic units)	154.5	175.1
20792	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for partial hepatectomy (excluding liver biopsy) (13 basic units)	200.85	227.65
20793	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for extended or trisegmental hepatectomy (15 basic units)	231.75	262.65
20794	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	247.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for pancreatectomy, partial or total (12 basic units)	185.4	210.15
20798	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for neuro-endocrine tumour removal in the upper abdomen (10 basic units)	154.5	175.1
20799	1/11/2002	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous procedures on an intra-abdominal organ in the upper abdomen (6 basic units)	92.7	105.1
20800	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the lower anterior abdominal walls, not being a service to which another item in this Subgroup applies (3 basic units)	46.35	52.55
20802	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for lipectomy of the lower abdomen (5 basic units)	77.25	87.55
20803	1/11/2005	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2005	INITIATION OF MANAGEMENT OF ANAESTHESIA for all procedures on the nerves, muscles, tendons and fascia of the lower abdominal wall, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
20804	1/11/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2008	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the anterior or posterior lower abdomen (10 basic units)	154.5	175.1
20806	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for laparoscopic procedures in the lower abdomen (7 basic units)	108.15	122.6
20810	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for lowerintestinal endoscopic procedures (4 basic units)	61.8	70.05
20815	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for extracorporeal shock wave lithotripsy to urinary tract (6 basic units)	92.7	105.1
20820	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin, its derivatives or subcutaneous tissue of the lower posterior abdominal wall (5 basic units)	77.25	87.55
20830	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for hernia repairs in lower abdomen, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
20832	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for repair of incisional herniae and/or wound dehiscence of the lower abdomen (6 basic units)	92.7	105.1
20840	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Initiation of the management of anaesthesia for all open procedures within the lower abdominal peritoneal cavity, including appendicectomy, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
20841	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for bowel resection, including laparoscopic bowel resection not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
20842	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for amniocentesis (4 basic units)	61.8	70.05
20844	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for abdominoperineal resection, including pull through procedures, ultra low anterior resection and formation of bowel reservoir (10 basic units)	154.5	175.1
20845	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical prostatectomy (10 basic units)	154.5	175.1
20846	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical hysterectomy (10 basic units)	154.5	175.1
20847	1/11/2005	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2005	INITIATION OF MANAGEMENT OF ANAESTHESIA for ovarian malignancy (10 basic units)	154.5	175.1
20848	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for pelvic exenteration (10 basic units)	154.5	175.1
20850	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	247.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for Caesarean section (12 basic units)	185.4	210.15
20855	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2017	INITIATION OF MANAGEMENT OF ANAESTHESIA for Caesarean hysterectomy or hysterectomy within 24 hours of birth (15 basic units)	231.75	262.65
20860	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for extraperitoneal procedures in lower abdomen, including those on the urinary tract, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
20862	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for renal procedures, including upper 1/3 of ureter (7 basic units)	108.15	122.6
20863	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for nephrectomy (10 basic units)	154.5	175.1
20864	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for total cystectomy (10 basic units)	154.5	175.1
20866	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for adrenalectomy (10 basic units)	154.5	175.1
20867	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for neuro-endocrine tumour removal in the lower abdomen (10 basic units)	154.5	175.1
20868	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for renal transplantation (donor or recipient) (10 basic units)	154.5	175.1
20880	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on major lower abdominal vessels, not being a service to which another item in this subgroup applies (15 basic units)	231.75	262.65
20882	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for inferior vena cava ligation (10 basic units)	154.5	175.1
20884	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous umbrella insertion (5 basic units)	77.25	87.55
20886	1/11/2002	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	123.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous procedures on an intra-abdominal organ in the lower abdomen (6 basic units)	92.7	105.1
20900	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2014	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the perineum not being a service to which another item in this Subgroup applies (3 basic units)	46.35	52.55
20902	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Initiation of the management of anaesthesia for anorectal procedures (including surgical haemorrhoidectomy, but not banding of haemorrhoids) (4 basic units)	61.8	70.05
20904	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical perineal procedures including radical perineal prostatectomy or radical vulvectomy (7 basic units)	108.15	122.6
20905	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the perineum (10 basic units)	154.5	175.1
20906	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for vulvectomy (4 basic units)	61.8	70.05
20910	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for transurethral procedures (including urethrocystoscopy), not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
20911	1/07/2008	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for endoscopic ureteroscopic surgery including laser procedures (5 basic units)	77.25	87.55
20912	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for transurethral resection of bladder tumour(s) (5 basic units)	77.25	87.55
20914	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for transurethral resection of prostate (7 basic units)	108.15	122.6
20916	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for bleeding post-transurethral resection (7 basic units)	108.15	122.6
20920	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2013	Initiation of management of anaesthesia for procedures on external genitalia, not being a service to which another item in this Subgroup applies. (4 basic units)	61.8	70.05
20924	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on undescended testis, unilateral or bilateral (4 basic units)	61.8	70.05
20926	1/11/2001	ITable	3	TSO	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical orchidectomy, inguinal approach (4 basic units)	61.8	70.05

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20928	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical orchidectomy, abdominal approach (6 basic units)	92.7	105.1
20930	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for orchiopexy, unilateral or bilateral (4 basic units)	61.8	70.05
20932	1/11/2001	[Table]	3	TIO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for complete amputation of penis (4 basic units)	61.8	70.05
20934	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for complete amputation of penis with bilateral inguinal lymphadenectomy (6 basic units)	92.7	105.1
20936	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for complete amputation of penis with bilateral inguinal and iliac lymphadenectomy (8 basic units)	123.6	140.1
20938	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for insertion of penile prosthesis (4 basic units)	61.8	70.05
20940	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2014	INITIATION OF MANAGEMENT OF ANAESTHESIA for per vagina and vaginal procedures (including biopsy of vagina, cervix or endometrium), not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
20942	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for vaginal procedures including repair operations and urinary incontinence procedures (perineal) (5 basic units)	77.25	87.55
20943	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for transvaginal assisted reproductive services (4 basic units)	61.8	70.05
20944	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for vaginal hysterectomy (6 basic units)	92.7	105.1
20946	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	INITIATION OF MANAGEMENT OF ANAESTHESIA for vaginal birth (8 basic units)	123.6	140.1
20948	1/11/2001	[Table]	3	TIO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for purse string ligation of cervix, or removal of purse string ligature (4 basic units)	61.8	70.05
20950	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for culdoscopy (5 basic units)	77.25	87.55
20952	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for hysteroscopy (4 basic units)	61.8	70.05
20954	1/11/2001	[Table]	3	TIO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for correction of inverted uterus (10 basic units)	154.5	175.1
20956	1/05/2002	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2002	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for evacuation of retained products of conception, as a complication of confinement (4 basic units)	61.8	70.05
20958	1/05/2002	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2002	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	INITIATION OF MANAGEMENT OF ANAESTHESIA for manual removal of retained placenta or for repair of vaginal or perineal tear following birth (5 basic units)	77.25	87.55
20960	1/05/2002	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2002	1/07/2021	144.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for vaginal procedures in the management of post partum haemorrhage (blood transfusion, hysterectomy) (7 basic units)	108.15	122.6
21100	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the anterior pelvic region (anterior to iliac crest), except external genitalia (3 basic units)	46.35	52.55
21110	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin, its derivatives or subcutaneous tissue of the pelvic region (posterior to iliac crest), except perineum (5 basic units)	77.25	87.55
21112	1/05/2003	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2003	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous bone marrow biopsy of the anterior iliac crest (4 basic units)	61.8	70.05
21114	1/05/2003	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2003	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous bone marrow biopsy of the posterior iliac crest (5 basic units)	77.25	87.55
21116	1/05/2003	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2003	INITIATION OF MANAGEMENT OF ANAESTHESIA for percutaneous bone marrow harvesting from the pelvis (6 basic units)	92.7	105.1
21120	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the bony pelvis (6 basic units)	92.7	105.1
21130	1/11/2001	[Table]	3	TIO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for body cast application or revision when performed in the operating theatre of a hospital (3 basic units)	46.35	52.55
21140	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for interpelviabdominal (hind-quarter) amputation (15 basic units)	231.75	262.65
21150	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical procedures for tumour of the pelvis, except hind-quarter amputation (10 basic units)	154.5	175.1
21155	1/07/2008	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the anterior or posterior pelvis (10 basic units)	154.5	175.1
21160	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures involving symphysis pubis or sacroiliac joint when performed in the operating theatre of a hospital (4 basic units)	61.8	70.05
21170	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures involving symphysis pubis or sacroiliac joint (8 basic units)	123.6	140.1
21195	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the upper leg (3 basic units)	46.35	52.55
21199	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on nerves, muscles, tendons, fascia or bursae of the upper leg (4 basic units)	61.8	70.05
21200	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures involving hip joint when performed in the operating theatre of a hospital (4 basic units)	61.8	70.05
21202	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arthroscopic procedures of the hip joint (4 basic units)	61.8	70.05
21210	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures involving hip joint, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
21212	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for hip disarticulation (10 basic units)	154.5	175.1
21214	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2022	Initiation of management of anaesthesia for primary total hip replacement (10 basic units)	154.5	175.1
21215	1/03/2022	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/2022	1/03/2022	309	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2022	Initiation of management of anaesthesia for revision total hip replacement (15 basic units)	231.75	262.65
21216	1/11/2005	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	236.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	INITIATION OF MANAGEMENT OF ANAESTHESIA for bilateral total hip replacement (14 basic units)	216.3	245.15
21220	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures involving upper 2/3 of femur when performed in the operating theatre of a hospital (4 basic units)	61.8	70.05
21230	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures involving upper 2/3 of femur, not being a service to which another item in this Subgroup applies (6 basic units)	92.7	105.1
21232	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for above knee amputation (5 basic units)	77.25	87.55
21234	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical resection of the upper 2/3 of femur (8 basic units)	123.6	140.1
21260	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures involving veins of upper leg, including exploration (4 basic units)	61.8	70.05
21270	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures involving arteries of upper leg, including bypass graft, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
21272	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for femoral artery ligation (4 basic units)	61.8	70.05
21274	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for femoral artery embolectomy (6 basic units)	92.7	105.1
21275	1/07/2008	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the upper leg (10 basic units)	154.5	175.1
21280	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for microsurgical reimplantation of upper leg (15 basic units)	231.75	262.65
21300	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the knee and/or popliteal area (3 basic units)	46.35	52.55
21321	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on nerves, muscles, tendons, fascia or bursae of knee and/or popliteal area (4 basic units)	61.8	70.05
21340	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on lower 1/3 of femur when performed in the operating theatre of a hospital (4 basic units)	61.8	70.05
21360	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on lower 1/3 of femur (5 basic units)	77.25	87.55
21380	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on knee joint when performed in the operating theatre of a hospital (3 basic units)	46.35	52.55
21382	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arthroscopic procedures of knee joint (4 basic units)	61.8	70.05
21390	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on upper ends of tibia, fibula, and/or patella when performed in the operating theatre of a hospital (3 basic units)	46.35	52.55
21392	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on upper ends of tibia, fibula, and/or patella (4 basic units)	61.8	70.05
21400	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on knee joint, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21402	1/11/2001	ITable]	3	TIO	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for knee replacement (7 basic units)	108.15	122.6

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21403	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for bilateral knee replacement (10 basic units)	154.5	175.1
21404	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for disarticulation of knee (5 basic units)	77.25	87.55
21420	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for cast application, removal, or repair involving knee joint, undertaken in a hospital (3 basic units)	46.35	52.55
21430	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on veins of knee or popliteal area, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21432	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for repair of arteriovenous fistula of knee or popliteal area (5 basic units)	77.25	87.55
21440	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on arteries of knee or popliteal area, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
21445	1/07/2008	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the knee and/or popliteal area (10 basic units)	154.5	175.1
21460	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of lower leg, ankle, or foot (3 basic units)	46.35	52.55
21461	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on nerves, muscles, tendons, or fascia of lower leg, ankle, or foot, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21462	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on lower leg, ankle, or foot (3 basic units)	46.35	52.55
21464	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arthroscopic procedure of ankle joint (4 basic units)	61.8	70.05
21472	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for repair of Achilles tendon (5 basic units)	77.25	87.55
21474	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for gastrocnemius recession (5 basic units)	77.25	87.55
21480	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on bones of lower leg, ankle, or foot, including amputation, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21482	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical resection of bone involving lower leg, ankle or foot (5 basic units)	77.25	87.55
21484	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for osteotomy or osteoplasty of tibia or fibula (5 basic units)	77.25	87.55
21486	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for total ankle replacement (7 basic units)	108.15	122.6
21490	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for lower leg cast application, removal or repair, undertaken in a hospital (3 basic units)	46.35	52.55
21500	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on arteries of lower leg, including bypass graft, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
21502	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for embolectomy of the lower leg (6 basic units)	92.7	105.1
21520	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on veins of lower leg, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21522	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for venous thrombectomy of the lower leg (5 basic units)	77.25	87.55
21530	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for microsurgical reimplantation of lower leg, ankle or foot (15 basic units)	231.75	262.65
21532	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for microsurgical reimplantation of toe (8 basic units)	123.6	140.1
21535	1/07/2008	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the lower leg (10 basic units)	154.5	175.1
21600	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the shoulder or axilla (3 basic units)	46.35	52.55
21610	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on nerves, muscles, tendons, fascia or bursae of shoulder or axilla including axillary dissection (5 basic units)	77.25	87.55
21620	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on humeral head and neck, sternoclavicular joint, acromioclavicular joint, or shoulder joint when performed in the operating theatre of a hospital (4 basic units)	61.8	70.05
21622	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arthroscopic procedures of shoulder joint (5 basic units)	77.25	87.55
21630	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on humeral head and neck, sternoclavicular joint, acromioclavicular joint orshoulder joint, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
21632	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical resection involving humeral head and neck, sternoclavicular joint, acromioclavicular joint or shoulder joint (6 basic units)	92.7	105.1
21634	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for shoulder disarticulation (9 basic units)	138.05	157.6
21636	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for interthoracoscapular (forequarter) amputation (15 basic units)	231.75	262.65
21638	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for total shoulder replacement (10 basic units)	154.5	175.1
21650	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on arteries of shoulder or axilla, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
21652	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures for axillary-brachial aneurysm (10 basic units)	154.5	175.1
21654	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for bypass graft of arteries of shoulder or axilla (8 basic units)	123.6	140.1
21656	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for axillary-femoral bypass graft (10 basic units)	154.5	175.1
21670	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on veins of shoulder or axilla (4 basic units)	61.8	70.05
21680	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for shoulder cast application, removal or repair, not being a service to which another item in this Subgroup applies, when undertaken in a hospital (3 basic units)	46.35	52.55
21682	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for shoulder spica application when undertaken in a hospital (4 basic units)	61.8	70.05
21685	1/07/2008	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the shoulder or the axilla (10 basic units)	154.5	175.1
21700	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the upper arm or elbow (3 basic units)	46.35	52.55
21710	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on nerves, muscles, tendons, fascia or bursae of upper arm or elbow, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21712	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open tenotomy of the upper arm orelbow (5 basic units)	77.25	87.55
21714	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for tenoplasty of the upper arm orelbow (5 basic units)	77.25	87.55
21716	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for tenodesis for rupture of long tendon of biceps (5 basic units)	77.25	87.55
21730	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on the upper arm orelbow when performed in the operating theatre of a hospital (3 basic units)	46.35	52.55
21732	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arthroscopic procedures of elbow joint (4 basic units)	61.8	70.05
21740	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on the upper arm or elbow, not being a service to which another item in this Subgroup applies (5 basic units)	77.25	87.55
21756	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radical procedures on the upper arm or elbow (6 basic units)	92.7	105.1
21760	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for total elbow replacement (7 basic units)	108.15	122.6
21770	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on arteries of upper arm, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
21772	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for embolectomy of arteries of the upper arm (6 basic units)	92.7	105.1
21780	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on veins of upper arm, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21785	1/07/2008	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the upper arm or elbow (10 basic units)	154.5	175.1
21790	1/11/2001	[Table]	3	TSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for microsurgical reimplantation of upper arm (15 basic units)	231.75	262.65

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21800	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the skin or subcutaneous tissue of the forearm, wrist or hand (3 basic units)	46.35	52.55
21810	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the nerves, muscles, tendons, fascia, or bursae of the forearm, wrist or hand (4 basic units)	61.8	70.05
21820	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for closed procedures on the radius, ulna, wrist, or hand bones when performed in the operating theatre of a hospital (3 basic units)	46.35	52.55
21830	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for open procedures on the radius, ulna, wrist, or hand bones, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21832	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for total wrist replacement (7 basic units)	108.15	122.6
21834	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arthroscopic procedures of the wrist joint (4 basic units)	61.8	70.05
21840	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the arteries of forearm, wrist or hand, not being a service to which another item in this Subgroup applies (8 basic units)	123.6	140.1
21842	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for embolectomy of artery of forearm, wrist or hand (6 basic units)	92.7	105.1
21850	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for procedures on the veins of forearm, wrist or hand, not being a service to which another item in this Subgroup applies (4 basic units)	61.8	70.05
21860	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2007	INITIATION OF MANAGEMENT OF ANAESTHESIA for forearm, wrist, or hand cast application, removal, or repair when rendered to a patient as part of an episode of hospital treatment (3 basic units)	46.35	52.55
21865	1/07/2008	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	INITIATION OF MANAGEMENT OF ANAESTHESIA for microvascular free tissue flap surgery involving the forearm, wrist or hand (10 basic units)	154.5	175.1
21870	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for microsurgical reimplantation of forearm, wrist or hand (15 basic units)	231.75	262.65
21872	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for microsurgical reimplantation of a finger (8 basic units)	123.6	140.1
21878	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting where the area of burn involves not more than 3% of total body surface (3 basic units)	46.35	52.55
21879	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting,where the area of burn involves more than 3% but less than 10% of total body surface (5 basic units)	77.25	87.55
21880	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 10% or more but less than 20% of total body surface (7 basic units)	108.15	122.6
21881	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 20% or more but less than 30% of total body surface (9 basic units)	139.05	157.6
21882	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	226.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 30% or more but less than 40% of total body surface (11 basic units)	169.95	192.65
21883	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	267.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 40% or more but less than 50% of total body surface (13 basic units)	200.85	227.65
21884	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 50% or more but less than 60% of total body surface (15 basic units)	231.75	262.65
21885	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	350.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 60% or more but less than 70% of total body surface (17 basic units)	262.65	297.7
21886	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	391.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 70% or more but less than 80% of total body surface (19 basic units)	293.55	332.7
21887	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	432.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for excision or debridement of burns, with or without skin grafting, where the area of burn involves 80% or more of total body surface (21 basic units)	324.45	367.75
21900	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for injection procedure for hysterosalpingography (3 basic units)	46.35	52.55
21906	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for injection procedure for myelography: lumbar or thoracic (5 basic units)	77.25	87.55
21908	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for injection procedure for myelography: cervical (6 basic units)	92.7	105.1
21910	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for injection procedure for myelography: posterior fossa (9 basic units)	139.05	157.6
21912	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for injection procedure for discography: lumbar or thoracic (5 basic units)	77.25	87.55
21914	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for injection procedure for discography: cervical (6 basic units)	92.7	105.1
21915	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for peripheral arteriogram (5 basic units)	77.25	87.55
21916	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for arteriogramc cerebral, carotid or vertebral (5 basic units)	77.25	87.55
21918	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for retrograde arteriogram: brachial or femoral (5 basic units)	77.25	87.55
21922	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for computerised axial tomography scanning, magnetic resonance scanning, digital subtraction angiography scanning (6 basic units)	92.7	105.1
21925	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for retrograde cystography, retrograde urethrography or retrograde cystourethrography (4 basic units)	61.8	70.05
21926	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for fluoroscopy (4 basic units)	61.8	70.05
21930	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for bronchography (6 basic units)	92.7	105.1
21935	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for phlebography (5 basic units)	77.25	87.55
21936	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for heart, 2 dimensional real time transoesophageal examination (5 basic units)	77.25	87.55
21939	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for peripheral venous cannulation (3 basic units)	46.35	52.55
21941	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	144.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for cardiac catheterisation including coronary arteriography, ventriculography, cardiac mapping, insertion of automatic defibrillator or transvenous pacemaker (7 basic units)	108.15	122.6
21942	1/05/2002	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2002	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2002	INITIATION OF MANAGEMENT OF ANAESTHESIA for cardiac electrophysiological procedures including radio frequency ablation (10 basic units)	154.5	175.1
21943	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for central vein catheterisation or insertion of right heart balloon catheter (via jugular, subclavian or femoral vein) by percutaneous or open exposure (5 basic units)	77.25	87.55
21945	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for lumbar puncture, cisternal puncture, or epidural injection (5 basic units)	77.25	87.55
21949	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for harvesting of bone marrow for the purpose of transplantation (5 basic units)	77.25	87.55
21952	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Initiation of the management of anaesthesia for diagnostic muscle biopsy to assess for malignant hyperpyrexia (4 basic units)	61.8	70.05
21955	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for electroencephalography (5 basic units)	77.25	87.55
21959	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for brain stem evoked response audiometry (5 basic units)	77.25	87.55
21962	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for electrocochleography by extratympanic method or transtympanic membrane insertion method (5 basic units)	77.25	87.55
21965	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	INITIATION OF MANAGEMENT OF ANAESTHESIA as a therapeutic procedure if there is a clinical need for anaesthesia, not for headache of any etiology (5 basic units)	77.25	87.55
21969	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA during hyperbaric therapy where the medical practitioner is not confined in the chamber (including the administration of oxygen) (8 basic units)	123.6	140.1
21970	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA during hyperbaric therapy where the medical practitioner is confined in the chamber (including the administration of oxygen) (15 basic units)	231.75	262.65
21973	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for brachytherapy using radioactive sealed sources (5 basic units)	77.25	87.55
21976	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for therapeutic nuclear medicine (5 basic units)	77.25	87.55
21980	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for radiotherapy (5 basic units)	77.25	87.55

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23990	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA when no procedure ensues (3 basic units)	46.35	52.55
23992	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA performed on a person under the age of 10 years in connection with a procedure covered by an item which has not been identified as attracting an anaesthetic (4 basic units)	61.8	70.05
23997	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	INITIATION OF MANAGEMENT OF ANAESTHESIA in connection with a procedure covered by an item that does not include the word "Areas.)", other than a service to which Item 23965 or 23992 applies, if there is a clinical need for anaesthesia (4 basic units)	61.8	70.05
23002	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Administration of homologous blood or bone marrow already collected, when performed in association with the management of anaesthesia (4 basic units)	61.8	70.05
23007	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	ENDOTRACHEAL INTUBATION with flexible fibreoptic scope associated with difficult airway when performed in association with the administration of anaesthesia (4 basic units)	61.8	70.05
23008	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	DOUBLE LUMEN ENDOBRONCHIAL TUBE OR BRONCHIAL BLOCKER, insertion of when performed in association with the administration of anaesthesia (4 basic units)	61.8	70.05
23012	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Central venous, pulmonary arterial, systemic arterial or cardiac intravcaity blood pressure monitoring by indwelling catheter—once per day for each type of pressure for a patient:(a) when performed in association with the management of anaesthesia for the patient; and(b) other than a service to which item 13876 applies;(c) is categorised as having a high risk of complications or during the procedure develops either complications or a high risk of complications (3 basic units)	46.35	52.55
23014	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Central venous, pulmonary arterial, systemic arterial or cardiac intravcaity blood pressure monitoring by indwelling catheter—once per day for each type of pressure for a patient:(a) when performed in association with the management of anaesthesia for the patient; and(b) relating to another discrete operation on the same day for the patient; and(c) other than a service to which item 13876 applies;(d) who is categorised as having a high risk of complications or develops during the current procedure either complications or a high risk of complications (3 basic units)	46.35	52.55
23015	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	RIGHT HEART BALLOON CATHETER, insertion of, including pulmonary wedge pressure and cardiac output measurement, when performed in association with the administration of anaesthesia (6 basic units)	92.7	105.1
23020	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2012	CENTRAL VEIN CATHETERISATION by percutaneous or open exposure, not being a service to which Item 13318 applies, when performed in association with the administration of anaesthesia (4 basic units)	61.8	70.05
23025	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Intra-arterial cannulation when performed in association with the management of anaesthesia in a patient who:(a) is categorised as having a high risk of complications; or(b) develops a high risk of complications during the procedure (4 basic units)	61.8	70.05
23031	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Intrathecal or epidural injection (initial) of a therapeutic substance or substances, with or without insertion of a catheter, in association with anaesthesia and surgery, for post-operative pain management, not being a service to which 22036 applies (5 basic units)	77.25	87.55
23036	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	INTRATHECAL or EPIDURAL INJECTION (subsequent) of a therapeutic substance or substances, using an in-situ catheter, in association with anaesthesia and surgery, for postoperative pain management, not being a service associated with a service to which 22031 applies (3 basic units)	46.35	52.55
23041	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	41.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Perioperative introduction of a plexus or nerve block proximal to the lower leg or forearm for post operative pain management (2 basic units)	30.9	35.05
23042	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	20.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Introduction of a nerve block performed via a retrobulbar, peribulbar, or sub Tenon's approach, or other complex eye block, when administered by an anaesthetist perioperatively (1 basic units)	15.45	17.55
23051	1/11/2008	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2008	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	INTRA-OPERATIVE TRANSOESOPHAGEAL ECHOCARDIOGRAPHY - Monitoring in real time of the structure and function of the heart chambers, valves and surrounding structures, including assessment of blood flow, with appropriate permanent recording during procedures on the heart, pericardium or great vessels of the chest (not in association with items 55130, 55135 or 21936) (9 basic units)	139.05	157.6
23055	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	247.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	PERFUSION OF LIMB OR ORGAN using heart-lung machine or equivalent, not being a service associated with anaesthesia to which an item in Subgroup 21 applies (12 basic units)	185.4	210.15
23060	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	618	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	WHOLE BODY PERFUSION, CARDIAC BYPASS, where the heart-lung machine or equivalent is continuously operated by a medical perfusionist, other than a service associated with anaesthesia to which an item in Subgroup 21 applies (Anaes.) (30 basic units)	463.5	530.1 Y
23065	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	INDUCED CONTROLLED HYPOTHERMIA total body, being a service to which Item 22060 applies, not being a service associated with anaesthesia to which an item in Subgroup 21 applies (5 basic units)	77.25	87.55
23075	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	DEEP HYPOTHERMIC CIRCULATORY ARREST, with core temperature less than 22°c, including management of retrograde cerebral perfusion if performed, not being a service associated with anaesthesia to which an item in Subgroup 21 applies (15 basic units)	231.75	262.65
23900	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT BY A MEDICAL PRACTITIONER OF ANAESTHESIA for extraction of tooth or teeth with or without incision of soft tissue or removal of bone (6 basic units)	92.7	105.1
23905	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	INITIATION OF MANAGEMENT OF ANAESTHESIA for restorative dental work (6 basic units)	92.7	105.1
23910	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	20.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	ANAESTHESIA, PERFUSION OR ASSISTANCE AT ANAESTHESIA (a) administration of anaesthesia performed in association with an item in the range 20100 to 23997 or 22900 to 22905; or (b) perfusion performed in association with item 22060; or (c) for assistance at anaesthesia performed in association with items 25200 to 25205 for a period of: (FIFTEEN MINUTES OR LESS) (1 basic units)	15.45	17.55
23925	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	41.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	16 MINUTES TO 30 MINUTES (2 basic units)	30.9	35.05
23935	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	31 MINUTES to 45 MINUTES (3 basic units)	46.35	52.55
23945	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	82.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	46 MINUTES to 1:00 HOUR (4 basic units)	61.8	70.05
23955	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	103	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	1:01 HOURS to 1:15 HOURS (5 basic units)	77.25	87.55
23965	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	123.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	1:16 HOURS to 1:30 HOURS (6 basic units)	92.7	105.1
23975	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	161.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	1:31 HOURS to 1:45 HOURS (7 basic units)	108.15	122.6
23985	1/11/2019	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	164.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	1:46 HOURS to 2:00 HOURS (8 basic units)	123.6	140.1
23991	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	185.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	2:01 HOURS TO 2:10 HOURS (9 basic units)	139.05	157.6
23101	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	206	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	2:11 HOURS TO 2:20 HOURS (10 basic units)	154.5	175.1
23111	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	226.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	2:21 HOURS TO 2:30 HOURS (11 basic units)	169.95	192.65
23112	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	247.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	2:31 HOURS TO 2:40 HOURS (12 basic units)	185.4	210.15
23113	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	267.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	2:41 HOURS TO 2:50 HOURS (13 basic units)	200.85	227.65
23114	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	288.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	2:51 HOURS TO 3:00 HOURS (14 basic units)	216.3	245.15
23115	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	309	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	3:01 HOURS TO 3:10 HOURS (15 basic units)	231.75	262.65
23116	1/11/2005	[Table]	3	T10	[Table]	[Text]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	329.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	3:11 HOURS TO 3:20 HOURS (16 basic units)	247.2	280.2
23117	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	350.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	3:21 HOURS TO 3:30 HOURS (17 basic units)	262.65	297.7
23118	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	3:31 HOURS TO 3:40 HOURS (18 basic units)	278.1	315.2
23119	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	391.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	3:41 HOURS TO 3:50 HOURS (19 basic units)	293.55	332.7
23121	1/11/2005	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	412	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	3:51 HOURS TO 4:00 HOURS (20 basic units)	309	350.2
23170	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	432.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	4:01 HOURS TO 4:10 HOURS (21 basic units)	324.45	367.75
23180	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	453.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	4:11 HOURS TO 4:20 HOURS (22 basic units)	339.9	385.25
23190	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	473.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	4:21 HOURS TO 4:30 HOURS (23 basic units)	355.35	402.75
23200	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	494.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	4:31 HOURS TO 4:40 HOURS (24 basic units)	370.8	420.25
23210	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	515	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	4:41 HOURS TO 4:50 HOURS (25 basic units)	386.25	437.75
23220	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	535.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	4:51 HOURS TO 5:00 HOURS (26 basic units)	401.7	455.3
23230	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	556.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	5:01 HOURS TO 5:10 HOURS (27 basic units)	417.15	472.8
23240	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	576.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	5:11 HOURS TO 5:20 HOURS (28 basic units)	432.6	490.3
23250	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	597.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	5:21 HOURS TO 5:30 HOURS (29 basic units)	448.05	508.5
23260	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	618	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	5:31 HOURS TO 5:40 HOURS (30 basic units)	463.5	530.1
23270	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	638.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	5:41 HOURS TO 5:50 HOURS (31 basic units)	478.95	550.7
23280	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	659.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	(5:51 HOURS TO 6:00 HOURS (32 basic units)	494.4	571.3
23290	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	679.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	6:01 HOURS TO 6:10 HOURS (33 basic units)	509.85	591.9
23300	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	700.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	6:11 HOURS TO 6:20 HOURS (34 basic units)	525.3	612.5
23310	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	721	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	6:21 HOURS TO 6:30 HOURS (35 basic units)	540.75	633.1
23320	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	741.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	6:31 HOURS TO 6:40 HOURS (36 basic units)	556.2	653.7
23330	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	762.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	6:41 HOURS TO 6:50 HOURS (37 basic units)	571.65	674.3
23340	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	782.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	6:51 HOURS TO 7:00 HOURS (38 basic units)	587.1	694.9
23350	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	803.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	7:01 HOURS TO 7:10 HOURS (39 basic units)	602.55	715.5
23360	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	824	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	7:11 HOURS TO 7:20 HOURS (40 basic units)	618	736.1

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23370	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	844.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	7:23 HOURS TO 7:30 HOURS (41 basic units)	633.45	756.7
23380	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	865.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	7:31 HOURS TO 7:40 HOURS (42 basic units)	648.9	777.3
23390	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	885.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	7:41 HOURS TO 7:50 HOURS (43 basic units)	664.35	797.9
23400	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	906.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	7:51 HOURS TO 8:00 HOURS (44 basic units)	679.8	818.5
23410	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	927	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	8:01 HOURS TO 8:10 HOURS (45 basic units)	695.25	839.1
23420	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	947.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	8:11 HOURS TO 8:20 HOURS (46 basic units)	710.7	859.7
23430	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	968.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	8:21 HOURS TO 8:30 HOURS (47 basic units)	726.15	880.3
23440	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	988.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	8:31 HOURS TO 8:40 HOURS (48 basic units)	741.6	900.9
23450	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1009.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	26/01/2001	8:41 HOURS TO 8:50 HOURS (49 basic units)	757.05	921.5
23460	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1030	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	8:51 HOURS TO 9:00 HOURS (50 basic units)	772.5	942.1
23470	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1050.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	9:01 HOURS TO 9:10 HOURS (51 basic units)	787.95	962.7
23480	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1071.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	9:11 HOURS TO 9:20 HOURS (52 basic units)	803.4	983.3
23490	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1091.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	9:21 HOURS TO 9:30 HOURS (53 basic units)	818.85	1003.9
23500	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1112.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	9:31 HOURS TO 9:40 HOURS (54 basic units)	834.3	1024.5
23510	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1133	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	9:41 HOURS TO 9:50 HOURS (55 basic units)	849.75	1045.1
23520	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1153.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	9:51 HOURS TO 10:00 HOURS (56 basic units)	865.2	1065.7
23530	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1174.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	10:01 HOURS TO 10:10 HOURS (57 basic units)	880.65	1086.3
23540	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1194.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	10:11 HOURS TO 10:20 HOURS (58 basic units)	896.1	1106.9
23550	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1215.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	10:21 HOURS TO 10:30 HOURS (59 basic units)	911.55	1127.5
23560	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1236	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	10:31 HOURS TO 10:40 HOURS (60 basic units)	927	1148.1
23570	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1256.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	10:41 HOURS TO 10:50 HOURS (61 basic units)	942.45	1168.7
23580	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1277.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	10:51 HOURS TO 11:00 HOURS (62 basic units)	957.9	1189.3
23590	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1297.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	11:01 HOURS TO 11:10 HOURS (63 basic units)	973.35	1209.9
23600	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1318.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	11:11 HOURS TO 11:20 HOURS (64 basic units)	988.8	1230.5
23610	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1339	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	11:21 HOURS TO 11:30 HOURS (65 basic units)	1004.25	1251.1
23620	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1359.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	11:31 HOURS TO 11:40 HOURS (66 basic units)	1019.7	1271.7
23630	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1380.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	11:41 HOURS TO 11:50 HOURS (67 basic units)	1035.15	1292.3
23640	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1400.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	11:51 HOURS TO 12:00 HOURS (68 basic units)	1050.6	1312.9
23650	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1421.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	12:01 HOURS TO 12:10 HOURS (69 basic units)	1066.05	1333.5
23660	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1442	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	12:11 HOURS TO 12:20 HOURS (70 basic units)	1081.5	1354.1
23670	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1462.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	12:21 HOURS TO 12:30 HOURS (71 basic units)	1096.95	1374.7
23680	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1483.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	12:31 HOURS TO 12:40 HOURS (72 basic units)	1112.4	1395.3
23690	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1503.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	12:41 HOURS TO 12:50 HOURS (73 basic units)	1127.85	1415.9
23700	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1524.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	12:51 HOURS TO 13:00 HOURS (74 basic units)	1143.3	1436.5
23710	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1545	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	13:01 HOURS TO 13:10 HOURS (75 basic units)	1158.75	1457.1
23720	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1565.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	13:11 HOURS TO 13:20 HOURS (76 basic units)	1174.2	1477.7
23730	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1586.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	13:21 HOURS TO 13:30 HOURS (77 basic units)	1189.65	1498.3
23740	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1606.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	13:31 HOURS TO 13:40 HOURS (78 basic units)	1205.1	1518.9
23750	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1627.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	13:41 HOURS TO 13:50 HOURS (79 basic units)	1220.55	1539.5
23760	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1648	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	13:51 HOURS TO 14:00 HOURS (80 basic units)	1236	1560.1
23770	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1668.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	14:01 HOURS TO 14:10 HOURS (81 basic units)	1251.45	1580.7
23780	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1689.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	14:11 HOURS TO 14:20 HOURS (82 basic units)	1266.9	1601.3
23790	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1709.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	14:21 HOURS TO 14:30 HOURS (83 basic units)	1282.35	1621.9
23800	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1730.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	14:31 HOURS TO 14:40 HOURS (84 basic units)	1297.8	1642.5
23810	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1751	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	14:41 HOURS TO 14:50 HOURS (85 basic units)	1313.25	1663.1
23820	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1771.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	14:51 HOURS TO 15:00 HOURS (86 basic units)	1328.7	1683.7
23830	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1792.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	15:01 HOURS TO 15:10 HOURS (87 basic units)	1344.15	1704.3
23840	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1812.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	15:11 HOURS TO 15:20 HOURS (88 basic units)	1359.6	1724.9
23850	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1833.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	15:21 HOURS TO 15:30 HOURS (89 basic units)	1375.05	1745.5
23860	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1854	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	15:31 HOURS TO 15:40 HOURS (90 basic units)	1390.5	1766.1
23870	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1874.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	15:41 HOURS TO 15:50 HOURS (91 basic units)	1405.95	1786.7
23880	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1895.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	15:51 HOURS TO 16:00 HOURS (92 basic units)	1421.4	1807.3
23890	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1915.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	16:01 HOURS TO 16:10 HOURS (93 basic units)	1436.85	1827.9
23900	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1936.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	16:11 HOURS TO 16:20 HOURS (94 basic units)	1452.3	1848.5
23910	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1957	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	16:21 HOURS TO 16:30 HOURS (95 basic units)	1467.75	1869.1
23920	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1977.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	16:31 HOURS TO 16:40 HOURS (96 basic units)	1483.2	1889.7
23930	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	1998.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	16:41 HOURS TO 16:50 HOURS (97 basic units)	1498.65	1910.3
23940	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2018.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	16:51 HOURS TO 17:00 HOURS (98 basic units)	1514.1	1930.9
23950	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2039.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	17:01 HOURS TO 17:10 HOURS (99 basic units)	1529.55	1951.5
23960	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2060	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	17:11 HOURS TO 17:20 HOURS (100 basic units)	1545	1972.1
23970	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2080.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	17:21 HOURS TO 17:30 HOURS (101 basic units)	1560.45	1992.7
23980	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2101.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	17:31 HOURS TO 17:40 HOURS (102 basic units)	1575.9	2013.3
23990	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2121.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	17:41 HOURS TO 17:50 HOURS (103 basic units)	1591.35	2033.9
24100	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2142.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	17:51 HOURS TO 18:00 HOURS (104 basic units)	1606.8	2054.5
24101	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2163	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	18:01 HOURS TO 18:10 HOURS (105 basic units)	1622.25	2075.1
24102	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2183.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	18:11 HOURS TO 18:20 HOURS (106 basic units)	1637.7	2095.7
24103	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2204.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	18:21 HOURS TO 18:30 HOURS (107 basic units)	1653.15	2116.3
24104	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2224.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	18:31 HOURS TO 18:40 HOURS (108 basic units)	1668.6	2136.9
24105	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2245.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	18:41 HOURS TO 18:50 HOURS (109 basic units)	1684.05	2157.5
24106	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2266	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	18:51 HOURS TO 19:00 HOURS (110 basic units)	1699.5	2178.1
24107	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2286.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	19:01 HOURS TO 19:10 HOURS (111 basic units)	1714.95	2198.7
24108	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2307.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	19:11 HOURS TO 19:20 HOURS (112 basic units)	1730.4	2219.3
24109	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2327.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	19:21 HOURS TO 19:30 HOURS (113 basic units)	1745.85	2239.9
24110	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2348.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	19:31 HOURS TO 19:40 HOURS (114 basic units)	1761.3	2260.5
24111	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2369	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	19:41 HOURS TO 19:50 HOURS (115 basic units)	1776.75	2281.1
24112	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2389.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	19:51 HOURS TO 20:00 HOURS (116 basic units)	1792.2	2301.7
24113	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2410.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	20:01 HOURS TO 20:10 HOURS (117 basic units)	1807.65	2322.3
24114	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2430.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	20:11 HOURS TO 20:20 HOURS (118 basic units)	1823.1	2342.9
24115	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2451.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	20:21 HOURS TO 20:30 HOURS (119 basic units)	1838.55	2363.5
24116	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2472	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	20:31 HOURS TO 20:40 HOURS (120 basic units)	1854	2384.1
24117	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2492.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	20:41 HOURS TO 20:50 HOURS (121 basic units)	1869.45	2404.7
24118	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2513.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	20:51 HOURS TO 21:00 HOURS (122 basic units)	1884.9	2425.3
24119	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2533.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	21:01 HOURS TO 21:10 HOURS (123 basic units)	1900.35	2445.9
24120	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2554.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	21:11 HOURS TO 21:20 HOURS (124 basic units)	1915.8	2466.5
24121	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2575	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	21:21 HOURS TO 21:30 HOURS (125 basic units)	1931.25	2487.1
24122	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2595.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	21:31 HOURS TO 21:40 HOURS (126 basic units)	1946.7	2507.7
24123	1/11/2001	[Table]	3	TSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2616.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	21:41 HOURS TO 21:50 HOURS (127 basic units)	1962.15	2528.3

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24124	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2636.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	21:51 HOURS TO 22:00 HOURS (128 basic units) 1/05/2001		1077.6	2548.9	
24125	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2657.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22:01 HOURS TO 22:10 HOURS (129 basic units) 1/05/2001		1993.05	2569.5	
24126	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2678	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22:11 HOURS TO 22:20 HOURS (130 basic units) 1/05/2001		2008.5	2590.1	
24127	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2698.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22:21 HOURS TO 22:30 HOURS (131 basic units) 1/05/2001		2023.95	2610.7	
24128	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2719.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22:31 HOURS TO 22:40 HOURS (132 basic units) 1/05/2001		2039.4	2631.3	
24129	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2739.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22:41 HOURS TO 22:50 HOURS (133 basic units) 1/05/2001		2054.85	2651.9	
24130	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2760.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22:51 HOURS TO 23:00 HOURS (134 basic units) 1/05/2001		2070.3	2672.5	
24131	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2781	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23:01 HOURS TO 23:10 HOURS (135 basic units) 1/05/2001		2085.75	2693.1	
24132	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2801.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23:11 HOURS TO 23:20 HOURS (136 basic units) 1/05/2001		2101.2	2713.7	
24133	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2822.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23:21 HOURS TO 23:30 HOURS (137 basic units) 1/05/2001		2116.65	2734.3	
24134	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2842.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23:31 HOURS TO 23:40 HOURS (138 basic units) 1/05/2001		2132.1	2754.9	
24135	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2863.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23:41 HOURS TO 23:50 HOURS (139 basic units) 1/05/2001		2147.55	2775.5	
24136	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	2884	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	23:51 HOURS TO 24:00 HOURS (140 basic units) 1/05/2001		2163	2796.1	
25000	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	20.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ANAESTHESIA, PERFUSION or ASSISTANCE AT ANAESTHESIA (a) for anaesthesia performed in association with an item in the range 20100 to 21897 or 22900 to 22905; or (b) for perfusion performed in association with item 22063; or (c) for assistance at anaesthesia performed in association with items 25200 to 25205 Where the patient has severe systemic disease equivalent to ASA physical status indicator 3 (1 basic units) 1/11/2001		15.45	17.55	
25005	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	41.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Where the patient has severe systemic disease which is a constant threat to life equivalent to ASA physical status indicator 4 (2 basic units) 1/11/2001		30.9	35.05	
25010	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	61.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	For a patient who is not expected to survive for 24 hours with or without the operation, equivalent to ASA physical status indicator 5 (3 basic units) 1/05/2001		46.35	52.55	
25013	1/05/2020	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	20.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient is aged under 4 years (Anaes.) (1 basic units) 1/05/2020		15.45	17.55	Y
25014	1/05/2020	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	20.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient is aged 75 years or more (Anaes.) (1 basic units) 1/05/2020		15.45	17.55	Y
25020	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	41.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ANAESTHESIA, PERFUSION OR ASSISTANCE AT ANAESTHESIA - where the patient requires immediate treatment without which there would be significant threat to life or body part - not being a service associated with a service to which item 20100 or 20200 or 25000 applies (2 basic units) 1/11/2001		30.9	35.05	
25025	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/2001			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday (3 basic units) 1/07/2020	An additional amount of 50% of fee for the anaesthetic service.That is: (a) an anaesthesia item's range 20100 - 21897 or 22900, plus (b)an item range 23010 - 24136, plus(c) if applicable,an item range 25000-25014, plusdd) where performed, any assoc therapeautic or diagnostic service range 22002-22051 1/07/2020	
25030	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/2001			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Assistance in the management of anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday (3 basic units) 1/07/2020	50% of the fee for assistance at anaesthesia. That is: (a) an assistant anaesthesia item in the range 25200 - 25205, plus (b) an item range 23010-24136, plus (c) where applicable, an item range 25000-25014, plus (d) where performed, any associated therapeutic or diagnostic service 22002 -22051 1/07/2020	
25050	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/2001			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Perfusion, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday (3 basic units) 1/07/2020	An additional amount of 50% of the fee for the perfusion service. That is: (a) item 22060, plus (b) an item range 23010 - 24136, plus (c) where applicable, an item range 25000 - 25014, plus (d) where performed, any associated therapeutic or diagnostic service in the range 22002-22051 or 22065-22075 1/07/2020	
25200	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/2001			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ASSISTANCE IN THE ADMINISTRATION OF ANAESTHESIA on a patient in imminent danger of death requiring continuous life saving emergency treatment, to the exclusion of all other patients (5 basic units) 1/11/2001	An amount of $103.00 (5 basic units) plus an item in the range 23010 - 24136 plus, where applicable - an item in the range 25000 - 25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001 - 22051 1/07/2021	
25205	1/11/2001	[Table]	3	T10	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/2001			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ASSISTANCE IN THE ADMINISTRATION OF ELECTIVE ANAESTHESIA where: (i)the patient has complex airway problems; or (ii)the patient is a neonate or a complex paediatric case; or (iii)there is anticipated to be massive blood loss (greater than 50% of blood volume) during the procedure; or (iv)the patient is critically ill, with multiple organ failure; or (v)where the anaesthesia time exceeds 6 hours and the assistance is provided to the exclusion of all other patients (5 basic units) 1/11/2001	An amount of $103.00 (5 basic units) plus an item in the range 20100 - 24136 plus, where applicable - an item in the range 25000 - 25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001 - 22051 1/07/2021	
30001	1/11/1997	[Table]	3	T8	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/11/1997			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	OPERATIVE PROCEDURE, not being a service to which any other item in this Group applies, being a service to which an item in this Group would have applied had the procedure not been discontinued on medical grounds 1/11/1997	1/11/1998 50% of the fee which would have applied had the procedure not been discontinued	
30003	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	37.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	LOCALISED BURNS, dressing of, (not involving grafting)each attendance at which the procedure is performed, including any associated consultation 1/11/1995		28.35	32.15	
30006	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EXTENSIVE BURNS, dressing of, without anaesthesia (not involving grafting)each attendance at which the procedure is performed, including any associated consultation 1/11/1995		36.3	41.15	
30010	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	76.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	LOCALISED BURNS, dressing of, under general anaesthesia (not involving grafting) (Anaes.) 1/11/1995		57.75	Y	
30014	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	161.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EXTENSIVE BURNS, dressing of, under general anaesthesia (not involving grafting) (Anaes.) 1/11/1995		121.1	Y	
30017	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	BURNS, excision of, under general anaesthesia, involving not more than 30 per cent of body surface, where grafting is not carried out during the same operation (Anaes.) (Assist.) 1/11/1995		254.45	288.4	Y
30020	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	BURNS, excision of, under general anaesthesia, involving more than 10 per cent of body surface, where grafting is not carried out during the same operation (Anaes.) (Assist.) 1/11/1995		495.6	Y	
30023	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	WOUND OF SOFT TISSUE, traumatic, deep or extensively contaminated, debridement of, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed (Anaes.) (Assist.) 1/11/2005		254.45	288.4	Y
30024	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2005	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	WOUND OF SOFT TISSUE, debridement of extensively infected post-surgical incision or Fournier's Gangrene, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed (Anaes.) (Assist.) 1/11/2005		254.45	288.4	Y
30026	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	61.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, not on face or neck, small (NOT MORE THAN 7 CM LONG), superficial, not being a service to which another item in Group T4 applies (Anaes.) 1/07/1998		40.8	46.2	Y
30029	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	93.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, not on face or neck, small (NOT MORE THAN 7 CM LONG), involving deeper tissue, not being a service to which another item in Group T4 applies (Anaes.) 1/07/1998		70.25	79.65	Y
30032	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	85.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, on face or neck, small (NOT MORE THAN 7 CM LONG), superficial (Anaes.) 1/07/1998		64.35	72.95	Y
30035	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, on face or neck, small (NOT MORE THAN 7 CM LONG), involving deeper tissue (Anaes.) 1/07/1998		91.8	104	Y
30038	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	93.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF WOUND OF, other than wound closure at time of surgery, not on face or neck, large (MORE THAN 7 CM LONG), superficial, not being a service to which another item in Group T4 applies (Anaes.) 1/07/1998		70.25	79.65	Y
30042	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, other than on face or neck, large (MORE THAN 7 CM LONG), involving deeper tissue, other than a service to which another item in Group T4 applies (Anaes.) 1/11/2017		144.85	164.15	Y
30045	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, on face or neck, large (MORE THAN 7 CM LONG), superficial (Anaes.) 1/07/1998		91.8	104	Y
30049	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OFWOUND OF, other than wound closure at time of surgery, on face or neck, large (MORE THAN 7 CM LONG), involving deeper tissue (Anaes.) 1/07/1998		144.85	164.15	Y
30052	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	264.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	FULL THICKNESS LACERATION OF EAR, EYELID, NOSE OR LIP, repair of, with accurate apposition of each layer of tissue (Anaes.) (Assist.) 1/11/1995		198.2	224.65	Y
30055	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	76.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Wounds, dressing of, under general, regional or intravenous sedation, with or without removal of sutures, other than a service associated with a service to which another item in this Group applies (Anaes.) 1/07/2021		57.75	65.45	Y
30058	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	150.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	POSTOPERATIVE HAEMORRHAGE, control of, under general anaesthesia, as an independent procedure (Anaes.) 1/11/1995		112.65	127.7	Y
30061	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	24.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SUPERFICIAL FOREIGN BODY, REMOVAL OF, (including from cornea or sclera), as an independent procedure (Anaes.) 1/12/1991		18.35	20.8	Y
30062	1/05/2007	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/05/2007	1/07/2021	63.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Etonogestrel subcutaneous implant, removal of, as an independent procedure (Anaes.) 1/05/2007		47.4	53.75	Y
30064	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	114.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SUBCUTANEOUS FOREIGN BODY, removal of, requiring incision and exploration, including closure of wound if performed, as an independent procedure (Anaes.) 1/11/1995		85.75	97.2	Y
30068	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	FOREIGN BODY IN MUSCLE, TENDON OR OTHER DEEP TISSUE, removal of, as an independent procedure (Anaes.) (Assist.) 1/12/1991		216	244.8	Y
30071	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	1/12/1991	1/07/2021	54.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Diagnostic biopsy of skin, as an independent procedure, if the biopsy specimen is sent for pathological examination (Anaes.) 1/11/2016		40.8	46.2	Y
30072	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2016	1/07/2021	54.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Diagnostic biopsy of mucous membrane, as an independent procedure, if the biopsy specimen is sent for pathological examination (Anaes.) 1/11/2016		40.8	46.2	Y
30075	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	DIAGNOSTIC BIOPSY OF LYMPH NODE, MUSCLE OR OTHER DEEP TISSUE OR ORGAN, as an independent procedure,if the biopsy specimen is sent for pathological examination (Anaes.) 1/11/2019		116.9	132.5	Y
30078	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	50.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	DIAGNOSTIC BIOPSY OF BONE MARROW by trephine using open approach, where the biopsy specimen is sent for pathological examination (Anaes.) 1/11/2019		37.85	42.9	Y
30081	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	114.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	DIAGNOSTIC BIOPSY OF BONE MARROW by trephine using open approach, where the biopsy specimen is sent for pathological examination (Anaes.) 1/11/2003		85.75	97.2	Y

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30084	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	61.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2014	DIAGNOSTIC BIOPSY OF BONE MARROW by trephine using percutaneous approach where the biopsy is sent for pathological examination (Anaes.)	45.9	52.05	Y
30087	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	DIAGNOSTIC BIOPSY OF BONE MARROW by aspiration or PUNCH BIOPSY OF SYNOVIAL MEMBRANE, where the biopsy is sent for pathological examination (Anaes.)	22.95	26.05	Y
30090	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	131.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	DIAGNOSTIC BIOPSY OF PLEURA, PERCUTANEOUS 1 or more biopsies on any 1 occasion, where the biopsy is sent for pathological examination (Anaes.)	100.35	113.7	Y
30093	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	178.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	DIAGNOSTIC NEEDLE BIOPSY OF VERTEBRA, where the biopsy is sent for pathological examination (Anaes.)	133.9	151.75	Y
30094	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	197.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	DIAGNOSTIC PERCUTANEOUS ASPIRATION BIOPSY of deep organ using interventional imaging techniques - but not including imaging, where the biopsy is sent for pathological examination (Anaes.)	147.85	167.55	Y
30097	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	101.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Personal performance of a Synacthen Stimulation Test, including associated consultation; by a medical practitioner with resuscitation training and access to facilities where life support procedures can be implemented, if: serum cortisol at 0830-0930 hours on any depin the preceding month has been measured at greater than 100 nmol/L but less than 400 nmol/L; or in a patient who is acutely unwelfand adrenal insufficiency is suspected.	75.85	85.95	
30099	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	93.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SINUS, excision of, involving superficial tissue only (Anaes.)	70.25	79.65	Y
30103	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	191.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SINUS, excision of, involving muscle and deep tissue (Anaes.)	143.55	162.65	Y
30104	1/11/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	132.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Pre-auricular sinus, excision of, on a patient 10 years of age or over (Anaes.)	99.1	112.3	Y
30105	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/09/2015	1/07/2021	171.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Pre-auricular sinus, excision of, on a patient under 10 years of age (Anaes.)	128.75	145.95	Y
30107	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	228.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of ganglion, other than a service associated with a service to which another item in this Group applies (Anaes.)	171.65	194.55	Y
30165	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	473.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Lipectomy, wedge excision of abdominal apron that is a direct consequence of significant weight loss, not being a service associated with a service to which Item 30168, 30171, 30172, 30176, 30177, 30179, 45530, 45564 or 45565 applies, if: (a) there is intertrigo or another skin condition that risks loss of skin integrity and has failed 3 months of conventional (or non surgical) treatment; and (b) the abdominal apron interferes with the activities of daily living; and (c) the weight has been stable for at least 6 months following significant weight loss prior to the lipectomy (H) (Anaes.) (Assist.)	355		Y
30168	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	473.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Lipectomy, wedge excision of redundant non abdominal skin and fat that is a direct consequence of significant weight loss,not being a service associated with a service to which Item 30165, 30171, 30172, 30176, 30177, 30179, 45530, 45564 or 45565 applies, if: (a) there is intertrigo or another skin condition that risks loss of skin integrity and has failed 3 months of conventional (or non surgical) treatment; and (b) the redundant skin and fat interferes with the activities of daily living; and (c) the weight has been stable for at least 6 months following significant weight loss prior to the lipectomy; and (d) the procedure involves 1 excision only (H) (Anaes.) (Assist.)	355		Y
30171	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	719.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Lipectomy, wedge excision of redundant non abdominal skin and fat that is a direct consequence of significant weight loss,not being a service associated with a service to which Item 30165, 30168, 30172, 30176, 30177, 30179, 45530, 45564 or 45565 applies, if: (a) there is intertrigo or another skin condition that risks loss of skin integrity and has failed 3 months of conventional (or non surgical) treatment; and (b) the redundant skin and fat interferes with the activities of daily living; and (c) the weight has been stable for at least 6 months following significant weight loss prior to the lipectomy; and (d) the procedure involves 2 excisions only (H) (Anaes.) (Assist.)	539.85		Y
30172	1/01/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/01/2016	1/07/2021	719.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Lipectomy, wedge excision of redundant non abdominal skin and fat that is a direct consequence of significant weight loss, not being a service associated with a service to which Item 30165, 30168, 30171, 30176, 30177, 30179, 45530, 45564 or 45565 applies, if: (a) there is intertrigo or another skin condition that risks loss of skin integrity and has failed 3 months of conventional (or non surgical) treatment; and (b) the redundant skin and fat interferes with the activities of daily living; and (c) the weight has been stable for at least 6 months following significant weight loss prior to the lipectomy; and (d) the procedure involves 3 or more excisions (H) (Anaes.) (Assist.)	539.85		Y
30176	1/01/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/01/2016	1/07/2021	1025.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Lipectomy, radical abdominoplasty (Pitanguy type or similar), with excision of skin and subcutaneous tissue, repair of musculoaponeurotic layer and transposition of umbilicus, not being a service associated with a service to which Item 30165, 30168, 30171, 30172, 30177, 30179, 45530, 45564 or 45565 applies,if the patient has previously had a massive intra-abdominal or pelvic tumour surgically removed (Anaes.) (Assist.)	769.2		Y
30177	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/11/2004	1/07/2021	1025.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Lipectomy, excision of skin and subcutaneous tissue associated with redundant abdominal skin and fat that is a direct consequence of significant weight loss, in conjunction with a radical abdominoplasty (Pitanguy type or similar), with or without repair of musculoaponeurotic layer and transposition of umbilicus, not being a service associated with a service to which Item 30165, 30168, 30171, 30172, 30176, 30179, 45530, 45564 or 45565 applies, if: (a) there is intertrigo or another skin condition that risks loss of skin integrity and has failed 3 months of conventional (or non surgical) treatment; and (b) the redundant skin and fat interferes with the activities of daily living; and (c) the weight has been stable for at least 6 months following significant weight loss prior to the lipectomy (H) (Anaes.) (Assist.)	769.2		Y
30179	1/01/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/01/2016	1/07/2021	1262.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Circumferential lipectomy, as an independent procedure, to correct circumferential excess of redundant skin and fat that is a direct consequence of significant weight loss, with or without a radical abdominoplasty (Pitanguy type or similar);not being a service associated with a service to which Item 30165, 30168, 30171, 30172, 30176, 30177, 45530, 45564 or 45565 applies, if: (a) the circumferential excess of redundant skin and fat is complicated by intertrigo or another skin condition that risks loss of skin integrity and has failed 3 months of conventional (or non surgical) treatment; and (b) the circumferential excess of redundant skin and fat interferes with the activities of daily living; and (c) the weight has been stable for at least 6 months following significant weight loss prior to the lipectomy (H) (Anaes.) (Assist.)	946.75		Y
30180	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	142.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	AXILLARY HYPERHIDROSIS, partial excision for (Anaes.)	106.55	120.75	Y
30183	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	256.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AXILLARY HYPERHIDROSIS, total excision of sweat gland bearing area (Anaes.)	192.4	218.05	Y
30187	1/11/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	PALMAR OR PLANTAR WARTS, removal of, by carbon dioxide laser or erbium laser, requiring admission to a hospital, or when performed by a specialist in the practice of his/her specialty, (5 or more warts) (Anaes.)	200.55	227.25	Y
30189	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	152.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	WARTS or MOLLUSCUM CONTAGIOSUM (one or more), removal of, by any method (other than by chemical means), where undertaken in the operating theatre of a hospital, not being a service associated with a service to which another item in this Group applies (H) (Anaes.)	114.95		Y
30190	1/11/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	413.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Angiofibromas, trichoepithelioma, epidermal naevi, xanthelasma, pyogenic granuloma, genital angiokeratomas, hereditary haemorrhagic telangiectasia and other severely disfiguring or recurrently bleeding tumours (excluding melanocytic naevi, sebaceous hyperplasia, dermatosis papulosa nigra, Campbell De Morgan angiomas and seborrheic or viral warts), suitable for laser ablation as confirmed by the opinion of a specialist in the specialty of dermatology—removal of, by carbon dioxide laser or erbium laser ablation, including associated resurfacing (10 or more tumours) (Anaes.)	310.4	351.8	Y
30191	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Angiofibromas, trichoepithelioma, epidermal naevi, xanthelasma, pyogenic granuloma, genital angiokeratomas, hereditary haemorrhagic telangiectasia and other severely disfiguring or recurrently bleeding tumours (excluding melanocytic naevi, sebaceous hyperplasia, dermatosis papulosa nigra, Campbell De Morgan angiomas and seborrheic or viral warts), treatment of, with carbon dioxide/erbium or other appropriate laser (or curettage and fine point diathermy for pyogenic granuloma only), if confirmed by the opinion of a specialist in the specialty of dermatology, one or more lesions.	49.55	56.15	
30192	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	41.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	PREMALIGNANT SKIN LESIONS (including solar keratoses), treatment of, by ablative technique (10 or more lesions) (Anaes.)	30.9	35	Y
30196	1/11/1993	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	131.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Malignant neoplasm of skin or mucous membrane that has been: (a) proven by histopathology; or (b) confirmed by the opinion of a specialist in the specialty of dermatology or plastic surgerywhere a specimen has been submitted for histologic confirmation, removal of, by serial curettage, or carbon dioxide laser or erbium laser excision-ablation, including any associated cryotherapy or diathermy (Anaes.)	98.55	111.65	Y
30202	1/11/1993	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1993	1/07/2021	50.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Malignant neoplasm of skin or mucous membrane proven by histopathology or confirmed by the opinion of a specialist in the specialty of dermatology or plastic surgery—removal of, by liquid nitrogen cryotherapy using repeat freeze thaw cycles	37.75	42.8	
30207	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	46.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Skin lesions, multiple injections with glucocorticoid preparations (Anaes.)	34.8	39.45	Y
30210	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/01/2013	1/07/2021	169.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Keloid and other skin lesions, extensive, multiple injections of glucocorticoid preparations, if undertaken in the operating theatre of a hospital (H) (Anaes.)	127.2		Y
30216	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HAEMATOMA, aspiration of (Anaes.)	21.35	24.2	Y
30219	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	HAEMATOMA, FURUNCLE, SMALL ABSCESS OR SIMILAR LESION not requiring admission to a hospital - INCISION WITH DRAINAGE OF (excluding aftercare)	21.35	24.2	
30223	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/11/2004	1/07/2021	169.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	LARGE HAEMATOMA, LARGE ABSCESS, CARBUNCLE, CELLULITIS or similar lesion, requiring admission to a hospital, INCISION WITH DRAINAGE OF (excluding aftercare) (Anaes.)	127.2		Y
30224	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	247.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PERCUTANEOUS DRAINAGE OF DEEP ABSCESS using interventional imaging techniques - but not including imaging (Anaes.)	185.4	210.15	Y
30225	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/1992	1/07/2021	278.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ABSCESS DRAINAGE TUBE, exchange of using interventional imaging techniques - but not including imaging (Anaes.)	208.95	236.8	Y
30226	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MUSCLE, excision of (LIMITED), or fasciotomy (Anaes.)	116.9	132.5	Y
30229	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MUSCLE, excision of (EXTENSIVE) (Anaes.) (Assist.)	213	241.4	Y
30232	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	232.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MUSCLE, RUPTURED, repair of (limited), not associated with external wound (Anaes.)	174.55	197.8	Y
30235	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MUSCLE, RUPTURED, repair of (extensive), not associated with external wound (Anaes.) (Assist.)	230.8	261.55	Y
30238	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FASCIA, DEEP, repair of, FOR HERNIATED MUSCLE (Anaes.)	116.9	132.5	Y
30241	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BONE TUMOUR, INNOCENT, excision of, not being a service to which another item in this Group applies (Anaes.) (Assist.)	278.1	315.2	Y
30244	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/11/2004	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	STYLOID PROCESS OF TEMPORAL BONE, removal of (Anaes.) (Assist.)	278.1		Y
30246	1/07/1998	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/11/2004	1/07/2021	717.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	PAROTID DUCT, repair of, using micro-surgical techniques (Anaes.) (Assist.)	538.35		Y
30247	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/11/2004	1/07/2021	769.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PAROTID GLAND, total extirpation of (Anaes.) (Assist.)	577		Y

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30250	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1301.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PAROTID GLAND, total extirpation of, with preservation of facial nerve (Anaes.) (Assist.)	976.35	Y
30251	1/07/1998	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	1999.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	RECURRENT PAROTID TUMOUR, excision of, withpreservation of facial nerve (Anaes.) (Assist.)	1499.75	1911.75 Y
30253	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	867.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	PAROTID GLAND, SUPERRICIAL LOBECTOMY OF, with exposure of facial nerve (Anaes.) (Assist.)	650.9	Y
30255	1/05/1997	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1155.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	SUBMANDIBULAR DUCTS, relocation of, for surgical control of drooling (Anaes.) (Assist.)	866.75	Y
30256	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	463.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	SUBMANDIBULAR GLAND, extirpation of (Anaes.) (Assist.)	347.65	Y
30259	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	206.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	SUBLINGUAL GLAND, extirpation of (Anaes.)	154.95	175.65 Y
30262	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	61.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	SALIVARY GLAND, DILATATION OR DIATHERMY of duct (Anaes.)	45.9	52.05 Y
30266	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	Salivary gland, removal of calculus from duct or meatotomy or marsupialisation, 1 or more such procedures. (Anaes.)	116.9	132.5 Y
30269	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	SALIVARY GLAND, repair of CUTANEOUS FISTULA OF (Anaes.)	116.9	132.5 Y
30272	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	307.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	TONGUE, partial excision of (Anaes.) (Assist.)	230.8	261.55 Y
30275	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1834.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	RADICAL EXCISION OF INTRORAL TUMOUR INVOLVING RESECTION OF MANDIBLE AND LYMPH NODES OF NECK (commandotype operation) (Anaes.) (Assist.)	1375.65	Y
30278	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	TONGUE TIE, repair of, not being a service to which another item in this Group applies (Anaes.)	36.3	41.15 Y
30281	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	124.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Tongue tie, mandibular frenulum or maxillary frenulum, repair of, in a patient aged 2 years and over, under general anaesthesia (Anaes.)	93.25	105.7 Y
30283	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	213	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	RANULA OR MUCOUS CYST OF MOUTH, removal of (Anaes.)	159.75	181.05 Y
30286	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	413.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Branchial cyst, removal of, on a patient 10 years of age or over (Anaes.) (Assist.)	310.5	351.9 Y
30287	1/09/2015	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	538.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Branchial cyst, removal of, on a patient under 10 years of age (Anaes.) (Assist.)	403.65	457.5 Y
30289	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	522.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Branchial fistula, removal of, on a patient 10 years of age or over (Anaes.) (Assist.)	391.95	Y
30293	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	463.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	CERVICAL OESOPHAGOSTOMY or CLOSURE OF CERVICAL OESOPHAGOSTOMY with or without plastic repair (Anaes.) (Assist.)	347.65	394 Y
30294	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1834.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	CERVICAL OESOPHAGECTOMY with tracheostomy and oesophagostomy, with or without plastic reconstruction; or LARYNGOPHARYNGECTOMY with tracheostomy and plastic reconstruction (Anaes.) (Assist.)	1375.65	Y
30296	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1065.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	THYROIDECTOMY, total (Anaes.) (Assist.)	798.9	Y
30297	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1065.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	THYROIDECTOMY following previous thyroid surgery (Anaes.) (Assist.)	798.9	Y
30299	1/11/2005	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	663.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	SENTINEL LYMPH NODE BIOPSY OR BIOPSIES for breast cancer, involving dissection in a level I axilla, using preoperative lymphoscintigraphy and lymphotropic dye injection, not being a service associated with a service to which item 30300, 30302 or 30303 applies (Anaes.) (Assist.)	497.45	Y
30300	1/11/2005	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	795.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	SENTINEL LYMPH NODE BIOPSY OR BIOPSIES for breast cancer, involving dissection in a level II/III axilla, using preoperative lymphoscintigraphy and lymphotropic dye injection, not being a service associated with a service to which item 30299, 30302 or 30303 applies (Anaes.) (Assist.)	596.95	Y
30302	1/11/2005	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	530.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	SENTINEL LYMPH NODE BIOPSY OR BIOPSIES for breast cancer, involving dissection in a level I axilla, using lymphotropic dye injection, not being a service associated with a service to which item 30299, 30300 or 30303 applies (Anaes.) (Assist.)	397.95	Y
30303	1/11/2005	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	636.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	SENTINEL LYMPH NODE BIOPSY OR BIOPSIES for breast cancer, involving dissection in a level II/III axilla, using lymphotropic dye injection, not being a service associated with a service to which item 30299, 30300 or 30302 applies (Anaes.) (Assist.)	477.5	Y
30306	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	831	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	TOTAL HEMITHYROIDECTOMY (Anaes.) (Assist.)	623.25	Y
30310	1/11/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	831	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Partial or subtotal thyroidectomy (Anaes.) (Assist.)	623.25	Y
30311	1/11/2021	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2021	1/11/2021	647.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	SENTINEL LYMPH NODE BIOPSY or biopsies for cutaneous melanoma, using preoperative lymphoscintigraphy and lymphotropic dye injection, if: (a) the primary lesion is greater than 1.0 mm in depth (or at least 0.8 mm in depth in the presence of ulceration); and (b) appropriate excision of the primary melanoma has occurred; and (c) the service is not associated with a service to which item 30075, 30078, 30299, 30300, 30302, 30303, 30329, 30332, 30618, 30820,31423, 52025 or 52027 applies. Applicable to only one lesion per occasion on which the service is provided (H) (Anaes.) (Assist.)	485.75	Y
30314	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	475.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Thyroglossal cyst or fistula or both, radical removal of, including thyroglossal duct and portion of hyoid bone, on a patient 10 years of age or over (Anaes.) (Assist.)	356.95	Y
30315	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1186.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Minimally invasive parathyroidectomy. Removal of 1 or more parathyroid adenoma through a small cervical incision for an image localised adenoma, including thymectomy. For any particular patient - applicable only once per occasion on which the service is provided. Not in association with a service to which item30318, 30317 or 30320 applies. (Anaes.) (Assist.)	889.6	Y
30317	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1420.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Redo parathyroidectomy. Cervical re-exploration for persistent or recurrent hyperparathyroidism, including thymectomy and cervical exploration of the mediastinum. For any particular patient - applicable only once per occasion on which the service is provided. Not in association with a service to which item 30315, 30318 or 30320 applies. (Anaes.) (Assist.)	1065.15	Y
30318	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1186.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Open parathyroidectomy, exploration and removal of 1 or more adenoma or hyperplastic glands via a cervical incision including thymectomy and cervical exploration of the mediastinum when performed. For any particular patient - applicable only once per occasion on which the service is provided. Not in association with a service to which item 30315, 30317 or 30320 applies. (Anaes.) (Assist.)	889.6	Y
30320	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1420.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Removal of a mediastinal parathyroid adenoma via sternotomy or mediastinal thoracoscopic approach. For any particular patient - applicable only once per occasion on which the service is provided. Not in association with a service to which item 30315, 30317 or 30318 applies. (Anaes.) (Assist.)	1065.15	Y
30323	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1420.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Excision of phaeochromocytoma or extraadrenal paraganglioma via endoscopic or open approach. (Anaes.) (Assist.)	1065.15	Y
30324	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1420.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Excision of an adrenocortical tumour or hyperplasia via endoscopic or open approach. (Anaes.) (Assist.)	1065.15	Y
30326	1/09/2015	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	618.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Thyroglossal cyst or fistula or both, radical removal of, including thyroglossal duct and portion of hyoid bone, on a patient under 10 years of age (Anaes.) (Assist.)	464	Y
30329	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	256.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	LYMPH NODES of GROIN, limited excision of (Anaes.)	192.75	218.45 Y
30330	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	747.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	LYMPH NODES of GROIN, radical excision of (Anaes.) (Assist.)	560.9	Y
30332	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	31/10/1992	1/07/2021	360.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2000	LYMPH NODES of AXILLA, limited excision of (sampling) (Anaes.) (Assist.)	270.6	Y
30335	1/05/2000	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	901.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2000	LYMPH NODES of AXILLA, complete excision of, to level I (Anaes.) (Assist.)	676.5	Y
30336	1/05/2000	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1082.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2000	LYMPH NODES of AXILLA, complete excision of, to level II or level III (Anaes.) (Assist.)	811.8	Y
30382	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1359.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Enterocutaneous fistula, repair of,if dissection and resection of bowel is performed, with or without anastomosis or formation of a stoma (H) (Anaes.) (Assist.)	1019.9	Y
30384	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1420.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Open or minimally invasive excision of a retroperitoneal mass, 6 cm or greater in largest dimension, lasting more than 3 hours, other than a service to which another item in this Group applies (H) (Anaes.) (Assist.)	1065.15	Y
30385	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Unplanned return to theatre for laparotomy or laparoscopy for control or drainage of intra-abdominal haemorrhage following abdominal surgery (H) (Anaes.) (Assist.)	439.65	Y
30387	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Laparoscopy or laparotomy when an operation is performed on abdominal, retroperitoneal or pelvic viscera, excluding lymph node biopsy, other than a service to which another item in this Group applies (H) (Anaes.) (Assist.)	495.6	Y
30388	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1108.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Laparotomy for abdominal trauma, including control of haemorrhage (with or without packing) and containment of contamination (H) (Anaes.) (Assist.)	831.15	Y
30390	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	228.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Laparoscopy, diagnostic, with or without aspiration of fluid, on a patient 10 years of age or over, if no other intra-abdominal procedure is performed (H) (Anaes.) (Assist.)	171.65	Y
30392	1/12/1991	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	701.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1997	RADICAL OR DEBULKING OPERATION for advanced intra-abdominal malignancy, with or without omentectomy, as an independent procedure (Anaes.) (Assist.)	526.4	Y
30396	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1057.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Laparotomy or laparoscopy for generalised intra-peritoneal sepsis(also known asperitonitis), with or without removal of foreign material or enteric contents, with lavage of the entire peritoneal cavity, with or without closure of the abdomen when performed by laparotomy (H) (Anaes.) (Assist.)	793.35	Y
30397	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	241.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Laparotomy, via wound previously made and left open or closed, including change of dressings or packs, with or without drainage of localated collections (H) (Anaes.)	181.35	Y
30399	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	332.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Laparotomy, final closure of wound made at previous operation, after removal of dressings or packs (Anaes.) (Assist.)	249.4	Y
30400	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	658.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	LAPAROTOMY WITH INSERTION OF PORTACATH for administration of cytotoxic therapy including placement of reservoir (Anaes.) (Assist.)	493.6	Y
30406	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	54.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	PARACENTESIS ABDOMINIS (Anaes.)	40.8	46.2 Y
30408	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	408	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2010	PERITONEOVENOUS shunt, insertion of (Anaes.) (Assist.)	306	Y
30409	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	181.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	LIVER BIOPSY, percutaneous (Anaes.)	136.15	154.3 Y
30411	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	92.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	LIVER BIOPSY by wedge excision when performed in conjunction with another intraabdominal procedure (Anaes.)	69.3	Y
30412	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	54.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1995	LIVER BIOPSY by core needle, when performed in conjunction with another intra-abdominal procedure (Anaes.)	40.9	46.35 Y
30414	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	717.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1995	LIVER, subsegmental resection of, (local excision), other than for trauma (Anaes.) (Assist.)	538.35	Y
30415	1/11/1992	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1435.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1995	LIVER, segmental resection of, other than for trauma (Anaes.) (Assist.)	1076.55	Y

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30616	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	779.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver cysts, greater than 5 cm in diameter, marsupialisation of 4 or less (Anaes.) (Assist.)	584.5	Y
30617	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1168.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver cysts, greater than 5 cm in diameter, marsupialisation of 5 or more (Anaes.) (Assist.)	876.7	Y
30618	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1662.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	LIVER, lobectomy of, other than for trauma (Anaes.) (Assist.)	1246.75	Y
30619	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	850.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver tumour, other than a hepatocellular carcinoma, destruction of one or more, by local ablation, other than a service associated with a service to which item 50950 or 50952 applies (Anaes.) (Assist.)	637.65	742.3 Y
30621	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2077.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver, extended lobectomy of, or central resections of segments 4, 5 and 8, other than for trauma (Anaes.) (Assist.)	1558.15	Y
30622	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	702.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	LIVER, repair of superficial laceration of, for trauma (Anaes.) (Assist.)	527.05	Y
30625	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	LIVER, repair of deep multiple lacerations of, or debridement of, for trauma (Anaes.) (Assist.)	1019.9	Y
30627	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1624.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	LIVER, segmental resection of, for trauma (Anaes.) (Assist.)	1218.2	Y
30628	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1727.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	LIVER, lobectomy of, for trauma (Anaes.) (Assist.)	1303.25	1649.75 Y
30630	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	2417.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver, extended lobectomy of, or central resections of segments 4, 5 and 8, for trauma (Anaes.) (Assist.)	1813.05	2329.5 Y
30631	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver abscess, single, open or minimally invasive abdominal drainage of, excluding aftercare (Anaes.) (Assist.)	406.8	461.05 Y
30633	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	755.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Liver abscess, multiple, open or minimally invasive abdominal drainage of, excluding aftercare (Anaes.) (Assist.)	566.6	Y
30639	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intraoperative ultrasound of biliary tract, or operative cholangiography, if the service: (a) is performed in association with an intra-abdominal procedure; and (b) is not associated with a service to which item 30462 or 30465 applies (Anaes.) (Assist.)	144.85	Y
30640	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	547.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	CHOLANGIOGRAM, percutaneous transhepatic, and insertion of biliary drainage tube, using interventional imaging techniques - but not including imaging, not being a service associated with a service to which item 30461 applies (Anaes.) (Assist.)	410.8	465.55 Y
30641	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	141.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intraoperative ultrasound for staging of intra-abdominal tumours (Anaes.)	106.35	Y
30642	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	CHOLEDOCHOSCOPY in conjunction with another procedure (Anaes.)	144.85	Y
30643	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	668.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cholecystectomy, by any approach, without cholangiogram (Anaes.) (Assist.)	501.35	Y
30645	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	865.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cholecystectomy, by any approach, with attempted or completed cholangiogram or intraoperative ultrasound of the biliary system, when performed via laparoscopic or open approach or when conversion from laparoscopic to open approach is required (Anaes.) (Assist.)	649.4	Y
30648	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1012.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cholecystectomy, by any approach, involving removal of common duct calculi via the cystic duct, with or without stent insertion (Anaes.) (Assist.)	759.3	Y
30649	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1125.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cholecystectomy with removal of common duct calculi via choledochotomy, by any approach, with or without insertion of stent (Anaes.) (Assist.)	844.3	Y
30650	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	545.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cholecystectomy, by any approach, without cholangiogram (Anaes.) (Assist.)	409.25	463.85 Y
30651	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	278.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Calculus of biliary tract, extraction of, using interventional imaging techniques (Anaes.) (Assist.)	208.95	236.8 Y
30652	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	392.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	BILIARY DRAINAGE TUBE, exchange of, using interventional imaging techniques - but not including imaging, not being a service associated with a service to which item 30460 applies (Anaes.) (Assist.)	294.6	Y
30654	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CHOLEDOCHOSCOPY with balloon dilation of a stricture or passage of stent or extraction of calculi (Anaes.) (Assist.)	1028.75	Y
30655	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Choledochotomy without cholecystectomy, with or without removal of calculi (Anaes.) (Assist.)	1028.75	Y
30657	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1435.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	Choledochotomy with cholecystectomy, with removal of calculi, including biliary intestinal anastomosis (Anaes.) (Assist.)	1076.55	1347.45 Y
30658	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1055.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	CHOLEDOCHOTOMY, intrahepatic, involving removal of intrahepatic bile duct calculi (Anaes.) (Assist.)	791.35	Y
30660	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	897.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	TRANSDUODENAL OPERATION ON SPHINCTER OF ODDI, involving 1 or more of, removal of calculi, sphincterotomy, sphincteroplasty, biopsy, local excision of peri-ampullary or duodenal tumour, sphincteroplasty of the pancreatic duct, pancreatic duct septoplasty, with or without choledochotomy (Anaes.) (Assist.)	673.1	Y
30661	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1538.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CHOLECYSTOJUDENOSTOMY, CHOLECYSTOENTEROSTOMY, CHOLEDOCHOJEJUNOSTOMY or Roux-en-Y as a bypass procedure when no prior biliary surgery performed (Anaes.) (Assist.)	1153.75	Y
30663	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1888.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Radical resection of porta hepatis (including associated neuro-lymphatic tissue), for cancer, suspected cancer or choledochal cyst, including bile duct excision and biliary-enteric anastomoses, other than a service associated with a service to which item 30440, 30451 or 31454 applies (Anaes.) (Assist.)	1416.6	Y
30664	31/10/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2266.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Radical resection of common hepatic duct and right and left hepatic ducts, for cancer, suspected cancer or choledochal cyst, involving either or both of the following:(a) more than 2 anastomoses;(b) resection of segment (or major portion of segment) of liver; (Anaes.) (Assist.)	1699.9	Y
30669	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1790.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	Radical resection of common hepatic duct and right and left hepatic ducts, with one anastomosis, for cancer, suspected cancer or choledochal cyst, involving either or both of the following:(a) more than 2 anastomoses;(b) resection of segment (or major portion of segment) of liver; (Anaes.) (Assist.)	1343	1702.75 Y
30672	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1386.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	BILIARY STRICTURE, repair of, after 1 or more operations on the biliary tree (Anaes.) (Assist.)	1040.2	Y
30673	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	184.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Repair of bile duct injury, including immediate reconstruction, other than a service associated with a service to which item 30584 applies (Anaes.) (Assist.)	138.25	156.7 Y
30675	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	363.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Oesophagoscopy (not being a service to which item 41816 or 41822 applies), gastroscopy,duodenoscopy or panendoscopy (1 or more such procedures), with or without biopsy, not being a service associated with a service to which item 30478 or 30479 applies. (Anaes.)	272.35	308.65 Y
30678	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	165.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Endoscopic dilatation of stricture of upper gastrointestinal tract (including the use of imaging intensification where clinically indicated) (Anaes.)	191.7	217.25 Y
30679	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	495.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Oesophagoscopy (other than a service to which Item41816, 41822 or 41825 applies), gastroscopy, duodenoscopy, panendoscopy or push enteroscopy, one or more such procedures, if: (a) the procedures are performed using one or more of the following endoscopic procedures: (i) polypectomy; (ii) sclerosing or adrenalin injections; (iii) banding; (iv) endoscopic clips; (v) haemostatic powders; (vi) diathermy; (vii) argon plasma coagulation; and (b) the procedures are for the treatment of one or more of the following: (i) upper gastrointestinal tract bleeding; (ii) polyps; (iii) removal of foreign body; (iv) oesophageal or gastric varices; (v) peptic ulcers; (vi) neoplasia; (vii) benign vascular lesions; (viii) stricture of the gastrointestinal tract; (ix) tumorous overgrowth through or over oesophageal stents; other than a service associated with a service to which item30473 or 30479 applies (Anaes.)	371.55	421.05 Y
30681	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	371.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2018	Endoscopy with laser therapy, for the treatment of one or more of the following: (a) neoplasia; (b) benign vascular lesions; (c) strictures of the gastrointestinal tract; (d) tumorous overgrowth through or over oesophageal stents; (e) peptic ulcers; (f) angiodysplasia; (g) gastric antral vascular ectasia; (h) post polypectomy bleeding; other than a service associated with a service to which item 30473 or 30478 applies (Anaes.)	278.6	315.75 Y
30682	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	264.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2018	PERCUTANEOUS GASTROSTOMY (initial procedure): (a) including any associated imaging services; and (b) excluding the insertion of a device for the purpose of facilitating weight loss (Anaes.)	198.1	224.5 Y
30683	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	184.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PERCUTANEOUS GASTROSTOMY (repeat procedure): (a) including any associated imaging services; and (b) excluding the insertion of a device for the purpose of facilitating weight loss (Anaes.)	138.2	156.65 Y
30684	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	379.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	Gastrostomy button, caecostomy antegrade enema device (chait etc.) or stomal indwelling device: (a) non-endoscopic insertion of; or (b) non-endoscopic replacement of; on a patient 10 years of age or over, excluding the insertion of a device for the purpose of facilitating weight loss (Anaes.)	284.8	322.75 Y
30685	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (Anaes.)	439.65	498.25 Y
30688	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	93.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ENDOSCOPIC SPHINCTEROTOMY with or without extraction of stones from common bile duct (Anaes.)	70.25	79.65 Y
30690	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	547.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	SMALL BOWEL INTUBATIONAs an independent procedure (Anaes.)	410.8	465.55 Y
30691	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	OESOPHAGEAL PROSTHESIS, insertion of, including endoscopy and dilatation (Anaes.)	433.4	491.2 Y
30692	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	819.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	BILE DUCT, ENDOSCOPIC STENTING OF (including endoscopy and dilatation) (Anaes.)	614.4	Y
30694	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	437.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	BILE DUCT, PERCUTANEOUS STENTING OF (including dilatation when performed), using interventional imaging techniques - but not including imaging (Anaes.)	328.2	Y
30695	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	819.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	ENDOSCOPIC BILIARY DILATATION (Anaes.)	614.4	Y
30515	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	732.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PERCUTANEOUS BILIARY DILATATION for biliary stricture, using interventional imaging techniques - but not including imaging (Anaes.)	549.7	Y
30517	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	959.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gastroenterostomy (including gastroduodenostomy), enterocolostomy or enteroenterostomy, as an independent procedure or in combination with another procedure, only if required for irreversible obstruction, other than a service to which any of items 31569 to 31581 apply (Anaes.) (Assist.)	719.7	Y
30518	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1027.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of gastroenterostomy, pyloroplasty or gastroduodenostomy (Anaes.) (Assist.)	770.65	Y
30520	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	884	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Partial gastrectomy, not being a service associated with a service to which any of items 31569 to 31581 apply (Anaes.) (Assist.)	663	Y
30521	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1503.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gastric tumour, 2 cm or greater in diameter, removal of, by local excision, by laparoscopic or open approach, including any associated anastomosis, excluding polypectomy, other than a service to which item 30518 applies (Anaes.) (Assist.)	1127.55	Y
																												1/11/1992	GASTRECTOMY, TOTAL, for benign disease (Anaes.) (Assist.)		

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30526	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2243.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gastrectomy, total, and removal of lower oesophagus, performed by open or minimally invasive approach, with anastomosis in the mediastinum, including any of the following:(if performed):(a) distal pancreatectomy;(b) nodal dissection;(c) splenectomy (Anaes.) (Assist.)	1682.8	Y
30529	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ANTIREFLUX operation by fundoplasty, with OESOPHAGOPLASTY for stricture or short oesophagus (Anaes.) (Assist.)	1019.9	Y
30530	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	816	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ANTIREFLUX operation by cardiopexy, with or without fundoplasty (Anaes.) (Assist.)	612	Y
30532	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	936.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagogastric myotomy (Heller's operation) by endoscopic, abdominal or thoracic approach, whether performed by open or minimally invasive approach, including fundoplication when performed laparoscopically (Anaes.) (Assist.)	702.7	Y
30533	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1114.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	OESOPHAGOGASTRIC MYOTOMY (Heller's operation) via abdominal or thoracic approach, WITH FUNDOPLASTY, with or without closure of the diaphragmatic hiatus, by laparoscopy or open operation (Anaes.) (Assist.)	835.8	Y
30559	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	884	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	OESOPHAGUS, local excision for tumour of (Anaes.) (Assist.)	663	796.1 Y
30560	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	982.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophageal perforation, repair of, by abdominal or thoracic approach, including thoracic drainage (Anaes.) (Assist.)	736.55	Y
30562	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	619.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Enterostomy or colostomy, closure of (not involving resection of bowel), on a patient 10 years of age or over (Anaes.) (Assist.)	464.3	Y
30563	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	619.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	COLOSTOMY OR ILEOSTOMY, refashioning of, on a person 10 years of age or over (Anaes.) (Assist.)	464.3	531.15 Y
30565	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	906.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	SMALL INTESTINE, resection of, without anastomosis (including formation of stoma) (Anaes.) (Assist.)	680	Y
30574	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	64.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	NOTE: Multiple Operation and Multiple Anaesthetic rules apply to this item Appendicectomy, when performed in conjunction with another intra-abdominal procedure and during which a specimen is collected and sent for pathological testing (Anaes.)	48.1	Y
30577	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1133.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Initial pancreatic necrosectomy by open, laparoscopic or endoscopic approach, excluding aftercare (Anaes.) (Assist.)	850	Y
30583	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1617.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Distal pancreatectomy with splenic preservation, by open or minimally invasive approach (Anaes.) (Assist.)	1213.05	Y
30584	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3121.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Pancreatico duodenectomy (Whipple's procedure), with or without preservation of pylorus, including any of the following (if performed):(a) cholecystectomy;(b) pancreatico-biliary anastomosis;(c) gastro-jejunal anastomosis (Anaes.) (Assist.)	2341.2	Y
30589	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1301.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PANCREATICO-JEJUNOSTOMY for pancreatitis or trauma (Anaes.) (Assist.)	976.35	Y
30590	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1435.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PANCREATICO-JEJUNOSTOMY following previous pancreatic surgery (Anaes.) (Assist.)	1076.55	Y
30593	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1964.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PANCREATECTOMY, near total or total (incl duodenum), with or without splenectomy (Anaes.) (Assist.)	1473.15	1876.3 Y
30594	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2266.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PANCREATECTOMY for pancreatitis following previously attempted drainage procedure or partial resection (Anaes.) (Assist.)	1699.9	Y
30596	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	933.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	SPLENORRHAPHY OR PARTIAL SPLENECTOMY (Anaes.) (Assist.)	700.25	Y
30599	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	SPLENECTOMY, for massive spleen (weighing more than 1500 grams) or involving thoraco-abdominal incision (Anaes.) (Assist.)	1019.9	Y
30600	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	808.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Emergency repair of diaphragmatic laceration or hernia, following recent trauma, by any approach, including when performed in conjunction with another procedure indicated as a result of abdominal or chest trauma (Anaes.) (Assist.)	606.45	Y
30601	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	996.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Diaphragmatic hernia, congenital, or delayed presentation of traumatic rupture, repair of, by thoracic or abdominal approach, on a patient 10 years of age or over,other than a service to which any of Items 31569 to 31581 apply (Anaes.) (Assist.)	747.1	Y
30606	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1155.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PORTAL HYPERTENSION, oesophageal transection via stapler or oversew of gastric varices with or without devascularisation (Anaes.) (Assist.)	866.85	Y
30608	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	1309.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Small intestine, resection of, with anastomosis, on a patient under 10 years of age (Anaes.) (Assist.)	981.95	Y
30611	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	586.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Benign tumour of soft tissue (other than tumours of skin, cartilage and bone, simple lipomas covered by item 31345 and lipomata), removal of, by surgical excision, on a patient under 10 years of age, if the specimen excised is sent for histological confirmation of diagnosis, other than a service to which another item in this Group applies (Anaes.) (Assist.)	439.65	498.3 Y
30615	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Strangulated, incarcerated or obstructed hernia, repair of, without bowel resection, on a patient 10 years of age or over (Anaes.) (Assist.)	406.8	Y
30618	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	543.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lymph nodes of neck, selective dissection of one or 2 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck, on a patient under 10 years of age (Anaes.) (Assist.)	407.55	461.9 Y
30619	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	974.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparoscopic splenectomy, on a patient under 10 years of age (Anaes.) (Assist.)	730.65	Y
30621	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	424	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of symptomatic umbilical, epigastric or linea alba hernia requiring mesh or other repair, by open or minimally invasive approach, in a patient 10 years of age or over, other than a service to which Item 30616 or 30615 applies (Anaes.) (Assist.)	318	Y
30622	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	705.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Caecostomy, enterostomy, colostomy, enterotomy, colotomy, cholecystostomy, gastrostomy, gastrotomy, reduction of intussusception, removal of Meckel's diverticulum, suture of perforated peptic ulcer, simple repair of ruptured viscus, reduction of volvulus, pyloroplasty or drainage of pancreas, on a patient under 10 years of age (Anaes.) (Assist.)	528.9	Y
30623	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	705.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy involving division of peritoneal adhesions (if no other intra-abdominal procedure is performed), on a patient under 10 years of age (Anaes.) (Assist.)	528.9	Y
30626	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	707.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy involving division of adhesions in association with another intra-abdominal procedure if the time taken to divide the adhesions is between 45 minutes and 2 hours, on a patient under 10 years of age (Anaes.) (Assist.)	531.3	Y
30627	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	297.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparoscopy, diagnostic, if no other intra-abdominal procedure is performed, on a patient under 10 years of age (R) (Anaes.)	223.2	Y
30628	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	37.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HYDROCELE, tapping of	27.8	31.5
30629	1/11/2020	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Orchidectomy, radical, including spermatic cord, unilateral, for tumour, inguinal approach, without insertion of testicular prosthesis, other than a service associated with a service to which Item 30631, 30635, 30641, 30643 or 30644 applies (Anaes.) (Assist.)	406.8	Y
30630	1/11/2020	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	492.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Insertion of testicular prosthesis,at least 6 months following orchidectomy (Anaes.) (Assist.)	369.75	Y
30631	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	246.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Hydrocele, removal of, other than a service associated with a service to which Item 30641, 30642 or 30644 applies (Anaes.)	184.7	209.15 Y
30635	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	303.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Varicocele, surgical correction of, including microsugical techniques, other than a service associated with a service to which Item 30390, 30627, 30641, 30642 or 30644 applies—one procedure (Anaes.) (Assist.)	227.7	Y
30636	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	342.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gastrostomy button, caecostomy antegrade enema device (Chait etc.) or stomal indwelling device, non-endoscopic insertion of, or non-endoscopic replacement of, on a patient under 10 years of age (Anaes.)	181.95	206.25 Y
30637	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	804.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Enterostomy or colostomy, closure of (not involving resection of bowel), on a patient under 10 years of age (Anaes.) (Assist.)	603.7	Y
30639	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	804.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Colostomy or ileostomy, refashioning of, on a patient under 10 years of age (Anaes.) (Assist.)	603.7	717 Y
30640	1/05/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	952.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of large and irreducible scrotal hernia, if surgery exceeds 2 hours, in a patient 10 years of age or over, other than a service to which Item30615, 30621, 30648, 30651 or 30655 applies (Anaes.) (Assist.)	714.05	Y
30641	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	424	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Orchidectomy, simple or subcapsular, unilateral with or without insertion of testicular prosthesis (H) (Anaes.) (Assist.)	318	Y
30642	1/05/2017	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2017	1/07/2021	788.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Orchidectomy, radical, including spermatic cord, unilateral, for tumour, inguinal approach, with insertion of testicular prosthesis, other than a service associated with a service to which Item 30631, 30635, 30641, 30643, 30644 or 45051 applies (Anaes.) (Assist.)	591.7	Y
30643	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	705.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Exploration of spermatic cord, inguinal approach, with or without testicular biopsy, with or without excision of spermatic cord lesion, for a patient under 10 years of age, other than a service associated with a service to which Item 30629, 30630 or 30642 applies (Anaes.) (Assist.)	528.9	Y
30644	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Exploration of spermatic cord, inguinal approach, with or without testicular biopsy, with or without excision of spermatic cord lesion, for a patient at least 10 years of age, other than a service associated with a service to which Item 30629, 30630 or 30642 applies (Anaes.) (Assist.)	406.8	Y
30645	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	602.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Appendicectomy, on a patient under 10 years of age, other than a service to which Item 30574 applies (Anaes.) (Assist.)	451.8	Y
30646	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	602.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparoscopic appendicectomy, on a patient under 10 years of age (Anaes.) (Assist.)	451.8	Y
30648	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	483.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Femoral or inguinal hernia or infantile hydrocele, repair of, by open or minimally invasive approach, on a patient 10 years of age or over,otherthan a service to which Item30615 or 30651 applies (Anaes.) (Assist.)	362.55	Y
30649	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	195.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Haemorrhage, arrest of, following circumcision requiring general anaesthesia, on a patient under 10 years of age (Anaes.)	146.45	166 Y
30651	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ventral hernia repair involving primary fascial closure by suture, with or without onlay mesh or insertion of intraperitoneal onlay mesh repair, without closure of the defect or advancement of the rectus muscle toward the midline, by open or minimally invasive approach, in a patient 10 years of age or over, other than a service to which Item 30621, 30655 or 30657 applies (Anaes.) (Assist.)	406.8	Y
30652	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Recurrent groin hernia regardless of size of defect, repair of, with or without mesh, by open or minimally invasive approach, in a patient 10 years of age or over (Anaes.) (Assist.)	406.8	Y

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30654	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	48.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Circumcision of the penis, with topical or local analgesia, other than a service to which item 30658 applies	36.3	41.15	
30655	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	952.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ventral hernia, repair of,with advancement of the rectus muscles to the midline using a retro-rectus, pre-peritoneal or subley technique,by open or minimally invasive approach, in a patient 10 years of age or over, other than a service to which item 30621 or 30651 applies (Anaes.) (Assist.)	714.05		Y
30657	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1355.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral abdominal wall reconstruction with component separation, including transversus abdominus release and external oblique release for abdominal wall closure by mobilising the rectus abdominis muscles to the midline, by open or minimally invasive approach (Anaes.) (Assist.)	1016.75		Y
30658	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	147.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Circumcision of the penis, when performed under general or regional anaesthesia and in conjunction with a service to which an item in Group T7 or Group T10 applies (Anaes.)	110.8	125.55	Y
30663	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	150.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Haemorrhage, arrest of, following circumcision requiring general anaesthesia, on a patient 10 years of age or over (Anaes.)	112.65	127.7	Y
30666	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	49.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	PARAPHIMOSIS or PHIMOSIS, reduction of, under general anaesthesia, with or without dorsal incision, not being a service associated with a service to which another item in this Group applies (Anaes.)	37.05	41.95	Y
30672	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COCCYX, excision of (Anaes.) (Assist.)	347.65		Y
30676	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	364.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Pilonidal sinus or cyst, or sacral sinus or cyst, definitive excision of (Anaes.)	295.8	331.25	Y
30679	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	100.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PILONIDAL SINUS, injection of sclerosant fluid under anaesthesia (Anaes.)	75.15	85.2	Y
30680	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	1217.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2014	Balloon enteroscopy, examination of the small bowel (oral approach), with or without biopsy, WITHOUT intraprocedural therapy, for diagnosis of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup(with the exception of item 30682 or 30686) The patient to whom the service is provided must: (i)have recurrent or persistent bleeding; and (ii)be anaemic or have active bleeding; and (iii)have had an upper gastrointestinal endoscopy and a colonoscopy performed which did not identify the cause of the bleeding. (Anaes.)	913.05	1129.5	Y
30682	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	1217.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2014	Balloon enteroscopy, examination of the small bowel (oral approach), with or without biopsy, WITHOUT intraprocedural therapy, for diagnosis of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup(with the exception of item 30680 or 30684) The patient to whom the service is provided must: (i)have recurrent or persistent bleeding; and (ii)be anaemic or have active bleeding; and (iii)have had an upper gastrointestinal endoscopy and a colonoscopy performed which did not identify the cause ofthe bleeding. (Anaes.)	913.05	1129.5	Y
30684	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	1498.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2014	Balloon enteroscopy, examination of the small bowel (oral approach), with or without biopsy, WITH 1 or more of the following procedures (snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation), for diagnosis and management of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup(with the exception of item 30682 or 30686) The patient to whom the service is provided must: (i)have recurrent or persistent bleeding; and (ii)be anaemic or have active bleeding; and (iii)have had an upper gastrointestinal endoscopy and a colonoscopy performed which did not identify the cause of the bleeding. (Anaes.)	1123.65	1410.3	Y
30686	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	1498.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2014	Balloon enteroscopy, examination of the small bowel (oral approach), with or without biopsy, WITH 1 or more of the following procedures (snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation), for diagnosis and management of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup(with the exception of item 30682 or 30684) The patient to whom the service is provided must: (i)have recurrent or persistent bleeding; and (ii)be anaemic or have active bleeding; and (iii)have had an upper gastrointestinal endoscopy and a colonoscopy performed which did not identify the cause of the bleeding. (Anaes.)	1123.65	1410.3	Y
30687	1/11/2012	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/07/2021	495.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	ENDOSCOPY with RADIOFREQUENCY ABLATION of mucosal metaplasia for the treatment of Barrett's Oesophagus in a single course of treatment, following diagnosis of high grade dysplasia confirmed by histological examination (Anaes.)	371.55	421.05	Y
30688	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	379.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Endoscopicultrasound(endoscopy with ultrasound imaging), with or without biopsy, of the staging of 1 or more of oesophageal, gastric or pancreatic cancer, not in association with another item in this Subgroup (other thanItem30684, 30685, 30691 or 30694) andother thana service associated with the routine monitoring of chronic pancreatitis. (Anaes.)	284.8	322.75	Y
30690	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Endoscopic ultrasound(endoscopy with ultrasound imaging), with or without biopsy,with fine needle aspiration, including aspiration of the locoregional lymph nodes if performed, for the staging of 1 or more of oesophageal, gastric or pancreatic cancer, not in association with another item in this Subgroup (other than Item30684, 30685, 30691 or 30694)and other thana service associated with the routine monitoring of chronic pancreatitis. (Anaes.)	439.65	498.25	Y
30692	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	379.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Endoscopic ultrasound(endoscopy with ultrasound imaging), with or without biopsy, for the diagnosis of 1 or more of pancreatic, biliary or gastric submucosal tumours, not in association with another item in this Subgroup (other than Item30684, 30685, 30691 or 30694)and other thana service associated with the routine monitoring of chronic pancreatitis. (Anaes.)	284.8	322.75	Y
30694	1/07/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2007	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Endoscopic ultrasound(endoscopy with ultrasound imaging), with or without biopsy,with fine needle aspiration,for the diagnosis of 1 or more of pancreatic, biliary or gastric submucosal tumours,not in association with another item in this Subgroup (other than Item30684, 30685, 30691 or 30694)and other thana service associated with the routine monitoring of chronic pancreatitis. (Anaes.)	439.65	498.25	Y
30720	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Appendicectomy, on a patient 10 years of age or over, whether performed by (a) laparoscopy or right iliac fossa open incision; or(b) conversion of a laparoscopy to an open right iliac fossa incision;other than a service to which item 30574 applies (Anaes.) (Assist.)	347.65		Y
30721	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy or laparoscopy, or laparoscopy converted to laparotomy, with or without associated biopsies, including the division of adhesions (if performed, but only if the time taken to divide adhesions is 45 minutes or less), if no other intra-abdominal procedure is performed (Anaes.) (Assist.)	377.15		Y
30722	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy or laparoscopy on a patient 10 years of age or over, including any of the following procedures (if performed, and including division of one or more adhesions, but only if the time taken to divide the adhesions is 45 minutes or less): (a) colostomy; (b) colostomy; (c) cholecystostomy; (d) enterostomy; (e) enterotomy; (f) gastrostomy; (g) gastrotomy; (h) caecostomy; (i) gastric fixation by cardiopexy; (j) reduction of intussusception; (k) simple repair of ruptured viscus (including perforated peptic ulcer); (l) reduction of volvulus; (m) drainage of pancreas (Anaes.) (Assist.)	406.8		Y
30723	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy, laparoscopy or extra-peritoneal approach, for drainage of an intra-abdominal, pancreatic or retroperitoneal collection or abscess (Anaes.) (Assist.)	406.8		Y
30724	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	545.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy or laparoscopy with division of adhesions, lasting more than 45 minutes but less than 2 hours, performed either:(a) as a primary procedure; or(b) when the division of adhesions is performed in conjunction with another primary procedure—to provide access to a surgical field (but excluding mobilisation or normal anatomical dissection of the organ or structure for which the primary procedure is being carried out) (Anaes.) (Assist.)	408.75		Y
30725	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	965.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparotomy or laparoscopy for intestinal obstruction or division of extensive, complex adhesions, lasting 2 hours or more, performed either:(a) as a primary procedure; or(b) when the division of adhesions is performed in conjunction with another procedure—to provide access to a surgical field, but excluding mobilisation or normal anatomical dissection of the organ or structure for which the other procedure is being carried out (Anaes.) (Assist.)	724.35		Y
30730	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1007.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Small intestine, resection of, including either of the following:(a) a small bowel diverticulum (such as Meckel's procedure) with anastomosis;(b) strictureplasty (Anaes.) (Assist.)	755.35		Y
30731	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	755.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intraoperative enteroscopy for visualisation of the small intestine by endoscopy, including endoscopic examination using a flexible endoscope, with or without biopsies (Anaes.) (Assist.)	566.6		Y
30732	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	4136.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Peritonectomy, lasting more than 5 hours, including hyperthermic intra-peritoneal chemotherapy (Anaes.) (Assist.)	3102.1		Y
30750	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2145.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagectomy with colon or jejunal interposition graft, by any approach, including:(a) any gastrointestinal anastomoses (except vascular anastomoses); and(b) anastomoses in the chest or neck (if appropriate)One surgeon (Anaes.) (Assist.)	1609.35		Y
30751	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2145.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagectomy with colon or jejunal interposition graft, by any approach, including:(a) any gastrointestinal anastomoses (except vascular anastomoses); and(b) anastomoses in the chest or neck (if appropriate)Conjoint surgery, principal surgeon (Anaes.) (Assist.)	1609.35		Y
30752	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1609.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagectomy with colon or jejunal interposition graft, by any approach, including:(a) any gastrointestinal anastomoses (except vascular anastomoses); and(b) anastomoses in the chest or neck (if appropriate)Conjoint surgery, co-surgeon (Anaes.) (Assist.)	1207.05		Y
30753	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1790.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagectomy, by any approach, including:(a) gastric reconstruction by abdominal mobilisation, thoracotomy or thoracoscopy; and(b) anastomosis in the neck or chestOne surgeon (Anaes.) (Assist.)	1343		Y
30754	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1790.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagectomy, by any approach, including:(a) gastric reconstruction by abdominal mobilisation, thoracotomy or thoracoscopy; and(b) anastomosis in the neck or chestConjoint surgery, principal surgeon (Anaes.) (Assist.)	1343		Y
30755	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1343	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Oesophagectomy by any approach, including:(a) gastric reconstruction by abdominal mobilisation, thoracotomy or thoracoscopy; and(b) anastomosis in the neck or chestConjoint surgery, co-surgeon (Anaes.) (Assist.)	1007.25		Y
30756	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	906.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Antireflux operation by fundoplasty, with or without cardiopexy, by any approach, with or without closure of the diaphragmatic hiatus, other than a service to which item 30601 applies (Anaes.) (Assist.)	680		Y
30760	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	611.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Vagotomy, with or without gastroenterostomy, pyloroplasty or other drainage procedure (Anaes.) (Assist.)	459		Y
30761	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	789.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bleeding peptic ulcer, control of, by laparoscopy or laparotomy, involving suture of bleeding point or wedge excision (with or without gastric resection), including either of the following (if performed):(a) vagotomy and pyloroplasty;(b) gastroenterostomy (Anaes.) (Assist.)	592.1		Y
30762	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1730.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gastrectomy, subtotal or total radical, for carcinoma, by open or minimally invasive approach, including all necessary anastomoses, including either or both of the following (if performed):(a) extended lymph node dissection;(b) splenectomy (Anaes.) (Assist.)	1297.55		Y
30763	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	702.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gastric tumour, 2cm or greater in diameter, removal of, by local excision, by endoscopic approach, including any required anastomosis, excluding polypectomy, other than a service to which item 30518 applies (Anaes.) (Assist.)	527.05		Y

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30770	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	870.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hydatid cyst of liver, peritoneum or viscus, complete removal of contents of, with or without suture of biliary radicles, with omentoplasty or myeloplasty (Anaes.) (Assist.)	652.7	Y
30771	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1755.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Portal hypertension, porto-caval, meso-caval or selective spleno-renal shunt for (Anaes.) (Assist.)	1316.4	Y
30780	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1461.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intrahepatic biliary bypass of left or right hepatic ductal system by Roux-en-Y loop to peripheral ductal system (Anaes.) (Assist.)	1096.4	Y
30790	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	729.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Pancreatic cyst anastomosis to stomach, duodenum or small intestine, by endoscopic, open or minimally invasive approach, with or without the use of endoscopic or intraoperative ultrasound (Anaes.) (Assist.)	547.3	Y
30791	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	453.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Pancreatic necrosectomy, by open, laparoscopic or endoscopic approach, excluding aftercare, subsequent procedure (Anaes.) (Assist.)	340.05	Y
30792	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1242.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Distal pancreatectomy with splenectomy, by open or minimally invasive approach (Anaes.) (Assist.)	932	Y
30800	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	749.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Splenectomy, by open or minimally invasive approach, other than a service to which Item 30792 applies (Anaes.) (Assist.)	562.05	Y
30810	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1193.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Exploration of pancreas or duodenum for endocrine tumour, including associated imaging, either: (a) followed by local excision of tumour; or (b) when, after extensive exploration, no tumour is found (Anaes.) (Assist.)	895.3	Y
30820	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	191.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lymph node of neck, biopsy of, by open procedure, if the specimen excised is sent for pathological examination (Anaes.)	143.55	162.65 Y
31000	1/03/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	604.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Mohs surgery of skin tumour located on the head, neck, genitalia, hand, digits, leg (below knee) or foot, utilising horizontal frozen sections with mapping of all excised tissue, and histological examination of all excised tissue by the specialist performing the procedure, if the specialist is recognised by the Australasian College of Dermatologists as an approved Mohs surgeon—6 or fewer sections (Anaes.)	453.35	516.55 Y
31001	1/03/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	755.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Mohs surgery of skin tumour located on the head, neck, genitalia, hand, digits, leg (below knee) or foot, utilising horizontal frozen sections with mapping of all excised tissue, and histological examination of all excised tissue by the specialist performing the procedure, if the specialist is recognised by the Australasian College of Dermatologists as an approved Mohs surgeon—7 to 12 sections (inclusive) (Anaes.)	566.6	667.55 Y
31002	1/03/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	906.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Mohs surgery of skin tumour located on the head, neck, genitalia, hand, digits, leg (below knee) or foot, utilising horizontal frozen sections with mapping of all excised tissue, and histological examination of all excised tissue by the specialist performing the procedure, if the specialist is recognised by the Australasian College of Dermatologists as an approved Mohs surgeon—13 or more sections (Anaes.)	680	818.75 Y
31003	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	604.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Mohs surgery of skin tumour utilising horizontal frozen sections with mapping of all excised tissue, and histological examination of all excised tissue by the specialist performing the procedure, if the specialist is recognised by the Australasian College of Dermatologists as an approved Mohs surgeon—6 or fewer sections Not applicable to a service performed in association with a service to which Item31000 applies (Anaes.)	453.35	516.55 Y
31004	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	755.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Mohs surgery of skin tumour utilising horizontal frozen sections with mapping of all excised tissue, and histological examination of all excised tissue by the specialist performing the procedure, if the specialist is recognised by the Australasian College of Dermatologists as an approved Mohs surgeon—7 to 12 sections Not applicable to a service performed in association with a service to which Item31001 applies (Anaes.)	566.6	667.55 Y
31005	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	906.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Mohs surgery of skin tumour utilising horizontal frozen sections with mapping of all excised tissue, and histological examination of all excised tissue by the specialist performing the procedure, if the specialist is recognised by the Australasian College of Dermatologists as an approved Mohs surgeon—13 or more sections Not applicable to a service performed in association with a service to which Item31002 applies (Anaes.)	680	818.75 Y
31206	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	90.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Tumour, cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), removal of and suture, if: (a) the lesion size is not more than 10 mm in diameter; and (b) the removal is from a mucous membrane by surgical excision (other than by shave excision); and (c) the specimen excised is sent for histological examination (Anaes.)	74.55	84.45 Y
31211	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	128.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Tumour, cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), removal of and suture, if: (a) the lesion size is more than 10 mm, but not more than 20 mm, in diameter; and (b) the removal is from a mucous membrane by surgical excision (other than by shave excision); and (c) the specimen excised is sent for histological examination (Anaes.)	96.1	108.9 Y
31216	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	149.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Tumour, cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), removal of and suture, if: (a) the lesion size is more than 20 mm in diameter; and (b) the removal is from a mucous membrane by surgical excision (other than by shave excision); and (c) the specimen excised is sent for histological examination (Anaes.)	112.05	127 Y
31220	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	223.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Tumours (other than viral verrucae (common warts) and seborrheic keratoses), cysts, ulcers or scars (other than scars removed during the surgical approach at an operation), removal of 4 to 10 lesions and suture, if: (a) the size of each lesion is not more than 10 mm in diameter; and (b) each removal is from cutaneous or subcutaneous tissue by surgical excision (other than by shave excision); and (c) all of the specimens excised are sent for histological examination (Anaes.)	167.45	189.8 Y
31221	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	223.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Tumours, cysts, ulcers or scars (other than scars removed during the surgical approach at an operation), removal of 4 to 10 lesions, if: (a) the size of each lesion is not more than 10 mm in diameter; and (b) each removal is from a mucous membrane by surgical excision (other than by shave excision); and (c) each site of excision is closed by suture; and (d) all of the specimens excised are sent for histological examination (Anaes.)	167.45	189.8 Y
31225	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	196.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Tumours (other than viral verrucae (common warts) and seborrheic keratoses), cysts, ulcers or scars (other than scars removed during the surgical approach at an operation), removal of more than 10 lesions, if: (a) the size of each lesion is not more than 10 mm in diameter; and (b) each removal is from cutaneous or subcutaneous tissue or mucous membrane by surgical excision (other than by shave excision); and (c) each site of excision is closed by suture; and (d) all of the specimens excised are sent for histological examination (Anaes.)	297.6	327.25 Y
31245	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	283.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	SKIN AND SUBCUTANEOUS TISSUE, extensive excision of, in the treatment of SUPPURATIVE HIDRADENITIS (excision from axilla, groin or natal cleft) or SYCOSIS BARBAE or NUCHAE (excision from face or neck) (Anaes.)	287.95	326.35 Y
31250	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	283.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	GIANT HAIRY or COMPOUND NAEVUS, excision of an area at least 1 percent of body surface where the specimen excised is sent for histological confirmation of diagnosis (Anaes.)	287.95	326.35 Y
31340	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	A	1/05/2017	1/07/2021	1219.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Muscle, bone or cartilage, excision of one or more of, if clinically indicated, and if: (a) the specimen excised is sent for histological confirmation; and (b)a malignant tumour of skin covered by Item 31000, 31002, 31003, 31004, 31005, 31356, 31358, 31359, 31361, 31363, 31365, 31367, 31369, 31371,31372, 31373, 31374, 31375 or 31376 is excised (Anaes.)	1/11/1998 75% of the fee for excision of malignant tumour	Y
31345	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	219.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	LIPOMA, removal of by surgical excision or liposuction, where lesion is subcutaneous and 50mm or more in diameter, or is sub-fascial, where the specimen is sent for histological confirmation of diagnosis (Anaes.)	164.65	186.6 Y
31346	1/05/2003	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	219.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Liposuction (suction assisted lipolysis) to one regional area for contour problems of abdominal, upper arm or thigh fat because of repeated insulin injections, if: (a) the lesion is subcutaneous; and (b) the lesion is 50 mm or more in diameter; and (c) photographic and/or diagnostic imaging evidence demonstrating the need for this service is documented in the patient notes (Anaes.)	164.65	186.6 Y
31350	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	450.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Benign tumour of soft tissue (other than tumours of skin, cartilage and bone, simple lipomas covered by Item 31345 and lipomata), removal of, by surgical excision, on a patient 10 years of age or over, if the specimen excised is sent for histological confirmation of diagnosis, other than a service to which another item in this Group applies (Anaes.) (Assist.)	338.2	383.3 Y
31355	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	743.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	MALIGNANT TUMOUR of SOFT TISSUE, excluding tumours of skin, cartilage and bone, removal of by surgical excision, where histological proof of malignancy has been obtained, not being a service to which another item in this Group applies (Anaes.) (Assist.)	557.6	655.55 Y
31356	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	230.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by Item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and (b) the necessary excision diameter is less than 6 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with Item 45201 (Anaes.)	172.75	195.8 Y
31357	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	114.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and (b) the necessary excision diameter is less than 6 mm; and (c) the excised specimen is sent for histological examination; not in association with Item 45201 (Anaes.)	85.6	97 Y
31358	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	281.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by Item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and (b) the necessary excision diameter is 6 mm or more; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (Anaes.)	211.4	239.6 Y
31359	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2016	1/07/2021	343.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by Item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision), if: (a) the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia (the applicable site); and (b) the necessary excision area is at least one third of the surface area of the applicable site; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (H) (Anaes.)	257.7	Y
31360	1/11/2016	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	174.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and (b) the necessary excision diameter is 6 mm or more; and (c) the excised specimen is sent for histological examination (Anaes.)	131.15	148.65 Y

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31361	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	194.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from face, neck, scalp, nipple-areola complex, distal lower limb (distal to, and including, the knee) or distal upper limb (distal to, and including, the ulnar styloid); and (b) the necessary excision diameter is less than 14 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with item 45201 (Anaes.)	145.75	145.2	Y
31362	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	139.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from face, neck, scalp, nipple-areola complex, distal lower limb (distal to, and including, the knee) or distal upper limb (distal to, and including, the ulnar styloid); and (b) the necessary excision diameter is less than 14 mm; and (c) the excised specimen is sent for histological examination; not in association with item 45201 (Anaes.)	104.55	118.45	Y
31363	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	254.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from face, neck, scalp, nipple-areola complex, distal lower limb (distal to, and including, the knee) or distal upper limb (distal to, and including, the ulnar styloid); and (b) the necessary excision diameter is 14 mm or more; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (Anaes.)	190.65	216.05	Y
31364	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	174.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from face, neck, scalp, nipple-areola complex, distal lower limb (distal to, and including, the knee) or distal upper limb (distal to, and including, the ulnar styloid); and (b) the necessary excision diameter is 14 mm or more; and (c) the excised specimen is sent for histological examination (Anaes.)	131.15	148.65	Y
31365	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	164.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by item 31369, 31370, 31371, 31372 or 31373), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from any part of the body not covered by item 31356, 31358, 31359, 31361 or 31363; and (b) the necessary excision diameter is less than 15 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with item 45201 (Anaes.)	123.55	140	Y
31366	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	99.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from any part of the body not covered by item 31357, 31360, 31362 or 31364; and (b) the necessary excision diameter is less than 15 mm; and (c) the excised specimen is sent for histological examination; not in association with item 45201 (Anaes.)	74.55	84.45	Y
31367	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	222.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from any part of the body not covered by item 31356, 31358, 31359, 31361 or 31363; and (b) the necessary excision diameter is at least 15 mm but not more than 30 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with item 45201 (Anaes.)	166.7	188.95	Y
31368	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	130.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from any part of the body not covered by item 31357, 31360, 31362 or 31364; and (b) the necessary excision diameter is at least 15 mm but not more than 30mm; and (c) the excised specimen is sent for histological examination; not in association with item 45201 (Anaes.)	97.95	111.05	Y
31369	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	255.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant skin lesion (other than a malignant skin lesion covered by item 31371, 31372, 31373, 31374, 31375 or 31376), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from any part of the body not covered by item 31356, 31358, 31359, 31361 or 31363; and (b) the necessary excision diameter is more than 30 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (Anaes.)	191.95	217.55	Y
31370	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	149.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Non-malignant skin lesion (other than viral verrucae (common warts) and seborrheic keratoses), including a cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), surgical excision (other than by shave excision) and repair of, if: (a) the lesion is excised from any part of the body not covered by item 31357, 31360, 31362 or 31364; and (b) the necessary excision diameter is more than 30 mm; and (c) the excised specimen is sent for histological examination (Anaes.)	112.05	127	Y
31371	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	371.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant melanoma, appendageal carcinoma, malignant connective tissue tumour of skin or merkel cell carcinoma of skin, definitive surgical excision (other than by shave excision) and repair of, if: (a) the tumour is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and (b) the necessary excision diameter is 6 mm or more; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (Anaes.)	278.6	315.75	Y
31372	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	321.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant melanoma, appendageal carcinoma, malignant connective tissue tumour of skin or merkel cell carcinoma of skin, definitive surgical excision (other than by shave excision) and repair of, if: (a) the tumour is excised from face, neck, scalp, nipple-areola complex, distal lower limb (distal to, and including, the knee) or distal upper limb (distal to, and including, the ulnar styloid); and (b) the necessary excision diameter is less than 14 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with item 45201 (Anaes.)	240.9	273.05	Y
31373	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant melanoma, appendageal carcinoma, malignant connective tissue tumour of skin or merkel cell carcinoma of skin, definitive surgical excision (other than by shave excision) and repair of, if: (a) the tumour is excised from face, neck, scalp, nipple-areola complex, distal lower limb (distal to, and including, the knee) or distal upper limb (distal to, and including, the ulnar styloid); and (b) the necessary excision diameter is 14 mm or more; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (Anaes.)	278.45	315.6	Y
31374	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	220.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant melanoma, appendageal carcinoma, malignant connective tissue tumour of skin or merkel cell carcinoma of skin, definitive surgical excision (other than by shave excision) and repair of, if: (a) the tumour is excised from any part of the body not covered by item 31371, 31372 or 31373; and (b) the necessary excision diameter is less than 15 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with item 45201 (Anaes.)	220	249.35	Y
31375	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	315.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant melanoma, appendageal carcinoma, malignant connective tissue tumour of skin or merkel cell carcinoma of skin, definitive surgical excision (other than by shave excision) and repair of, if: (a) the tumour is excised from any part of the body not covered by item 31371, 31372 or 31373; and (b) the necessary excision diameter is at least 15 mm but not more than 30 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy; not in association with item 45201 (Anaes.)	236.75	268.35	Y
31376	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	365.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Malignant melanoma, appendageal carcinoma, malignant connective tissue tumour of skin or merkel cell carcinoma of skin, definitive surgical excision (other than by shave excision) and repair of, if: (a) the tumour is excised from any part of the body not covered by item 31371, 31372 or 31373; and (b) the necessary excision diameter is more than 30 mm; and (c) the excised specimen is sent for histological examination; and (d) malignancy is confirmed from the excised specimen or previous biopsy (Anaes.)	274.4	311	Y
31400	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	271.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	MALIGNANT UPPER AERODIGESTIVE TRACT TUMOUR up to and including 20mm in diameter (excluding tumour of the lip), excision of, where histological confirmation of malignancy has been obtained (Anaes.)(Assist.)	203.75	230.95	Y
31403	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	315.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	MALIGNANT UPPER AERODIGESTIVE TRACT TUMOUR more than 20mm and up to and including 40mm in diameter (excluding tumour of the lip), excision of, where histological confirmation of malignancy has been obtained (Anaes.) (Assist.)	235.2		Y
31406	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	522.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	MALIGNANT UPPER AERODIGESTIVE TRACT TUMOUR more than 40mm in diameter (excluding tumour of the lip), excision of, where histological confirmation of malignancy has been obtained (Anaes.) (Assist.)	391.9	444.15	Y
31409	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1623.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	PARAPHARYNGEAL TUMOUR, excision of, by cervical approach (Anaes.)(Assist.)	1217.55		Y
31412	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1999.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	RECURRENT OR PERSISTENT PARAPHARYNGEAL TUMOUR, excision of, by cervical approach (Anaes.) (Assist.)	1499.75		Y
31423	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	418.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lymph nodes of neck, selective dissection of one or 2 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck, on a patient 10 years of age or over (Anaes.) (Assist.)	313.55	355.35	Y
31426	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	836	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	LYMPH NODES OF NECK, selective dissection of 3 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck (Anaes.)(Assist.)	627		Y
31429	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1302.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	LYMPH NODES OF NECK, selective dissection of 4 lymph node levels on one side of the neck with preservation of one or more of: internal jugular vein, sternocleido-mastoid muscle, or spinal accessory nerve (Anaes.)(Assist.)	977.15		Y
31432	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1393.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	LYMPH NODES OF NECK, bilateral selective dissection of levels I, II and III (bilateral supraomohyoid dissections)(Anaes.)(Assist.)	1045.1		Y
31435	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1024.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	LYMPH NODES OF NECK, comprehensive dissection of all 5 lymph node levels on one side of the neck (Anaes.)(Assist.)	768.15		Y
31438	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1623.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	LYMPH NODES OF NECK, comprehensive dissection of all 5 lymph node levels on one side of the neck with preservation of one or more of: internal jugular vein, sternocleido-mastoid muscle, or spinal accessory nerve (Anaes.)(Assist.)	1217.55		Y
31454	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Laparoscopy or laparotomy with drainage of bile, as an independent procedure (H) (Anaes.) (Assist.)	439.65		Y
31456	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	255.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	GASTROSCOPY and insertion of nasogastric or nasoenteral feeding tube, where blind insertion of the feeding tube has failed or is inappropriate due to the patient's medical condition (Anaes.)	191.7		Y
31458	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	306.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	GASTROSCOPY and insertion of nasogastric or nasoenteral feeding tube, where blind insertion of the feeding tube has failed or is inappropriate due to the patient's medical condition, and where the use of imaging intensification is clinically indicated (Anaes.)	229.95		Y
31460	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	371.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	PERCUTANEOUS GASTROSTOMY TUBE, jejunal extension to, including any associated imaging services (Anaes.)(Assist.)	278.6		Y

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31462	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	OPERATIVE FEEDING JEJUNOSTOMY performed in conjunction with major upper gastro-intestinal resection (Anaes.).(Assist.)	406.8	Y
31466	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1359.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	ANTIREFLUX OPERATION BY FUNDOPLASTY, via abdominal or thoracic approach, with or without closure of the diaphragmatic hiatus, revision procedure, by laparoscopy or open operation (Anaes.) (Assist.)	1019.95	Y
31468	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1494.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Para-oesophageal hiatus hernia, repair of, with complete reduction of hernia, resection of sac and repair of hiatus, with or without fundoplication, other than a service associated with a service to which item 30756 or 31466 applies (Anaes.).(Assist.)	1120.55	Y
31472	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1399.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Choleocystoduodenostomy, choleocystoenterostomy, choledochojejunostomy or Roux-en-y loop to provide biliary drainage or bypass, other than a service associated with a service to which item 30584 applies (Anaes.).(Assist.)	1049.85	Y
31500	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	270.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	BREAST, BENIGN LESION up to and including 50mm in diameter, including simple cyst, fibroadenoma or fibrocystic disease, open surgical biopsy or excision of, with or without frozen section histology (Anaes.)	202.95	230 Y
31503	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	360.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	BREAST, BENIGN LESION more than 50mm in diameter, excision of (Anaes.).(Assist.)	270.6	306.7 Y
31506	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	405.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	BREAST, ABNORMALITY detected by mammography or ultrasound where guidewire or other localisation procedure is performed, excision biopsy of (Anaes.).(Assist.)	304.45	Y
31509	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	360.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	BREAST, MALIGNANT TUMOUR, open surgical biopsy of, with or without frozen section histology (Anaes.)	270.6	306.7 Y
31512	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	BREAST, MALIGNANT TUMOUR, complete local excision of, with or without frozen section histology (Anaes.).(Assist.)	507.4	Y
31515	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	453.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	BREAST, TUMOUR SITE, re-excision of following open biopsy or incomplete excision of malignant tumour (Anaes.).(Assist.)	340.4	Y
31516	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	902.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	BREAST, MALIGNANT TUMOUR, complete local excision of, with or without frozen section histology when targeted intraoperative radiation therapy(using an Intrabeam® or Xoft® Axxent® device) is performed concurrently, if the patient satisfies the requirements mentioned in paragraph(a) to (g) of Item15900 Applicable only once per breast per lifetime (ii) (Anaes.).(Assist.)	676.6	Y
31519	1/07/2014	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2014	1/07/2021	765.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2014	BREAST, total mastectomy (ii) (Anaes.).(Assist.)	574.45	Y
31524	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1082.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2014	BREAST, subcutaneous mastectomy (ii) (Anaes.).(Assist.)	811.8	Y
31525	1/07/2014	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2014	1/07/2021	541.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2014	BREAST, mastectomy for gynecomastia, with or without liposuction (suction assisted lipolysis), not being a service associated with a service to which item 45585 applies (ii) (Anaes.).(Assist.)	405.8	Y
31530	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	619.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breast, biopsy of solid tumour or tissue of, using a vacuum-assisted breast biopsy device under imaging guidance, for histological examination, if prior to the demonstrated (a) microcalcification of lesion; or(b) impalpable lesion less than or equal to 10mm; or(c) including pre-operative localisation of lesion, if performed, other than a service associated with a service to which item 31548 applies	464.9	521.95
31533	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	143.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	FINE NEEDLE ASPIRATION of an impalpable breast lesion detected by mammography or ultrasound, imaging guided - but not including imaging (Anaes.)	107.65	122 Y
31536	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	197.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breast, preoperative localisation of lesion of, by hookwire or similar device, using interventional imaging techniques, but not including imaging (Anaes.).(Anaes.)	147.85	167.55 Y
31548	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	208.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breast, biopsy of solid tumour or tissue of, using mechanical biopsy device, for histological examination, other than a service associated with a service to which item 31530 applies (Anaes.).(Anaes.)	156.1	176.9 Y
31551	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	225.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	BREAST, HAEMATOMA, SEROMA OR INFLAMMATORY CONDITION including abscess, granulomatous mastitis or similar, exploration and drainage of when undertaken in the operating theatre of a hospital, excluding aftercare (Anaes.)	169.15	Y
31554	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	451.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	BREAST, microdochotomy of, for benign or malignant condition (Anaes.).(Assist.)	338.3	Y
31557	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	360.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	BREAST CENTRAL DUCTS, excision of, for benign condition (Anaes.).(Assist.)	270.6	306.7 Y
31560	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	C	1/11/2002	1/07/2021	360.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	ACCESSORY BREAST TISSUE, excision of (Anaes.).(Assist.)	270.6	306.7 Y
31563	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2002	1/07/2021	270.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	INVERTED NIPPLE, surgical eversion of (Anaes.)	202.7	229.75 Y
31566	1/11/2002	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/11/2002	1/07/2021	135.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	ACCESSORY NIPPLE, excision of (Anaes.)	101.45	115 Y
31569	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2013	1/07/2021	884	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Adjustable gastric band, placement of, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity (Anaes.).(Assist.)	663	Y
31572	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2013	1/07/2021	1087.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Gastric bypass by Roux-en-Y including associated anastomoses, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity not being associated with a service to which item 30515 applies (Anaes.).(Assist.)	815.85	Y
31575	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2013	1/07/2021	884	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Sleeve gastrectomy, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity (Anaes.).(Assist.)	663	Y
31578	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2013	1/07/2021	884	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Gastroplasty (excluding by gastric plication), with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity (Anaes.).(Assist.)	663	Y
31581	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2013	1/07/2021	1087.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Gastric bypass by biliopancreatic diversion with or without duodenal switch including gastric resection and anastomoses, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity (Anaes.).(Assist.)	815.85	Y
31584	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	16/11/2017	1/07/2021	1601.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Surgical reversal of previous bariatric procedure, including revision or conversion, if:a) the previous procedure involved any of the following:(i) placement of adjustable gastric banding;(ii) gastric bypass;(iii) sleeve gastrectomy;(iv) gastroplasty (excluding gastric plication);(v) biliopancreatic diversion; and(b) any of items 31569 to 31581 applied to the previous procedure(other than a service associated with a service to which item 31581 applies (Anaes.).(Assist.)	1201.15	Y
31585	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	865.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of adjustable gastric band (Anaes.).(Assist.)	649.4	Y
31587	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/2013	1/07/2021	102.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Adjustment of gastric band as an independent procedure including any associated consultation	76.45	86.65
31590	1/07/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/2013	1/07/2021	261.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2013	Adjustment of gastric band reservoir, repair, revision or replacement of (Anaes.).(Assist.)	196.5	222.7 Y
32000	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1073.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LARGE INTESTINE, resection of, without anastomosis, including right hemicolectomy (including formation of stoma) (Anaes.).(Assist.)	804.85	Y
32003	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1122.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LARGE INTESTINE, resection of, with anastomosis, including right hemicolectomy (Anaes.).(Assist.)	841.9	Y
32004	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1197	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	LARGE INTESTINE, subtotal colectomy (resection of right colon, transverse colon and splenic flexure) without anastomosis, not being a service associated with a service to which item 32000, 32003, 32005 or 32006 applies (Anaes.).(Assist.)	897.75	Y
32005	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1352.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	LARGE INTESTINE, subtotal colectomy (resection of right colon, transverse colon and splenic flexure) with anastomosis, not being a service associated with a service to which item 32000, 32003, 32004 or 32006 applies (Anaes.).(Assist.)	1014.15	Y
32006	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1197	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LEFT HEMICOLECTOMY, including the descending and sigmoid colon (including formation of stoma) (Anaes.).(Assist.)	897.75	Y
32009	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1419.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY AND ILEOSTOMY (Anaes.).(Assist.)	1064.95	Y
32012	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1568.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY AND ILEORECTAL ANASTOMOSIS (Anaes.).(Assist.)	1176.35	Y
32015	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1927.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY WITH EXCISION OF RECTUM AND ILEOSTOMY1 surgeon (Anaes.).(Assist.)	1445.7	Y
32018	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1634.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY WITH EXCISION OF RECTUM AND ILEOSTOMY, COMBINED SYNCHRONOUS OPERATION; ABDOMINAL RESECTION (including aftercare) (Anaes.).(Assist.)	1225.95	Y
32021	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY WITH EXCISION OF RECTUM AND ILEOSTOMY, COMBINED SYNCHRONOUS OPERATION; PERINEAL RESECTION (Assist.)	439.65	
32023	1/03/2013	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	577.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2013	Endoscopic insertion of stent or stents for large bowel obstruction, stricture or stenosis, including colonoscopy and any image intensification, where the obstruction is due to: a) a pre-diagnosed colorectal cancer, or cancer of an organ adjacent to the bowel; or b) an unknown diagnosis (Anaes.)	433.4	Y
32024	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1419.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	RECTUM, HIGH RESTORATIVE ANTERIOR RESECTION WITH INTRAPERITONEAL ANASTOMOSIS (of the rectum)(greater than 10 centimetres from the anal verge;excluding resection of sigmoid colon alone not being a service associated with a service to which item 32103, 32104 or 32106 applies (Anaes.).(Assist.)	1064.95	Y
32025	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1899.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	RECTUM, LOW RESTORATIVE ANTERIOR RESECTION WITH EXTRAPERITONEAL ANASTOMOSIS (of the rectum)(less than 10 centimetres from the anal verge, with or without covering stoma not being a service associated with a service to which item 32103, 32104 or 32106 applies (Anaes.).(Assist.)	1424.45	Y
32026	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2045.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	RECTUM, ULTRA LOW RESTORATIVE RESECTION, with or without covering stoma, where the anastomosis is sited in the anorectal region and is 6cm or less from the anal verge (Anaes.).(Assist.)	1534	Y
32028	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2191.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	RECTUM, LOW OR ULTRA LOW RESTORATIVE RESECTION, with perianal sutured coloanal anastomosis, with or without covering stoma (Anaes.).(Assist.)	1643.7	Y
32029	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	438.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	COLONIC RESERVOIR, construction of, being a service associated with a service to which any other item in this Subgroup applies (Anaes.).(Assist.)	328.7	Y
32030	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1073.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTOSIGMOIDECTOMY(Hartmann's operation) (Anaes.).(Assist.)	804.85	Y
32033	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1568.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	RESTORATION OF BOWEL following Hartmann's or similar operation, including dismantling of the stoma (Anaes.).(Assist.)	1176.35	Y
32036	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1989.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SACROCOCCYGEAL AND PRESACRAL TUMOURexcision of (Anaes.).(Assist.)	1492	Y
32039	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1597.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTUM AND ANUS, ABDOMINOPERINEAL RESECTION OF1 surgeon (Anaes.).(Assist.)	1197.95	Y
32042	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1345.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTUM AND ANUS, ABDOMINOPERINEAL RESECTION OF, COMBINED SYNCHRONOUS OPERATIONabdominal resection (Anaes.).(Assist.)	1009.2	Y

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32045	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	503.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTUM AND ANUS, ABDOMINOPERINEAL RESECTION OF, COMBINED SYNCHRONOUS OPERATIONperineal resection (Assist.)	377.7		
32046	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	778.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	RECTUM AND ANUS, abdomino-perineal resection of, combined synchronous operation - perineal resection where the perineal surgeon also provides assistance to the abdominal surgeon (Assist.)	583.65		
32047	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	906.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PERINEAL PROCTECTOMY (Anaes.) (Assist.)	680		Y
32051	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2410.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY with excision of rectum and ileoanal anastomosis with formation of ileal reservoir, with or without creation of temporary ileostomyL surgeon (Anaes.) (Assist.)	1807.85		Y
32054	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2212.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY with excision of rectum and ileoanal anastomosis with formation of ileal reservoir, with or without creation of temporary ileostomyconjoint surgery, abdominal surgeon (including aftercare) (Anaes.) (Assist.)	1659.3		Y
32057	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL COLECTOMY with excision of rectum and ileoanal anastomosis with formation of ileal reservoirconjoint surgery, perineal surgeon (Assist.)	439.65		
32060	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2410.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ILEOSTOMY CLOSURE with rectal resection and mucosectomy and ileoanal anastomosis with formation of ileal reservoir, with or without temporary loop ileostomyL surgeon (Anaes.) (Assist.)	1807.85		Y
32063	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2212.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ILEOSTOMY CLOSURE with rectal resection and mucosectomy and ileoanal anastomosis with formation of ileal reservoir, with or without temporary loop ileostomyconjoint surgery, abdominal surgeon (including aftercare) (Anaes.) (Assist.)	1659.3		Y
32066	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ILEOSTOMY CLOSURE with rectal resection and mucosectomy and ileoanal anastomosis with formation of ileal reservoir, with or without temporary loop ileostomyconjoint surgery, perineal surgeon (Assist.)	439.65		
32069	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1783.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ILEOSTOMY RESERVOIR, continent type, creation of, including conversion of existing ileostomy where appropriate (Anaes.)	1337.3		Y
32072	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	49.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SIGMOIDOSCOPIC EXAMINATION (with rigid sigmoidoscope), with or without biopsy	37.35	42.35	
32075	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	78.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SIGMOIDOSCOPIC EXAMINATION (with rigid sigmoidoscope), UNDER GENERAL ANAESTHESIA, with or without biopsy, not being a service associated with a service to which another item in this Group applies (Anaes.)	58.6	66.4	Y
32084	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	115.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Sigmoidoscopy or colonoscopy up to the hepatic flexure, with or without biopsy,other thana service associated with a service to whichany of Items 32222 to 32228applies. (Anaes.)	86.95	98.55	Y
32087	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	213	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Endoscopic examination of the colon up to the hepatic flexure by sigmoidoscopy or colonoscopy for the removal of one or more polyps, other than a service associated with a service to which any of Items 32222 to 32228 applies (Anaes.) (Anaes.)	159.75	181.05	Y
32094	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	574.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ENDOSCOPIC DILATATION OF COLORECTAL STRICTURES including colonoscopy (Anaes.)	430.65		Y
32095	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	133	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ENDOSCOPIC EXAMINATION of SIGMOIDOSCOPY, with flexible endoscope passed by stoma, with or without biopsies (Anaes.)	99.75	113.05	Y
32096	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTAL BIOPSY, full thickness, under general anaesthesia, or under epidural or spinal (intrathecal) nerve block where undertaken in a hospital (Anaes.) (Assist.)	200.55		Y
32099	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	346.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	RECTAL TUMOUR of 5 centimetres or less in diameter, per anal submucosal excision of (Anaes.) (Assist.)	260.1		Y
32102	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	RECTAL TUMOUR of greater than 5 centimetres in diameter, indicated by pathological examination, per anal submucosal excision of (Anaes.) (Assist.)	495.3		Y
32103	1/05/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	803.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision of, using rectoscopy incorporating either 3-dimensional or 2-dimensional optic viewing systems, if removal is unable to be performed during colonoscopy or by local excision, other than a service associated with a service to which Item 32024, 32025, 32104 or 32106 applies (Anaes.) (Assist.)	602.7		Y
32104	1/05/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1040.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	RECTAL TUMOUR, of 4 cm or greater in diameter, per anal excision of, using rectoscopy incorporating either 3-dimensional or 2-dimensional optic viewing systems, if removal is unable to be performed during colonoscopy or by local excision, other than a service associated with a service to which Item 32024, 32025, 32103 or 32106 applies (Anaes.) (Assist.)	780.15		Y
32105	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	503.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANORECTAL CARCINOMAper anal full thickness excision of (Anaes.) (Assist.)	377.7	428.1	Y
32106	1/05/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2004	1/07/2021	1419.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	ANTEROLATERAL INTRAPERITONEAL RECTAL TUMOUR, per anal excision of, using rectoscopy incorporating either 3-dimensional or 2-dimensional optic viewing systems, if removal is unable to be performed during colonoscopy and if removal requires dissection within the peritoneal cavity, other than a service associated with a service to which Item 32024, 32025, 32103 or 32104 applies (Anaes.) (Assist.)	1064.95	1332	Y
32108	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1040.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTAL TUMOUR, transsphincteric excision of (Kraske or similar operation) (Anaes.) (Assist.)	780.15		Y
32111	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTAL PROLAPSEDelorme procedure for (Anaes.) (Assist.)	495.3		Y
32112	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	803.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	RECTAL PROLAPSE, perineal recto-sigmoidectomy for (Anaes.) (Assist.)	602.7		Y
32114	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	181.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTAL STRICTURE, per anal release of (Anaes.)	136.15	154.3	Y
32115	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	132.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	RECTAL STRICTURE, dilatation of (Anaes.)	99.05		Y
32117	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1040.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	RECTAL PROLAPSE, abdominal rectopexy of (Anaes.) (Assist.)	780.15		Y
32120	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECTAL PROLAPSE, perineal repair of (Anaes.) (Assist.)	200.55		Y
32123	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	346.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANAL STRICTURE, anoplasty for (Anaes.) (Assist.)	260.1	294.75	Y
32126	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	503.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANAL INCONTINENCE, Parks' intersphincteric procedure for (Anaes.) (Assist.)	377.7		Y
32129	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANAL SPHINCTER, direct repair of (Anaes.) (Assist.)	495.3		Y
32131	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	555.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	RECTOCELE, transanal repair of rectocele (Anaes.) (Assist.)	416.45		Y
32132	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	46.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HAEMORRHOIDS OR RECTAL PROLAPSEsclerotherapy for (Anaes.)	35.2	39.9	Y
32135	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	49.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	HAEMORRHOIDS OR RECTAL PROLAPSErubber band ligation of, with or without sclerotherapy, cryotherapy or infra red therapy for (Anaes.)	52.75	59.8	Y
32138	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	192.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	HAEMORRHOIDECTOMY including excision of anal skin tags when performed (Anaes.)	287	325.3	Y
32139	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	382.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	HAEMORRHOIDECTOMY involving third or fourth degree haemorrhoids, including excision of anal skin tags when performed (Anaes.) (Assist.)	287		Y
32142	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	20.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ANAL SKIN TAGS or ANAL POLYPS, excision of 1 or more of (Anaes.)	52.75	59.8	Y
32145	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	31/05/2018	1/07/2021	94.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ANAL SKIN TAGS or ANAL POLYPS, excision of 1 or more of, undertaken in the operating theatre of a hospital (Anaes.)	105.4		Y
32147	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	46.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PERIANAL THROMBOSIS, incision of (Anaes.)	35.2	39.9	Y
32150	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OPERATION FOR FISSURE(ANAL), including excision or sphincterotomy, but excluding dilatation only (Anaes.) (Assist.)	200.55	227.25	Y
32153	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	72.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANUS, DILATATION OF, under general anaesthesia, with or without disimpaction of faeces, not being a service associated with a service to which another item in this Group applies (Anaes.)	54.7		Y
32156	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	137.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FISTULA-IN-ANO, SUBCUTANEOUS, excision of (Anaes.)	102.8	116.5	Y
32159	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	346.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	ANAL FISTULA, treatment of, by excision or by insertion of a Seton, or by a combination of both procedures, involving the lower half of the anal sphincter mechanism (Anaes.) (Assist.)	260.1		Y
32162	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	503.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	ANAL FISTULA, treatment of, by excision or by insertion of a Seton, or by a combination of both procedures, involving the upper half of the anal sphincter mechanism (Anaes.) (Assist.)	377.7		Y
32165	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	660.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANAL FISTULA, repair of, by mucosal flap advancement (Anaes.) (Assist.)	495.3	572.5	Y
32166	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	216.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ANAL FISTULA - readjustment of Seton (Anaes.)	160.95	182.4	Y
32168	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	137.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	FISTULA WOUND, review of, under general or regional anaesthetic, as an independent procedure (Anaes.)	102.8		Y
32171	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	92.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANORECTAL EXAMINATION, with or without biopsy, under general anaesthetic, not being a service associated with a service to which another item in this Group applies (Anaes.)	69.3		Y
32174	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	92.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INTR-ANAL, perianal or ischorectal abscess, drainage of (excluding aftercare) (Anaes.)	69.3	78.5	Y
32175	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	169.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	INTRA-ANAL, PERIANAL or ISCHIO-RECTAL ABSCESS, draining of, undertaken in the operating theatre of a hospital (excluding aftercare) (Anaes.)	126.95		Y
32177	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	181.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	ANAL WARTS, removal of, under general anaesthesia, or under regional or field nerve block (excluding pudendal block) requiring admission to a hospital, where the time taken is less than or equal to 45 minutes - not being a service associated with a service to which Item 35507 or 35508 applies (Anaes.)	136		Y
32180	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	ANAL WARTS, removal of, under general anaesthesia, or under regional or field nerve block (excluding pudendal block) requiring admission to a hospital, where the time taken is greater than 45 minutes - not being a service associated with a service to which Item 35507 or 35508 applies (Anaes.)	200.55		Y
32183	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	584.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INTESTINAL SLING PROCEDURE prior to radiotherapy (Anaes.) (Assist.)	438.3		Y
32186	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	584.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COLONIC LAVAGE, total, intra operative (Anaes.) (Assist.)	438.3		Y
32200	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	DISTAL MUSCLE, devascularisation of (Anaes.) (Assist.)	230.8	261.55	Y
32203	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	ANAL OR PERINEAL GRACILOPLASTY (Anaes.) (Assist.)	495.6		Y
32206	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	596.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	STIMULATOR AND ELECTRODES, insertion of, following previous gracilopleaty (Anaes.) (Assist.)	447.75		Y
32209	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	959.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	ANAL OR PERINEAL GRACILOPLASTY with insertion of stimulator and electrodes (Anaes.) (Assist.)	719.5		Y
32210	19/06/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	265.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	GRACILIS NEOSPHINCTER PACEMAKER, replacement of (Anaes.)	199.35	225.95	Y

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32212	1/05/1997	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	141.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/1997	AND-RECTAL APPLICATION OF FORMALIN in the treatment of radiation proctitis, where performed in the operating theatre of a hospital, excluding aftercare (Anaes.)	106.35		Y
32213	1/11/2005	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	687.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2017	Sacral nerve lead or leads, percutaneous placement using fluoroscopic guidance (or open placement) and intraoperative test stimulation, to manage faecal incontinence in a patient who:a) has an anatomically intact but functionally deficient anal sphincter; and b) has faecal incontinence that has been refractory to conservative non-surgical treatment for at least 12 months; other than a patient who: c)is medically unfit for surgery; or d) is pregnant or planning pregnancy; or e) has irritable bowel syndrome; or f) has congenital anorectal malformations; or g) has active anal abscesses or fistulas; or h) has anorectal organic bowel disease, including cancer; or i) has functional effects of previous pelvic irradiation; or j) has congenital or acquired malformations of the sacrum; or k)has had rectal or anal surgery within the previous 12 months (Anaes.)	515.85		Y
32214	1/11/2005	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	347.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2017	Neurostimulator or receiver, subcutaneous placement of, involving placement and connection of an extension wire to a sacral nerve electrode using fluoroscopic guidance, to manage faecal incontinence in a patient who:a) has an anatomically intact but functionally deficient anal sphincter; and b) has faecal incontinence that has been refractory to conservative non-surgical treatment for at least 12 months; other than a patient who: c) is medically unfit for surgery; or d) is pregnant or planning pregnancy; or e) has irritable bowel syndrome; or f) has congenital anorectal malformations; or g) has active anal abscesses or fistulas; or h) has anorectal organic bowel disease, including cancer; or i) has functional effects of previous pelvic irradiation; or j) has congenital or acquired malformations of the sacrum; or k) has had rectal or anal surgery within the previous 12 months (Anaes.) (Assist.)	260.7		Y
32215	1/11/2005	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	130.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2017	Sacral nerve electrode or electrodes, management, adjustment and electronic programming of the neurostimulator by a medical practitioner, to manage faecal incontinence, other than in a patient who: a) is medically unfit for surgery; or b) is pregnant or planning pregnancy; or c) has irritable bowel syndrome; or d) has congenital anorectal malformations; or e) has active anal abscesses or fistulas; or f) has anorectal organic bowel disease, including cancer; or g) has functional effects of previous pelvic irradiation; or h) has congenital or acquired malformations of the sacrum; or i) has had rectal or anal surgery within the previous 12 months—each day	97.85	110.9	
32216	1/11/2005	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	617.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2017	Sacral nerve lead or leads, percutaneous surgical repositioning of, using fluoroscopic guidance (or open surgical repositioning of) and intraoperative test stimulation, to correct displacement or unsatisfactory positioning, if the lead was inserted to manage faecal incontinence in a patient who:a) has an anatomically intact but functionally deficient anal sphincter; and b) has faecal incontinence that has been refractory to conservative non-surgical treatment for at least 12 months; other than a patient who: c) is medically unfit for surgery; or d) is pregnant or planning pregnancy; or e) has irritable bowel syndrome; or f) has congenital anorectal malformations; or g) has active anal abscesses or fistulas; or h) has anorectal organic bowel disease, including cancer; or i) has functional effects of previous pelvic irradiation; or j) has congenital or acquired malformations of the sacrum; or k) has had rectal or anal surgery within the previous 12 months other than a service to which item 32213 applies (Anaes.)	463.2		Y
32217	1/11/2005	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	162.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2017	Neurostimulator or receiver, removal of, if the neurostimulator or receiver was inserted to manage faecal incontinence in a patient who:a) has an anatomically intact but functionally deficient anal sphincter; and b) has faecal incontinence that has been refractory to conservative non-surgical treatment for at least 12 months; other than a patient who: c) is medically unfit for surgery; or d) is pregnant or planning pregnancy; or e) has irritable bowel syndrome; or f) has congenital anorectal malformations; or g) has active anal abscesses or fistulas; or h) has anorectal organic bowel disease, including cancer; or i) has functional effects of previous pelvic irradiation; or j) has congenital or acquired malformations of the sacrum; or k) has had rectal or anal surgery within the previous 12 months (Anaes.)	122		Y
32218	1/11/2005	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	162.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2017	Sacral nerve lead or leads, removal of, if the lead was inserted to manage faecal incontinence in a patient who:a) has an anatomically intact but functionally deficient anal sphincter; and b) has faecal incontinence that has been refractory to conservative non-surgical treatment for at least 12 months; other than a patient who: c) is medically unfit for surgery; or d) is pregnant or planning pregnancy; or e) has irritable bowel syndrome; or f) has congenital anorectal malformations; or g) has active anal abscesses or fistulas; or h) has anorectal organic bowel disease, including cancer; or i) has functional effects of previous pelvic irradiation; or j) has congenital or acquired malformations of the sacrum; or k) has had rectal or anal surgery within the previous 12 months (Anaes.)	122		Y
32220	1/03/2009	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2009	1/07/2021	940.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2015	Insertion of an artificial bowel sphincter for severe faecal incontinence in the treatment of a patient for whom conservative and other less invasive forms of treatment are contraindicated or have failed.Contraindicated in: (a)patients with inflammatory bowel disease, pelvic sepsis, pregnancy, progressive degenerative diseases or a scarred or fragile peritoneum; and (b)patients who have had an adverse reaction or radiopaque solution; and (c)patients who engage in receptive anal intercourse (Anaes.) (Assist.)	705.45	852.65	Y
32221	1/03/2009	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/03/2009	1/07/2021	940.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2015	Removal or revision of an artificial bowel sphincter (with or without replacement) for severe faecal incontinence in the treatment of a patient for whom conservative and other less invasive forms of treatment are contraindicated or have failed.Contraindicated in: (a)patients with inflammatory bowel disease, pelvic sepsis, pregnancy, progressive degenerative diseases or a scarred or fragile peritoneum; and (b)patients who have had an adverse reaction to radiopaque solution; and (c)patients who engage in receptive anal intercourse (Anaes.) (Assist.)	705.45	852.65	Y
32222	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	347.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient: (a) following a positive faecal occult blood test; or (b) who has symptoms consistent with pathology of the colonic mucosa; or (c) with anaemia or iron deficiency; or (d) for whom diagnostic imaging has shown an abnormality of the colon; or (e) who is undergoing the first examination following surgery for colorectal cancer; or (f) who is undergoing pre–operative evaluation; or (g) for whom a repeat colonoscopy is required due to inadequate bowel preparation for the patient's previous colonoscopy; or (h) for the management of inflammatory bowel disease Applicable only once on a day under a single episode of anaesthesia or other sedation (Anaes.)	260.95	295.75	Y
32223	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	347.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has had a colonoscopy that revealed: (i) 1 to 4 adenomas, each of which was less than 10 mm in diameter, had no villous features and had no high grade dysplasia; or (ii) 1 or 2 sessile serrated lesions, each of which was less than 10 mm in diameter, and without dysplasia; or (b) with a moderate risk of colorectal cancer due to family history; or (c) with a history of colorectal cancer, who has had an initial post–operative colonoscopy that did not reveal any adenomas or colorectal cancer Applicable only once in any 5 year period.	260.95	295.75	
32224	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	347.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient with a moderate risk of colorectal cancer due to: (a) a history of adenomas, including an adenoma that: (i) was 10 mm or greater in diameter; or (ii) had villous features; or (iii) had high grade dysplasia; or (b) having had a previous colonoscopy that revealed: (i) 5 to 9 adenomas, each of which was less than 10 mm in diameter, had no villous features and had no high grade dysplasia; or (ii) 1 or 2 sessile serrated lesions, each of which was 10 mm or greater in diameter or had dysplasia; or (iii) a hyperplastic polyp that was 10 mm or greater in diameter; or (iv) 3 or more sessile serrated lesions, each of which was less than 10 mm in diameter and had no dysplasia; or (v) 1 or 2 traditional serrated adenomas, of any size Applicable only once in any 3 year period (Anaes.)	260.95	295.75	
32225	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	347.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient with a high risk of colorectal cancer due to having had a previous colonoscopy that: (a) revealed 10 or more adenomas; or (b) included a piecemeal, or possibly incomplete, excision of a large, sessile polyp Applicable not more than 4 times in any 12 month period (Anaes.)	260.95	295.75	Y
32226	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	347.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a high risk of colorectal cancer due to: (a) having either: (i) a known or suspected familial condition, such as familial adenomatous polyposis, Lynch syndrome or serrated polyposis syndrome; or (ii) a genetic mutation associated with hereditary colorectal cancer; or (b) having had a previous colonoscopy that revealed: (i) 5 or more sessile serrated lesions, each of which was less than 10 mm in diameter and had no dysplasia; or (ii) 3 or more sessile serrated lesions, 1 or more of which was 10 mm or greater in diameter or had dysplasia; or (iii) 3 or more traditional serrated adenomas, of any size Applicable only once in any 12 month period (Anaes.)	260.95	295.75	
32227	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	488.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Endoscopic examination of the colon to the caecum by colonoscopy: (a) for the treatment of bleeding, including one or more of the following: (i) radiation proctitis; (ii) angiectasia; (iii) post–polypectomy bleeding; or (b)for the treatment of colonic strictures with balloon dilatation Applicable only once on a day under a single episode of anaesthesia or other sedation (Anaes.)	366.15	415	Y
32228	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	347.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Endoscopic examination of the colon to the caecum by colonoscopy, other that a service to which item 32222, 32223, 32224, 32225, or 32226 applies Applicable only once (Anaes.)	260.95	295.75	Y
32229	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	280.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Removal of one or more polyps during colonoscopy, in association with a service to which item 32222, 32223, 32224, 32225, 32226, or 32228 applies (Anaes.)	210.45	238.55	Y
32230	1/11/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2021	1/11/2021	695.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Endoscopic mucosal resection using electrocautery of a non–invasive sessile or flat superficial colorectal neoplasm which is at least 25mm in diameter, if the service is: (a) provided by a specialist gastroenterologist or surgical endoscopist; and (b) supported by photographic evidence to confirm the size of the polyp in situ, and (c) performed within 6 months after a service to which item 32222, 32223, 32224, 32225, 32226 or 32228 applies has been performed Applicable only once per polyp (H) (Anaes.)	521.45		Y
32500	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	P	C	1/12/1991	1/07/2021	114.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, multiple injections of sclerosant using continuous compression techniques, including associated consultation, one or both legs, if: (a) proximal reflux of 0.5 seconds or longer has been demonstrated; and (B) the service is not for cosmetic purposes; and (c) the service is not associated with: (i) any other varicose vein operation on the same leg (excluding aftercare); or (ii) a service on the same leg (excluding aftercare) to which any of the following items apply: (A) 35200; (B) 59070 to 60078; (C) 60500 to 60509; (D) 61109 Applicable to a maximum of 6 treatments in a 12 month period (Anaes.)	85.65	97.1	Y
32504	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	P	C	1/11/1994	1/07/2021	278.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2002	VARICOSE VEINS, multiple excision of tributaries, with or without division of 1 or more perforating veins - 1 leg - not being a service associated with a service to which item 32507, 32508, 32511, 32514 or 32517 applies on the same leg (Anaes.)	208.95	236.8	Y
32507	1/07/1998	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	P	A	1/11/2021	1/07/2021	555.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, sub-fascial ligation of one or more incompetent perforating veins in one leg of a patient, if the service: (a) is performed by open surgical technique (not including endoscopic ligation) and the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discolouration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; and (b) is not associated with: (i) any other varicose vein operation on the same leg; or (ii) a service (on the same leg) to which item35200, 60072, 60075 or 60078 applies (H) (Anaes.) (Assist.)	416.45		Y

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32508	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	555.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, complete dissection at the saphena-femoral or saphena-popliteal junction, with or without either ligation or stripping, or both, of the great or small saphenous veins in one leg of a patient, for the first time on the same leg, including excision or injection of either tributaries or incompetent perforating veins, or both, if the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (a) ache; (b) pain; (c) tightness; (d) skin irritation; (e) heaviness; (f) muscle cramps; (g) limb swelling; (h) discoloration; (i) discomfort; (j) any other signs or symptoms attributable to venous dysfunction (Hi) (Anaes.) (Assist.)	416.45		Y
32511	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	825.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, complete dissection at the saphena-femoral and saphena-popliteal junction, with or without either ligation or stripping, or both, of the great or small saphenous veins in one leg of a patient, for the first time on the same leg, including excision or injection of either tributaries or incompetent perforating veins, or both, if the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (a) ache; (b) pain; (c) tightness; (d) skin irritation; (e) heaviness; (f) muscle cramps; (g) limb swelling; (h) discoloration; (i) discomfort; (j) any other signs or symptoms attributable to venous dysfunction (Hi) (Anaes.) (Assist.)	619.1		Y
32514	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	964.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, ligation of the great or small saphenous vein in the same leg of a patient, with or without stripping, by re-operation for recurrent veins in the same territory—one leg—including excision or injection of either tributaries or incompetent perforating veins, or both, if the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (a) ache; (b) pain; (c) tightness; (d) skin irritation; (e) heaviness; (f) muscle cramps; (g) limb swelling; (h) discoloration; (i) discomfort; (j) any other signs or symptoms attributable to venous dysfunction (Hi) (Anaes.) (Assist.)	723.3		Y
32517	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1241.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, ligation of the great and small saphenous vein in the same leg of a patient, with or without stripping, by re-operation for recurrent veins in either territory—one leg—including excision or injection of either tributaries or incompetent perforating veins, or both, if the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (a) ache; (b) pain; (c) tightness; (d) skin irritation; (e) heaviness; (f) muscle cramps; (g) limb swelling; (h) discoloration; (i) discomfort; (j) any other signs or symptoms attributable to venous dysfunction (Hi) (Anaes.) (Assist.)	931.35		Y
32520	1/11/2011	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2011	1/07/2021	555.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great or small saphenous vein (and major tributaries of saphenous veins as necessary) in one leg of a patient, using a laser probe introduced by an endovenous catheter, if all of the following apply: (a) it is documented by duplex ultrasound that the great or small saphenous vein (whichever is to be treated) of the patient demonstrates reflux of 0.5 seconds or longer; (b) the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discoloration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; (c) the service does not include radiofrequency diathermy, radiofrequency ablation or cyanoacrylate adhesive; (d) the service is not associated with a service (on the same leg) to which any of the following items apply: (i) 32500 to 32507; (ii) 35200; (iii) 59970 to 60078; (iv) 60500 to 60509; (v) 61109 The service includes all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) (Anaes.)	416.45	472	Y
32522	1/11/2011	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/2011	1/07/2021	825.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great and small saphenous vein (and major tributaries of saphenous veins as necessary) in one leg of a patient, using a laser probe introduced by an endovenous catheter, if all of the following apply: (a) it is documented by duplex ultrasound that the great and small saphenous veins of the patient demonstrate reflux of 0.5 seconds or longer; (b) the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discoloration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; (c) the service does not include radiofrequency diathermy, radiofrequency ablation or cyanoacrylate adhesive; (d) the service is not associated with a service (on the same leg) to which any of the following items apply: (i) 32500 to 32507; (ii) 35200; (iii) 59970 to 60078; (iv) 60500 to 60509; (v) 61109 The service includes all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) (Anaes.)	619.1	737.55	Y
32523	1/05/2013	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/05/2013	1/07/2021	555.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great or small saphenous vein (and major tributaries of saphenous veins as necessary) in one leg of a patient, using a radiofrequency catheter introduced by an endovenous catheter, if all of the following apply: (a) it is documented by duplex ultrasound that the great or small saphenous vein (whichever is to be treated) demonstrates reflux of 0.5 seconds or longer; (b) the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discoloration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; (c) the service does not include endovenous laser therapy or cyanoacrylate adhesive; (d) the service is not associated with a service (on the same leg) to which any of the following items apply: (i) 32500 to 32507; (ii) 35200; (iii) 59970 to 60078; (iv) 60500 to 60509; (v) 61109 The service includes all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) (Anaes.)	416.45	472	Y
32526	1/05/2013	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/05/2013	1/07/2021	825.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great and small saphenous vein (and major tributaries of saphenous veins as necessary) in one leg of a patient, using a radiofrequency catheter introduced by an endovenous catheter, if all of the following apply: (a) it is documented by duplex ultrasound that the great and small saphenous veins demonstrate reflux of 0.5 seconds or longer; (b) the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discoloration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; (c) the service does not include endovenous laser therapy or cyanoacrylate adhesive; (d) the service is not associated with a service (on the same leg) to which any of the following items apply: (i) 32500 to 32507; (ii) 35200; (iii) 59970 to 60078; (iv) 60500 to 60509; (v) 61109 The service includes all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) (Anaes.)	619.1	737.55	Y
32528	1/05/2018	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/05/2018	1/07/2021	555.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great or small saphenous vein (and major tributaries of saphenous veins as necessary) in one leg of a patient, using cyanoacrylate adhesive, if all of the following apply: (a) it is documented by duplex ultrasound that the great or small saphenous vein (whichever is to be treated) demonstrates reflux of 0.5 seconds or longer; (b) the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discoloration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; (c) the service does not include radiofrequency diathermy, radiofrequency ablation or endovenous laser therapy; (d) the service is not associated with a service (on the same leg) to which any of the following items apply: (i) 32500 to 32507; (ii) 35200; (iii) 59970 to 60078; (iv) 60500 to 60509; (v) 61109 The service include all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) (Anaes.)	416.45	472	Y
32529	1/05/2018	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/05/2018	1/07/2021	825.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great and small saphenous vein (and major tributaries of saphenous veins as necessary) in one leg of a patient, using cyanoacrylate adhesive, if all of the following apply: (a) it is documented by duplex ultrasound that the great and small saphenous veins demonstrate reflux of 0.5 seconds or longer; (b) the patient has significant signs or symptoms (including one or more of the following signs or symptoms) attributable to venous reflux: (i) ache; (ii) pain; (iii) tightness; (iv) skin irritation; (v) heaviness; (vi) muscle cramps; (vii) limb swelling; (viii) discoloration; (ix) discomfort; (x) any other signs or symptoms attributable to venous dysfunction; (c) the service does not include radiofrequency diathermy, radiofrequency ablation or endovenous laser therapy; (d) the service is not associated with a service (on the same leg) to which any of the following items apply: (i) 32500 to 32507; (ii) 35200; (iii) 59970 to 60078; (iv) 60500 to 60509; (v) 61109 The service includes all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) (Anaes.)	619.1	737.55	Y
32700	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1494.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	ARTERY OF NECK, bypass using vein or synthetic material (Anaes.) (Assist.)	1120.95		Y
32703	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1236.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTERNAL CAROTID ARTERY, transection and reanastomosis of, or resection of small length and reanastomosis of - with or without endarterectomy (Anaes.) (Assist.)	927.3		Y
32708	1/07/1996	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1478.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1996	AORTIC BYPASS for occlusive disease using a straight non-bifurcated graft (Anaes.) (Assist.)	1109.25		Y
32710	1/07/1996	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1643.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1996	AORTIC BYPASS for occlusive disease using a bifurcated graft with 1 or both anastomoses to the iliac arteries (Anaes.) (Assist.)	1232.45		Y
32711	1/07/1996	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1807.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1996	AORTIC BYPASS for occlusive disease using a bifurcated graft with 1 or both anastomoses to the common-femoral or profunda femoris arteries (Anaes.) (Assist.)	1355.75		Y
32712	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1306.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	ILIO-FEMORAL BYPASS GRAFTING (Anaes.) (Assist.)	980.05		Y
32715	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1306.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	AXILLARY or SUBCLAVIAN TO FEMORAL BYPASS GRAFTING to 1 or both FEMORAL ARTERIES (Anaes.) (Assist.)	980.05		Y
32718	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1236.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FEMORO-FEMORAL OR ILIO-FEMORAL CROSS-OVER BYPASS GRAFTING (Anaes.) (Assist.)	927.3		Y
32721	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1963.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RENAL ARTERY, bypass grafting to (Anaes.) (Assist.)	1472.85		Y
32724	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2229.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RENAL ARTERIES (both), bypass grafting to (Anaes.) (Assist.)	1672.5		Y
32730	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1690.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MESENTERIC VESSEL (single), bypass grafting to (Anaes.) (Assist.)	1267.65		Y
32733	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1963.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MESENTERIC VESSELS (multiple), bypass grafting to (Anaes.) (Assist.)	1472.85		Y
32736	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	430.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INFERIOR MESENTERIC ARTERY, operation on, when performed in conjunction with another intra-abdominal vascular operation (Anaes.) (Assist.)	322.75		Y
32739	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1345.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FEMORAL ARTERY BYPASS GRAFTING using vein, including harvesting of vein (when it is the ipsilateral long saphenous vein) with above knee anastomosis (Anaes.) (Assist.)	1009.35		Y
32742	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1541.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FEMORAL ARTERY BYPASS GRAFTING using vein, including harvesting of vein (when it is the ipsilateral long saphenous vein) with distal anastomosis to below knee popliteal artery (Anaes.) (Assist.)	1156.2		Y
32745	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1760.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FEMORAL ARTERY BYPASS GRAFTING using vein, including harvesting of vein (when it is the ipsilateral long saphenous vein) with distal anastomosis to tibio peroneal trunk or tibial or peroneal artery (Anaes.) (Assist.)	1320.4		Y
32748	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1909.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FEMORAL ARTERY BYPASS GRAFTING using vein, including harvesting of vein (when it is the ipsilateral long saphenous vein) with distal anastomosis within 5cms of the ankle joint (Anaes.) (Assist.)	1431.9		Y
32751	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1236.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FEMORAL ARTERY BYPASS GRAFTING using synthetic graft, with lower anastomosis above or below the knee (Anaes.) (Assist.)	927.3		Y

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32754	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1541.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FEMORAL ARTERY BYPASS GRAFTING, using a composite graft (synthetic material and vein) with lower anastomosis above or below the knee, including use of a cuff or sleeve of vein at 1 or both anastomoses (Anaes.) (Assist.)	1156.2		Y
32757	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	430.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FEMORAL ARTERY SEQUENTIAL BYPASS GRAFTING, (using a vein or synthetic material) where an additional anastomosis is made to separately revascularise more than 1 artery - each additional artery revascularised beyond a femoral bypass (Anaes.) (Assist.)	322.75		Y
32760	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	VEIN, HARVESTING OF, FROM LEG OR ARM for bypass or replacement graft when not performed on the limb which is the subject of the bypass or graft - each vein (Anaes.) (Assist.)	316.9		Y
32763	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1236.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIAL BYPASS GRAFTING, using vein or synthetic material, not being a service to which another item in this Sub-group applies (Anaes.) (Assist.)	927.3		Y
32766	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	821.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIAL OR VENOUS ANASTOMOSIS, not being a service to which another item in this Sub-group applies, as an independent procedure (Anaes.) (Assist.)	616.3		Y
32769	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIAL OR VENOUS ANASTOMOSIS not being a service to which another item in this Sub-group applies, when performed in combination with another vascular operation (including graft to graft anastomosis) (Anaes.) (Assist.)	213.6		Y
33050	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1514.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	BYPASS GRAFTING to replace a popliteal aneurysm using vein, including harvesting vein (when it is the ipsilateral long saphenous vein) (Anaes.) (Assist.)	1135.75		Y
33055	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1216.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	BYPASS GRAFTING to replace a popliteal aneurysm using a synthetic graft (Anaes.) (Assist.)	910.8		Y
33070	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	876.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	ANEURYSM IN THE EXTREMITIES, ligation, suture closure or excision of, without bypass grafting (Anaes.) (Assist.)	657.1	788.2	Y
33075	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1114.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	ANEURYSM IN THE NECK, ligation, suture closure or excision of, without bypass grafting (Anaes.) (Assist.)	835.85		Y
33080	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1360.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	INTRA-ABDOMINAL OR PELVIC ANEURYSM, ligation, suture closure or excision of, without bypass grafting (Anaes.) (Assist.)	1020.35		Y
33100	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1494.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANEURYSM OF COMMON OR INTERNAL CAROTID ARTERY, OR BOTH, replacement by graft of vein or synthetic material (Anaes.) (Assist.)	1120.95	1406.65	Y
33103	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2096.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	THORACIC ANEURYSM, replacement by graft (Anaes.) (Assist.)	1572.75		Y
33109	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	2535.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	THORACO-ABDOMINAL ANEURYSM, replacement by graft including re-implantation of arteries (Anaes.) (Assist.)	1901.45	2447.35	Y
33112	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2198.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUPRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by graft including re-implantation of arteries (Anaes.) (Assist.)	1649.05		Y
33115	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1478.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by tube graft, not being a service associated with a service to which item 33119 applies (Anaes.) (Assist.)	1109.25		Y
33116	1/11/1999	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1999	1/07/2021	1455.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by tube graft using endovascular repair procedure, excluding associated radiological services (Anaes.) (Assist.)	1091.8	1367.8	Y
33118	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1643.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by bifurcation graft to iliac arteries (with or without excision of associated iliac aneurysms) not being a service associated with a service to which item 33119 applies (Anaes.) (Assist.)	1232.45		Y
33119	1/11/1999	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1999	1/07/2021	1617.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by bifurcation graft to one or both iliac arteries using endovascular repair procedure, excluding associated radiological services (Anaes.) (Assist.)	1213.2	1529.65	Y
33121	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1807.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by bifurcation graft to 1 or both femoral arteries (with or without excision or bypass of common iliac aneurysms) (Anaes.) (Assist.)	1355.75		Y
33124	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1259.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANEURYSM OF ILIAC ARTERY (common, external or internal), replacement by graft - unilateral (Anaes.) (Assist.)	944.9		Y
33127	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1651.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANEURYSMS OF ILIAC ARTERIES (common, external or internal), replacement by graft - bilateral (Anaes.) (Assist.)	1238.35	1563.2	Y
33130	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1439.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANEURYSM OF VISCERAL ARTERY, excision and repair by direct anastomosis or replacement by graft (Anaes.) (Assist.)	1079.85		Y
33133	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1079.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANEURYSM OF VISCERAL ARTERY, dissection and ligation of arteries without restoration of continuity (Anaes.) (Assist.)	809.8		Y
33136	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2772.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FALSE ANEURYSM, repair of, at aortic anastomosis following previous aortic surgery (Anaes.) (Assist.)	2042.1		Y
33139	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1651.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FALSE ANEURYSM, repair of, in iliac artery and restoration of arterial continuity (Anaes.) (Assist.)	1238.35		Y
33142	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1541.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FALSE ANEURYSM, repair of, in femoral artery and restoration of arterial continuity (Anaes.) (Assist.)	1156.2	1453.65	Y
33145	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2652.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED THORACIC AORTIC ANEURYSM, replacement by graft (Anaes.) (Assist.)	1989.4		Y
33148	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3294.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED THORACO-ABDOMINAL AORTIC ANEURYSM, replacement by graft (Anaes.) (Assist.)	2470.6		Y
33151	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3129.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED SUPRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by graft (Anaes.) (Assist.)	2347.35		Y
33154	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2316.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by tube graft (Anaes.) (Assist.)	1737.05		Y
33157	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2582.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by bifurcation graft to iliac arteries (with or without excision or bypass of common iliac aneurysms) (Anaes.) (Assist.)	1936.55		Y
33160	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2582.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED INFRARENAL ABDOMINAL AORTIC ANEURYSM, replacement by bifurcation graft to 1 or both femoral arteries (Anaes.) (Assist.)	1936.55		Y
33163	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2197.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED ILIAC ARTERY ANEURYSM, replacement by graft (Anaes.) (Assist.)	1643.3		Y
33166	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	2197.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED ANEURYSM OF VISCERAL ARTERY, replacement by anastomosis or graft (Anaes.) (Assist.)	1643.3	2303.15	Y
33169	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1705.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RUPTURED ANEURYSM OF VISCERAL ARTERY, simple ligation of (Anaes.) (Assist.)	1279.35		Y
33172	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1330.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANEURYSM OF MAJOR ARTERY, replacement by graft, not being a service to which another item in this Sub-group applies (Anaes.) (Assist.)	997.65		Y
33175	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1225.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	RUPTURED ANEURYSM IN THE EXTREMITIES, ligation, suture closure or excision of, without bypass grafting (Anaes.) (Assist.)	919.4		Y
33178	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1218.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	RUPTURED ANEURYSM IN THE NECK, ligation, suture closure or excision of, without bypass grafting (Anaes.) (Assist.)	1169.2		Y
33181	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1905.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	RUPTURED INTRA-ABDOMINAL OR PELVIC ANEURYSM, ligation, suture closure or excision of, without bypass grafting (Anaes.) (Assist.)	1429.45		Y
33500	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1181.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERY OR ARTERIES OF NECK, endarterectomy of, including closure by suture (where endarterectomy of 1 or more arteries is undertaken through 1 arteriotomy incision) (Anaes.) (Assist.)	886.05		Y
33506	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1322.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INNOMINATE OR SUBCLAVIAN ARTERY, endarterectomy of, including closure by suture (Anaes.) (Assist.)	991.8		Y
33509	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1478.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AORTIC ENDARTERECTOMY, including closure by suture, not being a service associated with another procedure on the aorta (Anaes.) (Assist.)	1109.25		Y
33512	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1643.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AORTO-ILIAC ENDARTERECTOMY (1 or both iliac arteries), including closure by suture not being a service associated with a service to which item 33515 applies (Anaes.) (Assist.)	1232.45		Y
33515	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1807.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AORTO-FEMORAL ENDARTERECTOMY (1 or both femoral arteries) or BILATERAL ILIO-FEMORAL ENDARTERECTOMY, including closure by suture, not being a service associated with a service to which item 33512 applies (Anaes.) (Assist.)	1355.75		Y
33518	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1322.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ILIAC ENDARTERECTOMY, including closure by suture, not being a service associated with another procedure on the iliac artery (Anaes.) (Assist.)	991.8	1234.5	Y
33521	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1431.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ILIO-FEMORAL ENDARTERECTOMY (1 side), including closure by suture (Anaes.) (Assist.)	1073.85		Y
33524	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1690.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL ARTERY, endarterectomy of (Anaes.) (Assist.)	1267.65		Y
33527	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1963.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL ARTERIES (both), endarterectomy of (Anaes.) (Assist.)	1472.85		Y
33530	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1690.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COELIAC OR SUPERIOR MESENTERIC ARTERY, endarterectomy of (Anaes.) (Assist.)	1267.65		Y
33533	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1963.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COELIAC AND SUPERIOR MESENTERIC ARTERY, endarterectomy of (Anaes.) (Assist.)	1472.85		Y
33536	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1400.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFERIOR MESENTERIC ARTERY, endarterectomy of, not being a service associated with a service to which another item in this Sub-group applies (Anaes.) (Assist.)	1050.5		Y
33539	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1009.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERY OF EXTREMITIES, endarterectomy of, including closure by suture (Anaes.) (Assist.)	757.05		Y
33542	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1439.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTENDED DEEP FEMORAL ENDARTERECTOMY where the endarterectomy is at least 7cms long (Anaes.) (Assist.)	1079.85		Y
33545	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/1999	ARTERY, VEIN OR BYPASS GRAFT, patch grafting to by vein or synthetic material where patch is less than 3cm long (Anaes.) (Assist.)	213.6		Y
33548	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	579.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/1999	ARTERY, VEIN OR BYPASS GRAFT, patch grafting to by vein or synthetic material where patch is 3cm long or greater (Anaes.) (Assist.)	434.4		Y
33551	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VEIN, harvesting of from leg or arm for patch when not performed through same incision as operation (Anaes.) (Assist.)	213.6		Y
33554	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	283.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ENDARTERECTOMY, in conjunction with an arterial bypass operation to prepare the site for anastomosis - each site (Anaes.) (Assist.)	212.6		Y
33800	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1228.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EMBOLUS, removal of, from artery of neck (Anaes.) (Assist.)	921.35	1140.55	Y

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33803	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1173.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EMBOLECTOMY or THROMBECTOMY, by abdominal approach, of an artery or bypass graft of trunk (Anaes.) (Assist.)	880.35		Y
33806	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	845.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	Embolectomy or thrombectomy (including the infusion of thrombolytic or other agents) from an artery or bypass graft of extremities, or embolectomy of abdominal artery via the femoral artery, item to be claimed once per extremity, regardless of the number of incisions required to access the artery or bypass graft (Anaes.) (Assist.)	633.85	757.2	Y
33810	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	N	1/07/1996	1/07/2021	616.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	INFERIOR VENA CAVA OR ILIAC VEIN, closed thrombectomy by catheter via the femoral vein (Anaes.) (Assist.)	462.4	528.6	Y
33811	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1835.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	INFERIOR VENA CAVA OR ILIAC VEIN, open removal of thrombus or tumour (Anaes.) (Assist.)	1376.45		Y
33812	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	970.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	THROMBUS, removal of, from femoral or other similar large vein (Anaes.) (Assist.)	727.65	882.3	Y
33815	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	892	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF EXTREMITY, repair of wound of, with restoration of continuity, by lateral suture (Anaes.) (Assist.)	669		Y
33818	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1040.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF EXTREMITY, repair of wound of, with restoration of continuity, by direct anastomosis (Anaes.) (Assist.)	780.55		Y
33821	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1189.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF EXTREMITY, repair of wound of, with restoration of continuity, by interposition graft of synthetic material or vein (Anaes.) (Assist.)	892		Y
33824	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF NECK, repair of wound of, with restoration of continuity, by lateral suture (Anaes.) (Assist.)	850.9		Y
33827	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1330.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF NECK, repair of wound of, with restoration of continuity, by direct anastomosis (Anaes.) (Assist.)	997.65		Y
33830	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1525.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF NECK, repair of wound of, with restoration of continuity, by interposition graft of synthetic material or vein (Anaes.) (Assist.)	1144.3		Y
33833	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1385.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF ABDOMEN, repair of wound of, with restoration of continuity by lateral suture (Anaes.) (Assist.)	1038.85		Y
33836	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1651.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF ABDOMEN, repair of wound of, with restoration of continuity by direct anastomosis (Anaes.) (Assist.)	1238.35		Y
33839	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1932.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OR VEIN OF ABDOMEN, repair of wound of, with restoration of continuity by means of interposition graft (Anaes.) (Assist.)	1449.5		Y
33842	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	954.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERY OF NECK, re-operation for bleeding or thrombosis after carotid or vertebral artery surgery (Anaes.) (Assist.)	715.95		Y
33845	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	665.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LAPAROTOMY for control of post operative bleeding or thrombosis after intra-abdominal vascular procedure, where no other procedure is performed (Anaes.) (Assist.)	498.9		Y
33848	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	665.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTREMITY, re-operation on, for control of bleeding or thrombosis after vascular procedure, where no other procedure is performed (Anaes.) (Assist.)	498.9		Y
34100	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	735.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAJOR ARTERY OF NECK, exploration, ligation or exploration of, not being a service associated with any other vascular procedure (Anaes.) (Assist.)	551.7		Y
34103	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	430.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2018	Great artery (ascending, descending, thoracic or abdominal artery) or great vein (superior or inferior vena cava), ligation or exploration of immediate branches or tributaries, or ligation or exploration of the subclavian, axillary, iliac, femoral or popliteal arteries or veins, if the service is not associated with item 32508, 32511, 32520, 32527, 32528, 32526, 32528 or 32529 - for a maximum of 2 services provided to the same patient at the same occasion (H) (Anaes.) (Assist.)	322.75		Y
34106	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	C	1/12/1991	1/07/2021	303.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	ARTERY OR VEIN (including brachial, radial, ulnar or tibial), ligation of, by elective operation, or exploration of, not being a service associated with any other vascular procedure except those services to which items 32508, 32511, 32514 or 32527 apply (Anaes.) (Assist.)	227.65	258	Y
34109	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	352.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPORAL ARTERY, biopsy of (Anaes.) (Assist.)	264.05	299.25	Y
34112	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	892	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIO-VENOUS FISTULA OF AN EXTREMITY, dissection and ligation (Anaes.) (Assist.)	669		Y
34115	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1009.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIO-VENOUS FISTULA OF THE NECK, dissection and ligation (Anaes.) (Assist.)	757.05		Y
34118	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1439.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIO-VENOUS FISTULA OF THE ABDOMEN, dissection and ligation (Anaes.) (Assist.)	1079.85	1351.85	Y
34121	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1150.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIO-VENOUS FISTULA OF AN EXTREMITY, dissection and repair of, with restoration of continuity (Anaes.) (Assist.)	862.65		Y
34124	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1259.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIO-VENOUS FISTULA OF THE NECK, dissection and repair of, with restoration of continuity (Anaes.) (Assist.)	944.9		Y
34127	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1651.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIO-VENOUS FISTULA OF THE ABDOMEN, dissection and repair of, with restoration of continuity (Anaes.) (Assist.)	1238.35		Y
34130	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	516.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SURGICALLY CREATED ARTERIO-VENOUS FISTULA OF AN EXTREMITY, closure of (Anaes.) (Assist.)	387.3	438.95	Y
34133	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	579.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SCALENOTOMY (Anaes.) (Assist.)	434.4		Y
34136	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	931	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FIRST RIB, resection of portion of (Anaes.) (Assist.)	698.25		Y
34139	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	931	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CERVICAL RIB, removal of, or other operation for removal of thoracic outlet compression, not being a service to which another item in this Sub-group applies (Anaes.) (Assist.)	698.25		Y
34142	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1150.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COELIAC ARTERY, decompression of, for coeliac artery compression syndrome, as an independent procedure (Anaes.) (Assist.)	862.65		Y
34145	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	837.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	POPLITEAL ARTERY, exploration of, for popliteal entrapment, with or without division of fibrous tissue and muscle (Anaes.) (Assist.)	627.9		Y
34148	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1494.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	CAROTID ASSOCIATED TUMOUR, resection of, with or without repair or reconstruction of internal or common carotid arteries, when tumour is 4cm or less in maximum diameter (Anaes.) (Assist.)	1120.95		Y
34151	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2075.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	CAROTID ASSOCIATED TUMOUR, resection of, with or without repair or reconstruction of internal or common carotid arteries, when tumour is greater than 4cm in maximum diameter (Anaes.) (Assist.)	1556.65		Y
34154	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	2433.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	RECURRENT CAROTID ASSOCIATED TUMOUR, resection of, with or without repair or replacement of portion of internal or common carotid arteries (Anaes.) (Assist.)	1825.15	2346.6	Y
34157	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1236.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NECK, excision of infected bypass graft, including closure of vessel or vessels (Anaes.) (Assist.)	927.3		Y
34160	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2356.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AORTO-DUODENAL FISTULA, repair of, by suture of aorta and repair of duodenum (Anaes.) (Assist.)	1767.05		Y
34163	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2973.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AORTO-DUODENAL FISTULA, repair of, by insertion of aortic graft and repair of duodenum (Anaes.) (Assist.)	2230		Y
34166	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2973.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AORTO-DUODENAL FISTULA, repair of, by oversewing of abdominal aorta, repair of duodenum and ilio-bifemoral grafting (Anaes.) (Assist.)	2230		Y
34169	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1651.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFECTED BYPASS GRAFT FROM TRUNK, excision of, including closure of arteries (Anaes.) (Assist.)	1238.35		Y
34172	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1345.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFECTED AXILLO-FEMORAL OR FEMORO-FEMORAL GRAFT, excision of, including closure of arteries (Anaes.) (Assist.)	1009.35		Y
34175	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1236.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFECTED BYPASS GRAFT FROM EXTREMITIES, excision of including closure of arteries (Anaes.) (Assist.)	927.3		Y
34500	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	320.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS SHUNT, EXTERNAL, insertion of (Anaes.) (Assist.)	240.7	272.8	Y
34503	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	430.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS ANASTOMOSIS OF UPPER OR LOWER LIMB, in conjunction with another venous or arterial operation (Anaes.) (Assist.)	322.75		Y
34506	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	218.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS SHUNT, EXTERNAL, removal of (Anaes.) (Assist.)	164.25		Y
34509	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1017.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS ANASTOMOSIS OF UPPER OR LOWER LIMB, not in conjunctionwith another venous or arterial operation (Anaes.) (Assist.)	762.9		Y
34512	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1119	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS ACCESS DEVICE, insertion of (Anaes.) (Assist.)	839.25		Y
34515	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	798.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS ACCESS DEVICE, thrombectomy of (Anaes.) (Assist.)	598.55		Y
34518	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1337.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	STENOSIS OF ARTERIOVENOUS FISTULA OR PROSTHETIC ARTERIOVENOUS ACCESS DEVICE, correction of (Anaes.) (Assist.)	1003.4		Y
34521	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	822	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INTRA-ABDOMINAL ARTERY OR VEIN, cannulation of, for infusion chemotherapy, by open operation (excluding aftercare) (Anaes.) (Assist.)	616.5		Y
34524	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	430.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIAL CANNULATION for infusion chemotherapy by open operation, not being a service to which item 34521 applies (excluding after-care) (Anaes.) (Assist.)	322.75		Y
34527	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	573.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VEIN CATHETERISATION by open technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, including any associated percutaneous central vein catheterisation, on apatient 10 years of age or over (Anaes.)	430.5	487.9	Y
34528	1/07/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1996	1/07/2021	283.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VEIN CATHETERISATION by percutaneous technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, on a patient 10 years of age or over (Anaes.)	212.6	240.95	Y
34529	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/08/2015	1/07/2021	746.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VEIN CATHETERISATION by open technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, including any associated percutaneous central vein catheterisation, on apatient under 10 years of age (Anaes.)	559.65	658.25	Y
34530	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	212.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VENOUS LINE, OR OTHER CHEMOTHERAPY DEVICE, removal of, by open surgical procedure in the operating theatre of a hospital on apatient 10 years of age or over (Anaes.)	159.4	180.65	Y
34533	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1260.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ISOLATED LIMB PERFUSION, including cannulation of artery and vein at commencement of procedure, regional perfusion for chemotherapy, or other therapy, repair of arteriotomy and venotomy at conclusion of procedure (excluding aftercare) (Anaes.) (Assist.)	948.2	1203	Y

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34534	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	368.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VEIN CATHETERISATION by percutaneous technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, on a patient under 10 years of age (Anaes.)	276.35	313.2	Y
34538	1/05/2004	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2004	1/07/2021	283.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2004	CENTRAL VEIN CATHETERISATION by percutaneous technique, using subcutaneous tunnelled cuffed catheter or similar device, for the administration of haemodialysis or parenteral nutrition (Anaes.)	212.6	240.95	Y
34539	1/05/2004	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2004	1/07/2021	212.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2016	TUNNELLED CUFFED CATHETER, OR SIMILAR DEVICE, removal of, by open surgical procedure (Anaes.)	159.4	180.65	Y
34540	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	276.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	CENTRAL VENOUS LINE, OR OTHER CHEMOTHERAPY DEVICE, removal of, by open surgical procedure in the operating theatre of a hospital, on a patient under 10 years of age (Anaes.)	207.2	234.85	Y
34800	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	845.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFERIOR VENA CAVA, plication, ligation, or application of caval clip (Anaes.) (Assist.)	623.85	757.2	Y
34803	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1862.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INFERIOR VENA CAVA, reconstruction of or bypass by vein or synthetic material (Anaes.) (Assist.)	1396.8		Y
34806	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1009.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CROSS LEG BYPASS GRAFTING, saphenous to iliac or femoral vein (Anaes.) (Assist.)	757.05		Y
34809	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1009.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SAPHENOUS VEIN ANASTOMOSIS to femoral or popliteal vein for femoral vein bypass (Anaes.) (Assist.)	757.05		Y
34812	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1220.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VENOUS STENOSIS OR OCCLUSION, vein bypass for, using vein or synthetic material, not being a service associated with a service to which item 34806 or 34809 applies (Anaes.) (Assist.)	915.45		Y
34815	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1009.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VEIN STENOSIS, patch angioplasty for, (excluding vein graft stenosis) using vein or synthetic material (Anaes.) (Assist.)	757.05		Y
34818	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1111.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VENOUS VALVE, plication or repair to restore valve competency (Anaes.) (Assist.)	833.2		Y
34821	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1510.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VEIN TRANSPLANT to restore valvular function (Anaes.) (Assist.)	1132.65	1422.3	Y
34824	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	516.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTERNAL STENT, application of, to restore venous valve competency to superficial vein - 1 stent (Anaes.) (Assist.)	387.3		Y
34827	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	626.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTERNAL STENTS, application of, to restore venous valve competency to superficial vein or veins - more than 1 stent (Anaes.) (Assist.)	469.55		Y
34830	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	735.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTERNAL STENT , application of, to restore venous valve competency to deep vein (1 stent) (Anaes.) (Assist.)	551.7	647.7	Y
34833	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	954.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTERNAL STENTS, application of, to restore venous valve competency to deep vein or veins (more than 1 stent) (Anaes.) (Assist.)	715.95		Y
35000	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	735.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LUMBAR SYMPATHECTOMY (Anaes.) (Assist.)	551.7	647.7	Y
35003	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	954.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CERVICAL OR UPPER THORACIC SYMPATHECTOMY by any surgical approach (Anaes.) (Assist.)	715.95		Y
35006	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1197.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CERVICAL OR UPPER THORACIC SYMPATHECTOMY, where operation is a reoperation for previous incomplete sympathectomy by any surgical approach (Anaes.) (Assist.)	897.9		Y
35009	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	931	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LUMBAR SYMPATHECTOMY, where operation is following chemical sympathectomy or for previous incomplete surgical sympathectomy (Anaes.) (Assist.)	698.25		Y
35012	1/05/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	735.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	SACRAL PRE-SACRAL SYMPATHECTOMY (Anaes.) (Assist.)	551.7		Y
35100	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	383.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ISCHAEMIC LIMB, debridement of necrotic material, gangrenous tissue, or slough in, in the operating theatre of a hospital, when debridement includes muscle, tendon or bone (Anaes.) (Assist.)	287.6		Y
35103	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	244.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ISCHAEMIC LIMB, debridement of necrotic material, gangrenous tissue, or slough in, in the operating theatre of a hospital, superficial tissue only (Anaes.)	183.05		Y
35200	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	178.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OPERATIVE ARTERIOGRAPHY OR VENOGRAPHY, 1 or more of, performed during the course of an operative procedure on an artery or vein, 1 site (Anaes.)	133.85		Y
35202	1/07/1996	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	850.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	MAJOR ARTERIES OR VEINS IN THE NECK, ABDOMEN OR EXTREMITIES, access to, as part of RE-OPERATION after prior surgery on these vessels (Anaes.) (Assist.)	637.65		Y
35300	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	536.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	TRANSLUMINAL BALLOON ANGIOPLASTY of 1 peripheral artery or vein of 1 limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	402.2	455.85	Y
35303	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	687.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	TRANSLUMINAL BALLOON ANGIOPLASTY of aortic arch branches, aortic visceral branches, or more than 1 peripheral artery or vein of 1 limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	515.7	599.65	Y
35306	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	634.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2016	TRANSLUMINAL STENT INSERTION, 1 or more stents, including associated balloon dilatation for 1 peripheral artery or vein of 1 limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare. (Anaes.) (Assist.)	475.95	546.7	Y
35307	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1166.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	TRANSLUMINAL STENT INSERTION, 1 or more stents (not drug-eluting), with or without associated balloon dilatation, for 1 carotid artery, percutaneous (not direct), with or without the use of an embolic protection device, in patients who: - meet the indications for carotid endarterectomy; and - have medical or surgical comorbidities that would make them at high risk of perioperative complications from carotid endarterectomy, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	874.95		Y
35309	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	793.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2016	TRANSLUMINAL STENT INSERTION, 1 or more stents, including associated balloon dilatation for visceral arteries or veins, or more than 1 peripheral artery or vein of 1 limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare. (Anaes.) (Assist.)	594.95	705.35	Y
35312	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	899	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	PERIPHERAL ARTERIAL ATHERECTOMY including associated balloon dilatation of 1 limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	674.25		Y
35315	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	899	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	PERIPHERAL LASER ANGIOPLASTY including associated balloon dilatation of 1 limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	674.25		Y
35317	1/07/1996	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	370.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	PERIPHERAL ARTERIAL OR VENOUS CATHETERISATION with administration of thrombolytic or chemotherapeutic agents, BY CONTINUOUS INFUSION, using percutaneous approach, excluding associated radiological services or preparation, and excluding aftercare (not being a service associated with a service to which another item in Subgroup 11 of Group T1 or items 35219 or 35220 applies and not being a service associated with photodynamic therapy with vertoporfin) (Anaes.) (Assist.)	277.65	314.7	Y
35319	1/07/1996	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	563.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	PERIPHERAL ARTERIAL OR VENOUS CATHETERISATION with administration of thrombolytic or chemotherapeutic agents, BY PULSE SPRAY TECHNIQUE, using percutaneous approach, excluding associated radiological services or preparation, and excluding aftercare (not being a service associated with a service to which another item in Subgroup 11 of Group T1 or items 35217 or 35220 applies and not being a service associated with photodynamic therapy with vertoporfin) (Anaes.) (Assist.)	497.7	575.7	Y
35320	1/07/1996	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	891.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	PERIPHERAL ARTERIAL OR VENOUS CATHETERISATION with administration of thrombolytic or chemotherapeutic agents, BY OPEN EXPOSURE, excluding associated radiological services or preparation, and excluding aftercare (not being a service associated with a service to which another item in Subgroup 11 of Group T1 or items 35217 or 35219 applies and not being a service associated with photodynamic therapy with vertoporfin) (Anaes.) (Assist.)	668.55	803.5	Y
35321	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	846.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	PERIPHERAL ARTERIAL OR VENOUS CATHETERISATION to administer agents to occlude arteries, veins or arterio-venous fistulae or to arrest haemorrhage, (but not for the treatment of uterine fibroids or varicose veins) percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare, not being a service associated with photodynamic therapy with vertoporfin (Anaes.) (Assist.)	634.7	758.35	Y
35324	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	317.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	ANGIOSCOPY not combined with any other procedure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	238.05		Y
35327	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	425.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	ANGIOSCOPY combined with any other procedure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	319		Y
35330	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	536.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	INSERTION, of INFERIOR VENA CAVAL FILTER, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	402.2	455.85	Y
35331	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	616.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	RETRIEVAL OF INFERIOR VENA CAVAL FILTER, percutaneous or by open exposure, not including associated radiological services or preparation, and not including aftercare (Anaes.)	462.4		Y
35360	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	861.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Retrieval of foreign body in PULMONARY ARTERY, percutaneous or by open exposure, not including associated radiological services or preparation, and not including aftercare (foreign body does not include an instrument inserted for the purpose of a service being rendered) (Anaes.) (Assist.)	646.35		Y
35361	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	739.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Retrieval of foreign body in RIGHT ATRIUM, percutaneous or by open exposure, not including associated radiological services or preparation, and not including aftercare (foreign body does not include an instrument inserted for the purpose of a service being rendered) (Anaes.) (Assist.)	554.3		Y
35362	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	616.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Retrieval of foreign body in INFERIOR VENA CAVA or AORTA, percutaneous or by open exposure, not including associated radiological services or preparation, and not including aftercare (foreign body does not include an instrument inserted for the purpose of a service being rendered) (Anaes.) (Assist.)	462.4		Y
35363	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	493.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Retrieval of foreign body in PERIPHERAL VEIN or PERIPHERAL ARTERY, percutaneous or by open exposure, not including associated radiological services or preparation, and not including aftercare (foreign body does not include an instrument inserted for the purpose of a service being rendered) (Anaes.) (Assist.)	370.45		Y
35401	1/11/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2021	1/11/2021	710.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Vertebroplasty, for one or more fractures in one or more vertebrae, performed by an interventional radiologist, for the treatment of a painful osteoporotic thoracolumbar vertebral compression fracture of the thoracolumbar spinal segment (T11, T12, L1 or L2), if: (a) pain is severe (numeric rated pain score greater than or equal to 7 out of 10); and (b) symptoms are poorly controlled by opiate therapy; and (c) severe pain duration is 3 weeks or less; and (d) there is MRI (or SPECT-CT if MRI unavailable) evidence of acute vertebral fracture Applicable only once for the same fracture, but is applicable for a new fracture of the same vertebra or vertebrae (4) (Anaes.)	532.9		Y

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35404	1/05/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2006	1/07/2021	360.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	DOSIMETRY, HANDLING AND INJECTION OF SIR-SPHERES for selective internal radiation therapy of hepatic metastases which are secondary to colorectal cancer and are not suitable for resection or ablation, used in combination with systemic chemotherapy using 5-fluorouracil (5FU) and leucovorin, not being a service to which item 35317, 35319, 35320 or 35321 applies The procedure must be performed by a specialist or consultant physician recognised in the specialties of nuclear medicine or radiation oncology on an admitted patient in a hospital. To be claimed once in the patient's lifetime only.	270.5	
35406	1/05/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2006	1/07/2021	846.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	Trans-femoral catheterisation of the hepatic artery to administer SIR-Spheres to embolise the microvasculature of hepatic metastases which are secondary to colorectal cancer and are not suitable for resection or ablation, for selective internal radiation therapy used in combination with systemic chemotherapy using 5-fluorouracil (5FU) and leucovorin, not being a service to which item 35317, 35319, 35320 or 35321 applies excluding associated radiological services or preparation, and excluding aftercare (Anaes.)(Assist.)	634.7	Y
35408	1/05/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2006	1/07/2021	634.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	Catheterisation of the hepatic artery via a permanently implanted hepatic artery port to administer SIR-Spheres to embolise the microvasculature of hepatic metastases which are secondary to colorectal cancer and are not suitable for resection or ablation, for selective internal radiation therapy used in combination with systemic chemotherapy using 5-fluorouracil (5FU) and leucovorin, not being a service to which item 35317, 35319, 35320 or 35321 applies excluding associated radiological services or preparation, and excluding aftercare (Anaes.)(Assist.)	476.1	Y
35410	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	846.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	UTERINE ARTERY CATHETERISATION with percutaneous administration of occlusive agents, for the treatment of symptomatic uterine fibroids in a patient who has been referred for uterine artery embolisation by a specialist gynaecologist, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.)	634.7	758.35 Y
35412	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	2973.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	Intracranial aneurysm, ruptured or unruptured, endovascular occlusion with detachable coils, and assisted coiling if performed, with parent artery preservation, not for use with liquid embolics coils, including aftercare, including intra-operative imaging, but in association with the following pre-operative diagnostic imaging items: - either 60009 or 60010; and - either 60072, 60073, 60075, 60076, 60078 or 60079 (Anaes.)(Assist.)	2230	2885.4 Y
35414	1/11/2017	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	3641.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Mechanical thrombectomy, in a patient with a diagnosis of acute ischemic stroke caused by occlusion of a large vessel of the anterior cerebral circulation, including intra-operative imaging and aftercare, if: (a) the diagnosis is confirmed by an appropriate imaging modality such as computed tomography, magnetic resonance imaging or angiography; and (b) the service is performed by a specialist or consultant physician with appropriate training that is recognised by the Conjoint Committee for Recognition of Training in Interventional Neuroradiology; and (c) the service is provided in an eligible stroke centre. For any particular patient - applicable once per presentation by the patient at an eligible stroke centre, regardless of the number of times mechanical thrombectomy is attempted during that presentation (Anaes.)(Assist.)	2731.4	Y
35500	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	84.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GYNAECOLOGICAL EXAMINATION UNDER ANAESTHESIA, not being a service associated with a service to which another item in this Group applies (Anaes.)	63.45	71.95 Y
35503	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/03/2022	83.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Introduction of an intra-uterine device for abnormal uterine bleeding or contraception or for endometrial protection during oestrogen replacement therapy, if the service is not associated with a service to which another item in this Group applies (other than a service described in item 30062, 35506 or 35623) (Anaes.)	62.55	70.9 Y
35506	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	55.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Intra-uterine device, removal of under general anaesthesia, for a retained or embedded device, not being a service associated with a service to which another item in this Group applies (other than a service described in item 35503) (Anaes.)	41.9	47.5 Y
35507	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	181.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	VULVAL OR VAGINAL WARTS, removal of under general anaesthesia, or under regional or field nerve block (excluding pudendal block) requiring admission to a hospital, where the time taken is less than or equal to 45 minutes - not being a service associated with a service to which item 32177 or 32180 applies (Anaes.)	136.15	154.3 Y
35508	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	VULVAL OR VAGINAL WARTS, removal of under general anaesthesia, or under regional or field nerve block (excluding pudendal block) requiring admission to a hospital, where the time taken is greater than 45 minutes - not being a service associated with a service to which item 32177 or 32180 applies (Anaes.)(Assist.)	200.55	227.25 Y
35509	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	63.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HYMENECTOMY (Anaes.)	69.85	79.15 Y
35513	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	230.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Bartholin's abscess, cyst or gland, excision of (Anaes.)	173.05	196.1 Y
35517	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	151.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Bartholin's abscess, cyst or gland, manupulaiation of (Anaes.)	114	129.2 Y
35518	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	216.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Ovarian cyst aspiration, for cysts of at least 4 cm in diameter in a premenopausal patient and at least 2 cm in diameter in a postmenopausal patient, by abdominal or vaginal route, using interventional imaging techniques and not associated with services provided for assisted reproductive techniques, and not in cases of suspected or possible malignancy (Anaes.)	162.25	183.9 Y
35527	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	151.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Urethral caruncle, symptomatic excision of, if (a) conservative management has failed; or(b) there is a suspicion of malignancy (Anaes.)	114	129.2 Y
35533	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2014	1/07/2021	364.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Vulvoplasty or labioplasty, for repair of: (a) female genital mutilation; or (b) an anomaly associated with a major congenital anomaly of the uro-gynaecological tract other than a service associated with a service to which item35536, 37836, 37050, 37842, 37851 or 43882 applies (Anaes.)	273.05	Y
35534	1/11/2014	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2014	1/07/2021	364.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Vulvoplasty or labioplasty, in a patient aged 18 years or more, performed by a specialist in the practice of the specialist's specialty, for a structural abnormality that is causing significant functional impairment, if the patient's labium extends more than 8 cm below the vaginal introitus while the patient is in a standing-resting position (Anaes.)	273.05	Y
35536	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	362.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Vulva, wide local excision or hemivulvectomy, one or both procedures, for suspected malignancy or vulval lesions with a high risk of malignancy (Anaes.)(Assist.)	271.95	308.25 Y
35539	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Colposcopically directed laser therapy for histologically-confirmed high grade intraepithelial neoplastic changes of the vagina, vulva, urethra or anal canal, including any associated biopsies—one anatomical site (Anaes.)	213	241.4 Y
35545	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	191.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Colposcopically directed laser therapy for condylomata, unsuccessfully treated by other methods (Anaes.)	143.3	162.4 Y
35548	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1308.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	VULVECTOMY, radical, for malignancy (H) (Anaes.)(Assist.)	976.35	Y
35551	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	952.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Pelvic lymph nodes, radical excision of,unilateral, or sentinel node dissection (including any pre-operative injection) (Anaes.) (Assist.)	721.65	Y
35552	1/11/2020	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	1447.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Pelvic lymph nodes, radical excision of, unilateral or sentinel node dissection, following similar previous dissection, radiation or chemotherapy (H) (Anaes.) (Assist.)	1085.65	Y
35554	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	45.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VAGINA, DILATATION OF, as an independent procedure including any associated consultation (Anaes.)	33.95	38.5 Y
35557	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	223.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Vagina, complete excision of benign tumour (including Gartner duct cyst), with histological documentation (Anaes.)	167.4	189.75 Y
35560	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	711.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Partial or complete vaginectomy, for either or both of the following:(a) deeply infiltrating vaginal endometriosis, if accompanied by histological confirmation from excised tissue;(b) pre-invasive or invasive lesions Not being a service associated with hysterectomy for non invasive indications (H) (Anaes.)(Assist.)	533.7	Y
35561	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1599.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	VAGINECTOMY, radical, for proven invasive malignancy - 1 surgeon (H) (Anaes.)(Assist.)	1197.95	Y
35562	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1345.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	VAGINECTOMY, radical, for proven invasive malignancy, conjoint surgery - abdominal surgeon (including aftercare) (H) (Anaes.) (Assist.)	1009.2	Y
35564	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	672.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	VAGINECTOMY, radical, for proven invasive malignancy, conjoint surgery - perineal surgeon (H) (Assist.)	504.6	
35565	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	711.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	VAGINAL RECONSTRUCTION for congenital absence, gynatresia or urogenital sinus (Anaes.) (Assist.)	533.7	Y
35566	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	413.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VAGINAL SEPTUM, excision of, for correction of double vagina (Anaes.) (Assist.)	310.05	Y
35568	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	649.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Procedures for the management of symptomatic upper vaginal (vault or cervical) prolapse by sacrospinous or ilioscoccygeus fixation (H) (Anaes.) (Assist.)	487.45	Y
35569	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2019	1/07/2021	167.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PLASTIC REPAIR TO ENLARGE VAGINAL ORIFICE (Anaes.)	125.55	Y
35570	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	576.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Anterior vaginal compartment repair by vaginal approach for pelvic organ prolapse: (a) involving repair of urethrocele and cystocele; and (b) using native tissue without graft; other than a service associated with a service to which item 35573, 35577 or 35578 applies (Anaes.) (Assist.)	432.25	Y
35571	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	576.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Posterior vaginal compartment repair by vaginal approach for pelvic organ prolapse: (a) involving repair of one or more of the following: (i) perineum; (ii) rectocele; (iii) enterocele; and (b) using native tissue without graft; other than a service associated with a service to which item 35573, 35577 or 35578 applies (Anaes.) (Assist.)	432.25	Y
35573	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	864.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Anterior and posterior vaginal compartment repair by vaginal approach for pelvic organ prolapse: (a) involving anterior and posterior compartment defects; and (b) using native tissue without graft; other than a service associated with a service to which item 35577 or 35578 applies (Anaes.) (Assist.)	648.45	Y
35577	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	701.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Manchester (Donald Fothergill) operation for pelvic organ prolapse, involving either or both of the following: (a) cervical amputation; (b) anterior and posterior native tissue vaginal wall repairs without graft (Anaes.) (Assist.)	526.4	Y
35578	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	701.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Colpocleisis for pelvic organ prolapse, not being a service associated with a service to which another item (other than item 35599) in this Subgroup applies (H) (Anaes.) (Assist.)	526.4	Y
35581	1/07/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2018	1/07/2021	576.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Vaginal procedure for excision of graft material in symptomatic patients with graft related complications (including graft related pain or discharge and bleeding related to graft exposure), less than 2cm2 in its maximum area, either singly or in multiple pieces, other than a service associated with a service to which item 35582 or 35585 applies (Anaes.) (Assist.)	432.25	Y
35582	1/07/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2018	1/07/2021	864.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Vaginal procedure for excision of graft material in symptomatic patients with graft related complications (including graft related pain or discharge and bleeding related to graft exposure),2cm2 or more in its maximum area, either singly or in multiple pieces, other than a service associated with a service to which item 35581 or 35585 applies (Anaes.) (Assist.)	648.45	Y

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35585	1/07/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2018	1/07/2021	1532.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Abdominal procedure, by open, laparoscopic or robot-assisted approach, if the service: (a) is for the removal of graft material: (i) in symptomatic patients with graft related complications (including graft related pain or discharge and bleeding related to graft exposure); or (ii) where the graft has penetrated adjacent organs such as the bladder (including urethra) or bowel; and (b) if required—includes retroperitoneal dissection, and mobilisation, of either or both of the bladder and bowel, other than a service associated with a service to which item 35581 or 35582 applies (Anaes.) (Assist.)	1149.65	Y
35591	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Rectovaginal fistula repair of, by vaginal route approach, not being a service associated with a service to which item 35592, 35596, 37029, 37033 or 37336 applies (H) (Anaes.) (Assist.)	721.65	Y
35592	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Vesicovaginal fistula closure of, by vaginal approach, not being a service associated with a service to which item 35591, 35596, 37029, 37033 or 37336 applies (H) (Anaes.) (Assist.)	721.65	Y
35595	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/03/2022	649.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Procedure for the management of symptomatic vaginal vault or cervical prolapse, by uterosacral ligament suspension, by any approach, without graft, if the uterosacral ligaments are separately identified, transfixed and then incorporated into rectovaginal and pubocervical fascia of the vaginal vault, including cystoscopy to check ureteric integrity (H) (Anaes.) (Assist.)	487.45	Y
35596	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Fistula between genital and urinary or alimentary tracts, repair of, other than a service to which item 35591, 35592, 37029, 37033 or 37336 applies (H) (Anaes.) (Assist.)	721.65	Y
35597	1/05/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	1532.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Sacral colpopexy, by any approach where graft or mesh is secured to vault, anterior and posterior compartments and to sacrum for correction of symptomatic upper vaginal vault prolapse (H) (Anaes.) (Assist.)	1149.65	Y
35599	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	788.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	13/08/2021	Stress incontinence, procedure using a female synthetic mid-urethral sling, with diagnostic cystoscopy to assess the integrity of the lower urinary tract, other than a service associated with a service to which item 36812 applies (H) (Anaes.) (Assist.)	591.45	Y
35608	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	66.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, one or more biopsies, cauterisation (other than by chemical means), ionisation, diathermy or endocervical curettage of, with or without dilatation of cervix (Anaes.)	49.95	56.6 Y
35609	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2022	1/03/2022	226.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, cone biopsy or amputation (Anaes.)	170.1	192.8 Y
35610	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2022	1/03/2022	396.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, cone biopsy for histologically proven malignancy (Anaes.)	297.75	337.45 Y
35611	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	66.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Removal of cervical or vaginal polyp or polyp, with or without dilatation of cervix, not being a service associated with a service to which item 35608 applies (Anaes.)	49.95	56.6 Y
35612	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	526.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, residual stump, removal of, by abdominal approach for non-malignant lesions (Anaes.) (Assist.)	394.9	447.55 Y
35614	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	66.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Examination of the lower genital tract using a colposcope in a patient who (a) has a human papilloma virus related gynaecology indication; or(b) has symptoms or signs suspicious of lower genital tract malignancy; or(c) is undergoing follow-up treatment of lower genital tract malignancy; or(d) is undergoing assessment or surveillance of a histological pre-malignant or malignant disease; or(e) is undergoing assessment or surveillance as part of an identified at risk population	49.85	56.5
35615	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/03/2022	73.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Vulva or vagina, biopsy of, when performed in conjunction with a service to which item 35614 applies	54.95	62.3
35616	1/05/2001	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	467.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Endometrial ablation by thermal balloon or radiofrequency electrosurgery, for abnormal uterine bleeding, with or without endometrial sampling, including any hysteroscopy performed on the same day (H) (Anaes.)	350.85	Y
35620	1/05/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	55.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Endometrial biopsy for pathological assessment in women with abnormal uterine bleeding or post-menopausal bleeding (Anaes.)	41.65	47.2 Y
35622	1/05/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	626.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Endometrial ablation, using hysteroscopically guided electrosurgery or laser energy for abnormal uterine bleeding, with or without endometrial sampling, not being a service associated with a service to which item 30390 applies (H) (Anaes.)	470.2	Y
35623	1/05/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	852.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Endometrial ablation and resection of myoma or uterine septum (or both), using hysteroscopic guided electrosurgery or laser energy, for abnormal uterine bleeding, with or without endometrial sampling (H) (Anaes.)	639.35	Y
35626	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/03/2022	233.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysteroscopy for investigation of suspected intrauterine pathology, with or without local anaesthesia, including any associated endometrial biopsy, not being a service associated with a service to which item 35620 applies	174.85	198.15
35630	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	190.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysteroscopy for investigation of suspected intrauterine pathology if performed under general anaesthesia, including any associated endometrial biopsy, not being a service associated with a service to which item 35626 applies (H) (Anaes.)	142.85	Y
35631	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	740.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Operative laparoscopy, including any of the following:(a) unilateral or bilateral ovarian cystectomy;(b) salpingo-oophorectomy;(c) salpingectomy for tubal pathology (including ectopic pregnancy by tubal removal or salpingostomy, but excluding sterilisation);(d) excision of stage II (mild) endometriosis;not being a service associated with a service to which any other intraperitoneal or retroperitoneal procedure item (other than item 30724 or 30725) applies (H) (Anaes.) (Assist.)	555.3	Y
35632	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	925.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Complicated operative laparoscopy, including either or both of the following:(a) excision of stage III endometriosis;(b) laparoscopic myomectomy for a myoma of at least 4cm, including incision and repair of the uterus;not being a service associated with a service to which any other intraperitoneal or retroperitoneal procedure item (other than item 30724 or 30725 or 35638) applies (H) (Anaes.) (Assist.)	694.05	Y
35633	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	226.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysteroscopy, under visual guidance, including any of the following:(a) removal of an intra-uterine device;(b) removal of polyps by any method;(c) division of minor adhesions (ESH Grade 1) (Anaes.)	170.1	192.8 Y
35635	1/11/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	311.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysteroscopy involving division of:(a) a uterine septum; or(b) intrauterine adhesions ESH Grade 2 or higher (H) (Anaes.)	233.7	Y
35636	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	450.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysteroscopy, resection of myoma or myoma and uterine septum (if both are performed) (H) (Anaes.)	337.95	Y
35637	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	423.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Operative laparoscopy, including any of the following:(a) excision or ablation of stage I (minor) endometriosis;(b) division of pathological adhesions;(c) sterilisation by application of clips, division, destruction or removal of tubes;not being a service associated with a service to which any other item in this Group applies (H) NOTE: Strict legal requirements apply in relation to sterilisation procedures on minors. Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law. Observe the explanatory note before submitting a claim. (Anaes.) (Assist.)	317.35	Y
35640	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2022	1/07/2021	190.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Uterus, curettage of, with or without dilation (including curettage for incomplete miscarriage), if performed under:(a) general anaesthesia; or(b) epidural or spinal (intrathecal) nerve block; or(c) sedation;including procedures (if performed) to which item 35626 or 35630 applies (Anaes.)	142.85	161.9 Y
35641	1/11/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1299.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Endometriosis rAFS stage IV, laparoscopic resection of, involving 2 of the following procedures:(a) resection of the pelvic side wall including dissection of endometriosis or scar tissue from the ureter;(b) resection of the Pouch of Douglas;(c) resection of an ovarian endometioma greater than 2 cm in diameter;(d) dissection of bowel from uterus from the level of the endocervical junction or above (H) (Anaes.) (Assist.)	969.8	Y
35643	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	226.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Evacuation of the contents of the gravid uterus by curettage or suction curettage, if performed under:(a) local anaesthesia; or(b) general anaesthesia; or(c) epidural or spinal (intrathecal) nerve block; or(d) sedation;including procedures (if performed) to which item 35626 or 35630 applies (Anaes.)	170.1	192.8 Y
35644	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	211.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, ablation by electrocoagulation diathermy, laser or cryotherapy, with colposcopy, including any local anaesthesia and biopsies, for previously biopsy confirmed HSIL (CIN 2/3) in a patient with a Type 1 or 2 (completely visible) transformation zone, if there is (a) no evidence of invasive or glandular disease; and(b) no discordance between cytology and previous histology;not being a service associated with a service to which item 35647 or 35648 applies (Anaes.)	158.95	180.15 Y
35645	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	331.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, ablation by electrocoagulation diathermy, laser or cryotherapy, with colposcopy, including any local anaesthesia or biopsies, in conjunction with ablative therapy of additional areas of biopsy proven high grade intraepithelial lesions of one or more sites of the vagina, vulva, urethra or anus, for previously biopsy confirmed HSIL (CIN 2/3) in a patient with a Type 1 or 2 (completely visible) transformation zone, if there is (a) no evidence of invasive or glandular disease; and(b) no discordance between cytology and previous histology;not being a service associated with a service to which item 35647 or 35648 applies (Anaes.)	248.7	281.9 Y
35647	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	211.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, complete excision of the endocervical transformation zone, using large loop or laser therapy, including any local anaesthesia and biopsies (Anaes.)	158.95	180.15 Y
35648	1/04/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	331.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Cervix, complete excision of the endocervical transformation zone, using large loop or laser therapy, including any local anaesthesia and biopsies, in conjunction with ablative treatment of additional areas of biopsy-proven high grade intraepithelial lesions of one or more sites of the vagina, vulva, urethra or anus (Anaes.)	248.7	281.9 Y
35649	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	557.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Myomectomy, one or more myomas, when undertaken by an open abdominal approach (H) (Anaes.) (Assist.)	418.3	Y
35653	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	702.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, abdominal, with or without removal of fallopian tubes and ovaries (H) (Anaes.) (Assist.)	526.55	Y
35657	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	702.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, vaginal, with or without uterine curettage, inclusive of posterior colleoplasty, not being a service to which item 35673 applies (H) (Anaes.) (Assist.)	526.55	Y
35658	1/11/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	432.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Uterus (at least equivalent in size to a 10 week gravid uterus), debulking of, prior to vaginal or laparoscopic removal at hysterectomy or myoma of at least 4 cm removed by laparoscopy when retrieved from the abdomen (H) (Anaes.) (Assist.)	324.7	Y
35661	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1755.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, abdominal, that concurrently requires extensive retroperitoneal dissection with exposure of one or both ureters and complex side wall dissection, including when performed with one or more of the following procedures:(a) salpingectomy;(b) oophorectomy;(c) excision of ovarian cyst(H) (Anaes.) (Assist.)	1316.55	Y
35667	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1658	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Radical hysterectomy or radical trachelectomy (with or without excision of uterine adnexae) for proven malignancy, including excision of any one or more of the following:(a) parametrium;(b) paracolpos;(c) upper vagina;(d) contiguous pelvic peritoneum;utilising nerve sparing techniques and involving ureterolysis, if performed (H) (Anaes.) (Assist.)	1243.5	Y

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35668	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	1926.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, radical (with or without excision of uterine adnexae) including excision of any one or more of the following:(a) parametrium;(b) parauterium;(c) upper vagina;(d) contiguous pelvic peritoneum;utilising nerve sparing techniques and involving anterolysis, if performed in a patient with malignancy and previous pelvic radiation or chemotherapy treatment (H) (Anaes.) (Assist.)	1444.8	Y
35669	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	1926.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, peripartum, performed for histologically proven placenta increta or percreta, or placenta accreta, if the patient has been referred to another practitioner for the management of severe intractable peripartum haemorrhage (H) (Anaes.) (Assist.)	1444.8	Y
35671	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	1511.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, peripartum, for ongoing intractable haemorrhage where other haemorrhage control techniques have failed, for the purpose of providing lifesaving emergency treatment, not being a service associated with a service to which item 35667, 35668 or 35669 applies (H) (Anaes.) (Assist.)	1133.35	Y
35673	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	788.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, vaginal, with or without uterine curettage, with salpingectomy, oophorectomy or excision of ovarian cyst, one or more, one or both sides, inclusive of a posterior colpoplasty, not being a service to which item 35657 applies (H) (Anaes.) (Assist.)	591.4	Y
35674	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	216.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	ULTRASOUND GUIDED NEEDLING and injection of ectopic pregnancy	162.25	183.9
35680	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	605.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BICORNUATE UTERUS, plastic reconstruction for (Anaes.) (Assist.)	454.2	517.7 Y
35691	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	165.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2002	STERILISATION BY INTERRUPTION OF FALLOPIAN TUBES, when performed in conjunction with Caesarean section NOTE:Strict legal requirements apply in relation to sterilisation procedures on minors.Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law. Observe the explanatory note before submitting a claim. (Anaes.)(Assist.)	123.85	Y
35694	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	663.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Tuboplasty (salpingostomy or salpingolysis), unilateral or bilateral, one or more procedures (H) (Anaes.) (Assist.)	497.65	Y
35697	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	984.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Microsurgical or laparoscopic tuboplasty (salpingostomy, salpingolysis or tubal implantation into uterus), UNILATERAL or BILATERAL, 1 or more procedures (Anaes.) (Assist.)	738.45	Y
35700	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	759.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	FALLOPIAN TUBES, unilateral microsugical or laparoscopic anastomosis of (H) (Anaes.) (Assist.)	569.8	Y
35703	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	70.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	HYDROTUBATION OF FALLOPIAN TUBES as a nonrepetitive procedure (Anaes.)	52.75	59.8 Y
35717	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	887.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Laparotomy, involving oophorectomy, salpingectomy, salpingo-oophorectomy, removal of ovarian, periovarian, fimbrial or broad ligament cyst—one or more such procedures, unilateral or bilateral, including adhesiolysis, for benign disease (including ectopic pregnancy by tubal removal or salpingostomy), not being a service associated with hysterectomy (H) (Anaes.) (Assist.)	665.85	Y
35720	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1659.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Radical debulking, involving the radical excision of a macroscopically disseminated gynaecological malignancy from the pelvic cavity, including resection of peritoneum from the following:(a) the pelvic side wall;(b) the pouch of Douglas;(c) the pelvic or macroscopic disease confined to the pelvis, not being a service associated with a service to which item 35721 applies (H) (Anaes.) (Assist.)	1244.7	Y
35721	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	3319.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Radical debulking, involving the radical excision of a macroscopically disseminated gynaecological malignancy from the abdominal and pelvic cavity, where cancer has extended beyond the pelvis, including any of the following:(a) resection of peritoneum over any of the following: (i) the diaphragm; (ii) the omentum; (iii) the greater or lesser omentum; (iv) the porta hepatis;(b) cytoreduction of recurrent gynaecological malignancy from the abdominal cavity following previous abdominal surgery, radiation or chemotherapy;(c) cytoreduction of recurrent gynaecological malignancy from the pelvic cavity following previous pelvic surgery, radiation or chemotherapy;not being a service to which a service associated with a service to which item 35720 or 35726 applies (H) (Anaes.) (Assist.)	2489.4	Y
35723	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1141.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Para-aortic lymph node dissection from above the level of the aortic bifurcation (unilateral), for staging or restaging of gynaecological malignancy (H) (Anaes.) (Assist.)	857.45	Y
35724	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	2171.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Para-aortic lymph node dissection (pelvic or above the aortic bifurcation) after prior similar dissection, radiotherapy or chemotherapy for malignancy (H) (Anaes.) (Assist.)	1628.5	Y
35726	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	502.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Infra-colic omentectomy, with or without multiple peritoneal biopsies, for staging or restaging of gynaecological malignancy, not being a service to which item 35721 applies (H) (Anaes.) (Assist.)	377.05	Y
35729	1/11/1992	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	226.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	OVARIAN TRANSPOSITION out of the pelvis, in conjunction with radical hysterectomy for invasive malignancy (Anaes.)	169.95	Y
35730	1/05/2017	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2017	1/07/2021	226.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Ovarian repositioning for one or both ovaries to preserve ovarian function, prior to gonadotoxic radiotherapy when the treatment volume and dose of radiation have a high probability of causing infertility (Anaes.)	169.95	Y
35750	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	816.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, laparoscopic assisted vaginal, by any approach, including any endometrial sampling, with or without removal of the tubes or ovarian cystectomy or removal of the ovaries and tubes due to other pathology, not being a service associated with a service to which item 35595 or 35673 applies. (Anaes.) (Assist.)	612.3	728.5 Y
35751	1/03/2022	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	816.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, laparoscopic, by any approach, including any endometrial sampling, with or without removal of the tubes, not being a service associated with a service to which item 35595 applies (H) (Anaes.) (Assist.)	612.3	Y
35753	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	902.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, complex laparoscopic, by any approach, including endometrial sampling, with either or both of the following procedures: (a) unilateral or bilateral salpingo-oophorectomy (excluding salpingectomy);(b) excision of moderate endometriosis or ovarian cyst;including any associated laparoscopy, not being a service associated with a service to which item 35595 applies (H) (Anaes.) (Assist.)	677.1	Y
35754	1/05/2001	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	1744.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, laparoscopic, by any approach, including any of the following procedures:(a) salpingectomy;(b) oophorectomy;(c) excision of ovarian cyst;(d) any endometrial sampling that concurrently requires complex side wall dissection;(e) any associated laparoscopy;other than a service to which item 35595 or 35641 applies (H) (Anaes.) (Assist.)	1308.3	Y
35756	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	[illegible]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Hysterectomy, laparoscopic, by any approach, if the procedure is completed by open hysterectomy for control of bleeding or extensive pathology, including any associated laparoscopy, not being a service associated with a service to which item 35595 or 35641 applies (H) (Anaes.) (Assist.)	1116.7	Y
35759	1/11/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Procedure for the control of post operative haemorrhage following gynaecological surgery, under general anaesthesia, utilising a vaginal, abdominal or laparoscopic approach if no other procedure is performed (H) (Anaes.) (Assist.)	439.65	Y
36502	1/11/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	711.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	PELVIC LYMPHADENECTOMY, open or laparoscopic, or both, unilateral or bilateral (Anaes.) (Assist.)	533.7	Y
36503	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1447.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL TRANSPLANT (not being a service to which item 36506 or 36509 applies) (Anaes.) (Assist.)	1085.65	Y
36504	1/05/2019	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/07/2021	306.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2019	RIGID CYSTOSCOPY using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with biopsy of bladder, not being a service associated with a service to which item 36505, 36507, 36508, 36817, 36830, 36836, 36840, 36845, 36848, 36854, 37203, 37206, 37215, 37230 or 37233 applies. (Anaes.)	230.1	240.8 Y
36505	1/05/2019	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/07/2021	241.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2019	RIGID CYSTOSCOPY using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with urethroscopy with or without urethral dilatation, not being a service associated with any other urological endoscopic procedure on the lower urinary tract except a service to which item 37327 applies. (Anaes.)	180.85	204.95 Y
36506	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL TRANSPLANT, performed by vascular surgeon and urologist operating togethervascular anastomosis including aftercare (Anaes.) (Assist.)	721.65	Y
36507	1/05/2019	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/07/2021	403.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2019	RIGID CYSTOSCOPY using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with resection, diathermy or visual laser destruction of bladder tumour or other lesion of the bladder, not being a service to which item 36840 or 36845 applies. (Anaes.)	302.95	343.35 Y
36508	1/05/2019	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/07/2021	787.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2019	RIGID CYSTOSCOPY using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with diathermy, resection or visual laser destruction of multiple tumours in more than 2 quadrants of the bladder or solitary tumour greater than 2cm in diameter, not being a service to which item 36845 applies. (Anaes.)	590.3	669.15 Y
36509	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	814.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL TRANSPLANT, performed by vascular surgeon and urologist operating togetherureterovesical anastomosis including aftercare (Assist.)	611.05	
36516	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrectomy, complete, by open, laparoscopic or robot-assisted approach, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	721.65	Y
36519	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1341.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrectomy, complete, by open, laparoscopic or robot-assisted approach, complicated by previous surgery on the same kidney, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	1007.6	Y
36522	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1152.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrectomy, partial,by open, laparoscopic or robot-assisted approach, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	864.7	Y
36525	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1638.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrectomy, partial, by open, laparoscopic or robot-assisted approach: (a) if complicated by previous surgery or ablative procedure on the same kidney; or (b) for a patient with a solitary functioning kidney; or (c) for a patient with an estimated glomerular filtration rate (eGFR) of less than 60ml/min/1.73m2; other than a service associated with a service to which item30390 or 30627 applies (Anaes.) (Assist.)	1228.7	Y
36528	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1341.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrectomy, radical, by open, laparoscopic or robot-assisted approach, with or without en bloc dissection of lymph nodes, with or without adrenalectomy, for a tumour less than 10 cm in diameter, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	1007.6	Y
36529	1/05/2001	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1658	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrectomy, radical, by open, laparoscopic or robot-assisted approach, with or without en bloc dissection of lymph nodes, with or without adrenalectomy: (a) for a tumour 10 cm or more in diameter; or (b) if complicated by previous open or laparoscopic surgery on the same kidney; other than a service associated with a service to which item30390 or 30627 applies (Anaes.) (Assist.)	1243.5	Y
36531	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1204.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroureterectomy, complete, by open, laparoscopic or robot-assisted approach, including associated bladder repair and any associated endoscopic procedure, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	903.6	Y

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36532	1/05/2001	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1729.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroureterectomy, for tumour, by open, laparoscopic or robot-assisted approach, with or without en bloc dissection of lymph nodes, including associated bladder repair and any associated endoscopic procedures, other than a service to which item 36533 applies or a service associated with a service to which item 30360 or 30627 applies (Anaes.) (Assist.)	1296.9	Y
36533	1/05/2001	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2043.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroureterectomy, for tumour, by open, laparoscopic or robot-assisted approach, with or without en bloc dissection of lymph nodes, including associated bladder repair and any associated endoscopic procedures, if complicated by previous open or laparoscopic surgery on the same kidney or ureter, other than a service associated with a service to which item 30360 or 30627 applies (Anaes.) (Assist.)	1522.85	Y
36537	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	KIDNEY OR PERINEPHRIC AREA, EXPLORATION OF, with or without drainage of, by open exposure, not being a service to which another item in this Sub-group applies (Anaes.) (Assist.)	539.55	Y
36543	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1341.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrolithotomy or pyelolithotomy, or both, extended, for one or more renal stones, including one or more of nephrostomy, pyelostomy, pedicle control with or without freezing, calyorrhaphy or pyeloplasty (Anaes.) (Assist.)	1007.6	1255.55 Y
36546	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	719.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY (ESWL) for urinary tract and posttreatment care for 3 days, including pretreatment consultation, unilateral (Anaes.)	539.55	631.5 Y
36549	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	866.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureterolithotomy, by open, laparoscopic or robot-assisted approach (Anaes.) (Assist.)	650.2	Y
36552	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NEPHROSTOMY or pyelostomy, open, as an independent procedure (Anaes.) (Assist.)	578.7	Y
36558	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	676.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RENAL CYST OR CYSTS, excision or unroofing of (Anaes.) (Assist.)	507.15	588.25 Y
36561	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	179.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Renal biopsy, performed under image guidance (closed) (Anaes.)	134.65	152.6 Y
36564	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Pyeloplasty, (plastic reconstruction of the pelvi-ureteric junction) by open, laparoscopic or robot-assisted approach, with or without the use of a retroperitoneal approach (Anaes.) (Assist.)	721.65	Y
36567	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1057.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Pyeloplasty in a kidney that is congenitally abnormal (in addition to the presence of pelvi-ureteric junction obstruction), or in a solitary kidney, by open, laparoscopic or robot-assisted approach, with or without the use of a retroperitoneal approach (Anaes.) (Assist.)	793.15	Y
36570	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1341.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Pyeloplasty, complicated by previous surgery on the same kidney, by open,laparoscopic or robot-assisted approach, with or without the use of a retroperitoneal approach (Anaes.) (Assist.)	1007.6	Y
36573	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIVIDED URETER, repair of (Anaes.) (Assist.)	721.65	Y
36576	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1204.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Kidney, exposure and exploration of, including repair or nephrectomy, for trauma, by open, laparoscopic or robot-assisted approach, other than a service associated with: (a) any other procedure performed on the kidney, renal pelvis or renal pedicle; or (b) a service to which item30360 or 30627 applies (Anaes.) (Assist.)	903.6	Y
36579	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureterectomy, complete or partial, (with a biopsy within the ureter, proven by histopathology at the time of surgery; or (b) for congenital megaureter with or without associated bladder repair (Anaes.) (Assist.)	578.7	Y
36585	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, transplantation of, into skin (Anaes.) (Assist.)	578.7	Y
36588	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, reimplantation into bladder (Anaes.) (Assist.)	721.65	Y
36591	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1152.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, reimplantation into bladder with psoas hitch or Boari flap or both (Anaes.) (Assist.)	864.7	Y
36594	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, transplantation of, into intestine (Anaes.) (Assist.)	721.65	Y
36597	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, transplantation of, into another ureter (Anaes.) (Assist.)	721.65	Y
36600	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1152.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, transplantation of, into isolated intestinal segment, unilateral (Anaes.) (Assist.)	864.7	1065 Y
36603	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1341.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETERS, transplantation of, into isolated intestinal segment, bilateral (Anaes.) (Assist.)	1007.6	Y
36604	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	278.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureteric stent, passage of through percutaneous nephrostomy tube, using interventional radiology techniques, but not including imaging (Anaes.)	208.95	236.8 Y
36606	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2430.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INTESTINAL URINARY RESERVOIR, continent, formation of, including formation of nonreturn valves and implantation of ureters (1 or both) into reservoir (Anaes.) (Assist.)	1807.25	Y
36607	1/05/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	718.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureteric stent insertion of, with balloon dilatation of: (a) the pelvicalyceal system; or (b) ureter; or (c) the pelvicalyceal system and ureter, through a nephrostomy tube using interventionalradiology techniques, but not including imaging (Anaes.)	539.05	Y
36608	1/05/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	278.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureteric stent, exchange of, percutaneously through either the ileal conduit or bladder, using interventional radiology techniques, but not including imaging, not being a service associated with a service to which items 36811 to 36814 apply (Anaes.)	208.95	Y
36609	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Intestinal urinary conduit, reservoir or ureterostomy, revision of (Anaes.) (Assist.)	578.7	Y
36610	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	1846.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Intestinal urinary conduit, incontinent, formation of (including associated small bowel resection and anastomosis), including implantation of one or both ureters into reservoir (Anaes.) (Assist.)	1385.25	Y
36611	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	2913.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Intestinal urinary reservoir, continent, formation of (including associated small bowel resection and anastomosis), including formation of non-return valves and implantation of one or both ureters into reservoir, performed by open, laparoscopic or robot-assisted approach (Anaes.) (Assist.)	2184.9	Y
36612	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETER, exploration of, with or without drainage of, as an independent procedure (Anaes.) (Assist.)	507.15	Y
36615	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureterolysis, unilateral, with or without repositioning of the ureter, for obstruction of the ureter, if: (a) the obstruction: (i) is evident either radiologically or by proximal ureteric dilatation at operation; and (ii) is secondary to retroperitoneal fibrosis; and (b) there is biopsy proven fibrosis, endometriosis or cancer at the site of the obstruction at time of surgery (Anaes.) (Assist.)	578.7	Y
36618	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	REDUCTION URETEROPLASTY (Anaes.) (Assist.)	507.15	Y
36621	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	845.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLOSURE OF CUTANEOUS URETEROSTOMY (Anaes.) (Assist.)	362.55	Y
36624	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	588.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrostomy, percutaneous, using interventional radiology techniques, but not including imaging (Anaes.) (Assist.)	435.6	493.65 Y
36627	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroscopy, percutaneous, with or without any one or more of; stone extraction, biopsy or diathermy, not being a service to which item 36639 or 36645 applies (Anaes.)	539.55	Y
36633	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroscopy, percutaneous, with incision of any one or more of; renal pelvis, calyx or calyces or ureter and including antegrade insertion of ureteric stent, not being a service associated with a service to which item 36627, 36639 or 36645 applies (Anaes.) (Assist.)	578.7	683.65 Y
36636	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	416.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroscopy, percutaneous, with incision of any one or more of; renal pelvis, calyx or calyces or ureter and including antegrade insertion of ureteric stent, being a service associated with a service to which item 36627, 36639 or 36645 applies (Anaes.) (Assist.)	312.1	Y
36639	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	866.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephroscopy, percutaneous, with destruction and extraction of one or two stones using ultrasound or electrohydraulic shock waves orlasers, other than a service to which item 36645 applies (Anaes.)	650.2	Y
36645	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1109.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NEPHROSCOPY, percutaneous, with removal or destruction of a stone greater than 2 cm in any dimension, or for 3 or more stones (Anaes.) (Assist.)	832.15	Y
36649	1/04/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	278.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrostomy drainage tube, exchange of, using interventional radiology techniques, but not including imaging (Anaes.) (Assist.)	208.95	236.8 Y
36650	1/05/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2005	1/07/2021	155.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Nephrostomy tube, removal of, using interventionalradiology techniques, but not including imaging, if the ureter has been stented with a double J ureteric stent and that stent is left in place (Anaes.)	116.85	Y
36652	1/05/2001	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	PYELOSCOPY, retrograde, of one collecting system, with or without any one or more of, cystoscopy, ureteric meatotomy, ureteric dilatation, not being a service associated with a service to which item 36803, 36812 or 36824 applies (Anaes.) (Assist.)	507.15	Y
36654	1/05/2001	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	866.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	PYELOSCOPY, retrograde, of one collecting system, being a service to which item 36652 applies, plus 1 or more of extraction of stone from the renal pelvis or calyces, or biopsy or diathermy of the renal pelvis or calyces, not being a service associated with a service to which item 36656 applies to a procedure performed in the same collecting system (Anaes.) (Assist.)	650.2	Y
36656	1/05/2001	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1109.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	PYELOSCOPY, retrograde, of one collecting system, being a service to which item 36652 applies, plus extraction of 2 or more stones in the renal pelvis or calyces or destruction of stone with ultrasound, electrohydraulic or kinetic lithotripsy, or laser in the renal pelvis or calyces, with or without extraction of fragments, not being a service associated with a service to which item 36654 applies to a procedure performed in the same collecting system (Anaes.) (Assist.)	832.15	Y
36663	1/05/2010	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2017	1/07/2021	687.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Both:(a) percutaneous placement of sacral nerve lead or leads using fluoroscopic guidance, or open placement of sacral nerve lead or leads; and (b) intra-operative test stimulation, to manage: (i) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or (ii) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment (Anaes.)	515.85	593.85 Y
36664	1/05/2010	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2017	1/07/2021	617.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Both:(a) percutaneous repositioning of sacral nerve lead or leads using fluoroscopic guidance, or open repositioning of sacral nerve lead or leads; and (b) intra-operative test stimulation, to correct displacement or unsatisfactory positioning, if inserted for the management of: (i) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or (ii) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment —other than a service to which item 36663 applies (Anaes.)	463.2	529.7 Y
36665	1/05/2010	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/07/2021	130.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Sacral nerve electrode or electrodes, management and adjustment of the pulse generator by a medical practitioner, to manage detrusor overactivity or non-obstructive urinary retention - each day	97.85	110.9
36666	1/05/2010	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2017	1/07/2021	347.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Pulse generator, subcutaneous placement of, and placement and connection of extension wire or wires to sacral nerve electrode or electrodes, for the management of:(a) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or (b) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment (Anaes.)	260.7	295.45 Y

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36667	1/05/2010	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2017	1/07/2021	142.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Sacral nerve lead or leads, removal of, if the lead was inserted to manage:(a) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or (b) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment (Anaes.)	122	138.3 Y
36668	1/05/2010	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2017	1/07/2021	142.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Pulse generator, removal of, if the pulse generator was inserted to manage:(a) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or (b) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment (Anaes.)	122	138.3 Y
36671	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	208.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Percutaneous tibial nerve stimulation, initial treatment protocol, for the treatment of overactive bladder, by a specialist urologist, gynaecologist or urogynaecologist, if: (a) the patient has been diagnosed with idiopathic overactive bladder; and (b) the patient has been refractory to, is contraindicated or otherwise not suitable for conservative treatments (including anti-cholinergic agents); and (c) the patient is contraindicated or otherwise not a suitable candidate for botulinum toxin type A therapy; and (d) the patient is contraindicated or otherwise not a suitable candidate for sacral nerve stimulation; and (e) the patient is willing and able to comply with the treatment protocol; and (f) the initial treatment protocol comprises 12 sessions, delivered over a 3 month period; and (g) each session lasts for a minimum of 45 minutes, of which neurostimulation lasts for 30 minutes. For each patient—applicable only once, unless the patient achieves at least a 50% reduction in overactive bladder symptoms from baseline at any time during the 3 month treatment period. Not applicable for a service associated with a service to which item 36672 or 36673 applies	156.1	176.9
36672	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	208.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Percutaneous tibial nerve stimulation, tapering treatment protocol, for the treatment of overactive bladder, including any associated consultation at the time the percutaneous tibial nerve stimulation treatment is administered, if: (a) the patient responded to the percutaneous tibial nerve stimulation initial treatment protocol and has achieved at least a 50% reduction in overactive bladder symptoms from baseline at any time during the treatment period for the initial treatment protocol; and (b) the tapering treatment protocol comprises no more than 5 sessions, delivered over a 3 month period, and the interval between sessions is adjusted with the aim of sustaining therapeutic benefit of the treatment; and (c) each session lasts for a minimum of 45 minutes, of which neurostimulation lasts for 30 minutes. Not applicable for a service associated with a service to which item36671 or 36673 applies	156.1	176.9
36673	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	208.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Percutaneous tibial nerve stimulation, maintenance treatment protocol, for the treatment of overactive bladder, including any associated consultation at the time the percutaneous tibial nerve stimulation treatment is administered, if: (a) the patient responded to the percutaneous tibial nerve stimulation initial treatment protocol and to the tapering treatment protocol, and has achieved at least a 50% reduction in overactive bladder symptoms from baseline at any time during the treatment period for the initial treatment protocol; and (b) the maintenance treatment protocol comprises no more than 12 sessions, delivered over a 12 month period, and the interval between sessions is adjusted with the aim of sustaining therapeutic benefit of the treatment; and (c) each session lasts for a minimum of 45 minutes, of which neurostimulation lasts for 30 minutes. Not applicable for service associated with a service to which item36671 or 36672 applies	156.1	176.9
36800	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	28.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLADDER, catheterisation of, where no other procedure is performed (Anaes.)	21.55	24.4 Y
36803	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	485.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureteroscopy, of one ureter, with or without any one or more of; cystoscopy, ureteric meatotomy or ureteric dilatation, not being a service associated with a service to which item 36052, 36654, 36056,36806, 36809, 36811 36812 or 36448 applies (Anaes.) (Assist.)	363.95	412.5 Y
36806	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureteroscopy, of one ureter, (a) with or without one or more of the following: (i) cystoscopy; (ii) endoscopic incision at ureteric junction or ureteric stricture; (iii) ureteric meatotomy; (iv) ureteric dilatation; and (b) with either or both of the following: (i) extraction of stone from the ureter; (ii) biopsy or diathermy of the ureter; other than (c) a service associated with a service to which item36809 or 36812 applies; or (d) a service associated with a service, performed on the same ureter, to which item 36808, 36824 or 36848 applies (Anaes.) (Assist.)	507.15	Y
36809	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	866.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Ureteroscopy, of one ureter, with or without any one or more of, cystoscopy, ureteric meatotomy or ureteric dilatation, plus destruction of stone in the ureter with ultrasound, electrohydraulic or kinetic lithotripsy, or laser, with or without extraction of fragments, not being a service associated with a service to which item 36803 or 36812 applies, or a service associated with a service to which item 36806, 36824 or 36848 applies to a procedure performed on the same ureter (Anaes.) (Assist.)	650.2	Y
36811	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	336.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with insertion of one or more urethral or prostatic prostheses, other than a service associated with a service to which item 37200, 37207 or 37230 applies (Anaes.)	252.4	286.05 Y
36812	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	173.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Either or both of: cystoscopy and urethroscopy, with or without urethral dilatation, other than a service associated with any other urological endoscopic procedure on the lower urinary tract (Anaes.)	130.1	147.45 Y
36815	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	247.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CYSTOSCOPY, with or without urethroscopy, for the treatment of penile warts or uretheral warts, not being a service associated with a service to which item 30189 applies (Anaes.)	185.7	210.45 Y
36818	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	287.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with ureteric catheterisation, unilateral or bilateral, guided by fluoroscopic imaging of the upper urinary tract, other than a service associated with a service to which item 36824 or 36830 applies (Anaes.)	215.85	244.65 Y
36821	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	336.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy with one or more of; ureteric dilatation, insertion of ureteric stent, or brush biopsy of ureter or renal pelvis, unilateral (Anaes.) (Assist.)	252.25	285.9 Y
36822	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	480.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with ureteric catheterisation, unilateral: (a) guided by fluoroscopic imaging of the upper urinary tract; other than a service associated with a service to which item36818, 36821 or 36823 applies (Anaes.) (Assist.)	360.2	408.25 Y
36823	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	552.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with removal of ureteric stent and ureteric catheterisation, unilateral: (a) guided by fluoroscopic imaging of the upper urinary tract; and (b) including either or both of the following: (i) ureteric dilatation; or (ii) insertion of ureteric stent of ureter or of renal pelvis; other than a service associated with a service to which item36818, 36821, 36830 or 36833 applies (Anaes.) (Assist.)	414.15	469.4 Y
36824	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	221.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with ureteric catheterisation, unilateral or bilateral,other than a service associated with a service to which item 36818 applies (Anaes.)	166.35	188.55 Y
36827	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	230.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with controlled hydro-dilatation of the bladder,other than a service associated with a service to which item 37011 or 37245 applies (Anaes.)	179.4	203.35 Y
36830	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	241.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CYSTOSCOPY, with ureteric meatotomy (Anaes.)	158.65	Y
36833	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	387.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with removal of ureteric stent or other foreign body in the lower urinary tract, unilateral (Anaes.)	215.85	244.65 Y
36836	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	230.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/02/2019	CYSTOSCOPY, with biopsy of bladder, not being a service associated with a service to which item 36812, 36830, 36840, 36845, 36848, 36854, 37203, 37206, 37215, 37230 or 37233applies (Anaes.)	179.4	203.35 Y
36840	1/05/2003	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/07/2021	224.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with diathermy, resection or visual laser destruction of bladder tumour or other lesion of the bladder, for: (a) a tumour or lesion in only one quadrant of the bladder; or (b) a solitary tumour of not more than 2 cm in diameter; other than a service associated with a service to which item36845 applies (Anaes.)	252.25	285.9 Y
36842	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	338.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with lavage of blood clots from bladder, including any associated cautery of prostate or bladder, other than a service associated with a service to which any of item 36812, 36827 to 36863, 37203, 37206, 37230 and 37233 apply (Anaes.)	253.8	Y
36845	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	719.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystoscopy, with diathermy, resection or visual laser destruction of: (a) multiple tumours in 2 or more quadrants of the bladder; or (b) a solitary bladder tumour of more than 2 cm in diameter (Anaes.)	539.55	631.5 Y
36848	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	229.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CYSTOSCOPY, with resection of ureterocele (Anaes.)	179.4	Y
36851	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	229.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Cystoscopy, with injection into bladder wall, other than a service associated with a service to which item 18375 or 18379 applies (H) (Anaes.)	179.4	Y
36854	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CYSTOSCOPY, with endoscopic incision or resection of external sphincter, bladder neck or both (Anaes.)	363.95	Y
36860	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	173.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ENDOSCOPIC EXAMINATION of intestinal conduit or reservoir (Anaes.)	130.1	147.45 Y
36863	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Litholapaxy, with or without cystoscopy (Anaes.)	363.95	Y
37000	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLADDER, partial excision of (Anaes.) (Assist.)	578.7	Y
37004	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLADDER, repair of rupture (Anaes.) (Assist.)	507.15	Y
37008	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	433.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Open cystostomy or cystotomy, suprapubic, other than: (a) a service to which item37011 applies; or (b) a service associated with a service to which item37245 applies; or (c) another open bladder procedure (Anaes.)(Assist.)	325	368.35 Y
37011	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	97.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Suprapubic stab cystotomy, other than a service associated with a service to which item 36827 applies (Anaes.)	72.85	82.55 Y
37014	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1100.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLADDER, total excision of (Anaes.) (Assist.)	832.15	Y
37015	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	1321.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Bladder, total excision of, following previous open, laparoscopic or robot-assisted surgery, or radiation therapy or chemotherapy to the pelvis (Anaes.) (Assist.)	988.55	Y
37016	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	2076.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystectomy, including prostatectomy and pelvic lymph node dissection, other than a service associated with a service to which items 37000, 37014, 37015, 37209, 35511 or 36502 applies (Anaes.) (Assist.)	1557.05	Y
37018	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	3114.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystectomy, including prostatectomy and pelvic lymph node dissection, following previous open, laparoscopic or robot-assisted surgery, or radiation therapy or chemotherapy to the pelvis, other than a service associated with a service to which items 37000, 37014, 37015, 37016, 37209, 35511 or 36502 applies (Anaes.) (Assist.)	2335.65	Y
37019	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	2073.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystectomy, including anterior exenteration and pelvic lymph node dissection, other than a service associated with a service to which any of items 37000, 37014, 37015, 35511, 36502, and 35653 to 35756 apply (Anaes.) (Assist.)	1555.3	Y
37020	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BLADDER DIVERTICULUM, excision or obliteration of (Anaes.) (Assist.)	578.7	Y
37021	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	3110.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cystectomy, including anterior exenteration and pelvic lymph node dissection, following previous open, laparoscopic or robot-assisted surgery, radiation therapy or chemotherapy to the pelvis, other than a service associated with a service to which any of items 37000, 37014, 37015, 35511, 36502 and 35653 to 35756 apply (Anaes.) (Assist.)	2332.95	Y
37023	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	433.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VESICAL FISTULA, cutaneous, operation for (Anaes.)	325	Y

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37026	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	433.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	CUTANEOUS VESICOSTOMY, establishment of (Anaes.)(Assist.)	325	Y
37029	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	VESICOVAGINAL FISTULA, closure of, by abdominal approach (Anaes.) (Assist.)	721.65	Y
37038	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	VESICOINTESTINAL FISTULA, closure of, excluding bowel resection (Anaes.) (Assist.)	539.85	Y
37039	1/11/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	701.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Bladder stress incontinence, sling procedure for, using a non-autologous biological sling (Anaes.) (Assist.)	526.4	Y
37040	1/05/2016	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	948.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	13/08/2021	Bladder stress incontinence, sling procedure for, using a non-adjustable synthetic male sling system, other than a service associated with a service to which item 37042 applies (H) (Anaes.) (Assist.)	711.2	Y
37041	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	48.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	BLADDER ASPIRATION by needle	36.4	41.25
37042	1/05/2001	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	948.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	13/08/2021	Bladder stress incontinence—sling procedure for, using autologous fascial sling, including harvesting of sling, other than a service associated with a service to which item 35599 applies (H) (Anaes.) (Assist.)	711.2	Y
37044	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/03/2022	806.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Bladder stress incontinence, suprapubic operation for (such as Burch colposuspension), open or laparoscopic route, using native tissue without graft, with diagnostic cystoscopy to assess the integrity of the lower urinary tract, not being a service associated with a service to which item 35599 or 36812 applies (H) (Anaes.) (Assist.)	604.9	Y
37045	1/05/1997	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1486.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2015	CONTINENT CATHETERISATION BLADDER STOMAS (eg. Mitrofanoff), formation of (Anaes.)(Assist.)	1114.95	Y
37046	1/11/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	720.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Suprapubic or perineal procedure for excision of graft material, either singly or in multiple pieces, for a symptomatic patient with graft related complications (including graft related pain or discharge and bleeding related to graft exposure), if not more than one service to which this item applies has been provided to the patient by the same practitioner in the preceding 12 months (Anaes.) (Assist.)	540.4	Y
37047	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1731.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	BLADDER ENLARGEMENT using intestine (Anaes.) (Assist.)	1300.2	Y
37048	1/11/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	962.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Bladder neck closure for the management of urinary incontinence (Anaes.) (Assist.)	721.65	Y
37050	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	BLADDER EXSTROPHY CLOSURE, not involving sphincter reconstruction (Anaes.) (Assist.)	578.7	Y
37053	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	891.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	BLADDER TRANSECTION AND RE-ANASTOMOSIS TO TRIGONE (Anaes.) (Assist.)	668.55	Y
37200	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1057.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, by open, laparoscopic or robot-assisted approach (Anaes.) (Assist.)	793.15	Y
37201	1/11/2002	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	862.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	PROSTATE, transurethral radio-frequency needle ablation of, with or without cystoscopy and with or without urethroscopy, in patients with moderate to severe lower urinary tract symptoms who are not medically fit for transurethral resection of the prostate (that is, prostatectomy using diathermy or cold punch) and including services to which item 36854, 37200, 37206, 37207, 37208, 37245, 37303, 37321 or 37324 applies (Anaes.)	646.85	Y
37202	1/11/2002	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/11/2003	1/07/2021	432.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	PROSTATE, transurethral radio-frequency needle ablation of, with or without cystoscopy and with or without urethroscopy, in patients with moderate to severe lower urinary tract symptoms who are not medically fit for transurethral resection of the prostate (that is prostatectomy using diathermy or cold punch) and including services to which item 36854, 37245, 37303, 37321 or 37324 applies, continuation of, within 10 days, the procedure described by item 37200, 37203 or 37207 which had to be discontinued for medical reasons (Anaes.)	324.7	368 Y
37203	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1084.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, transurethral resection using cautery, with or without cystoscopy and with or without urethroscopy, and including services to which item 36854, 37200, 37202, 37207, 37208, 37245, 37303, 37321 or 37324 applies (Anaes.)	813.3	Y
37206	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	580.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, endoscopic, using diathermy or other ablative techniques: (a) with or without cystoscopy and with or without urethroscopy; and (b) including services to which one or more of items36854, 37303, 37321 and 37324 apply; continuation, within 10 days, of treatment of benign prostatic hyperplasia that had to be discontinued for medical reasons (Anaes.)	435.6	Y
37207	1/07/1995	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1084.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	PROSTATE, endoscopic non-contact (side firing) visual laser ablation, with or without cystoscopy and with or without urethroscopy, and including services to which items 36854, 37203, 37202, 37206, 37246, 37303, 37321 or 37324 applies (Anaes.)	813.3	Y
37208	1/07/1995	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	580.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2013	PROSTATE, endoscopic non-contact (side firing) visual laser ablation, with or without cystoscopy and with or without urethroscopy, and including services to which item 36854, 37303, 37321 or 37324 applies, continuation of, within 10 days of the procedure described by items 37201, 37203, 37207 or 37245 which had to be discontinued for medical reasons (Anaes.)	435.6	Y
37209	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1343.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2001	PROSTATE, and/or SEMINAL VESICLE/AMPULLA OF VAS, unilateral or bilateral, total excision of, not being a service associated with a service to which item number 37210 or 37211 applies (Anaes.) (Assist.)	1007.6	Y
37210	1/11/1997	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1658	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, radical, involving total excision of the prostate, sparing of nerves around the prostate (where clinically indicated) with or without bladder neck reconstruction, other than a service associated with a service to which item 30390, 30627, 35551, 36502 or 37375 applies (Anaes.) (Assist.)	1243.5	Y
37211	1/11/1997	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2013.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, radical, involving total excision of the prostate, sparing of nerves around the prostate (where clinically indicated): (a) with or without bladder neck reconstruction; and (b) with pelvic lymphadenectomy; other than a service associated with a service to which item30390, 30627, 35551, 36502 or 37375 applies (Anaes.) (Assist.)	1510.2	Y
37213	1/11/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	2486.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, radical, involving total excision of the prostate, sparing of nerves around the prostate (where clinically indicated): (a) complicated by: (i) previous radiation therapy (including brachytherapy) on the prostate; or (ii) previous ablative procedures on the prostate; and (b) with bladder neck reconstruction; other than a service associated with a service to which item30390, 30627, 35551, 36502 or 37375 applies (Anaes.) (Assist.)	1865.15	Y
37214	1/11/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	3018.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatectomy, radical, involving total excision of the prostate, sparing of nerves around the prostate (where clinically indicated): (a) complicated by: (i) previous radiation therapy (including brachytherapy) on the prostate; or (ii) previous ablative procedures on the prostate; and (b) with bladder neck reconstruction and pelvic lymphadenectomy; other than a service associated with a service to which item30390, 30627, 35551, 36502 or 37375 applies (Anaes.) (Assist.)	2263.5	Y
37215	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	113.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, biopsy of, endoscopic, with or without cystoscopy (Anaes.)	325	368.35 Y
37216	1/11/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/11/2020	1/07/2021	146.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate or prostatic bed, needle biopsy of, by the transrectal route, using prostatic ultrasound guidance and obtaining one or more prostatic specimens, being a service associated with a service to which item 55603 applies (Anaes.)	109.65	124.25 Y
37217	1/07/2011	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/07/2011	1/07/2021	141.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, implantation of radio-opaque fiducial markers into the prostate gland or prostate surgical bed, under ultrasound guidance, being an item associated with a service to which item 55603 applies (Anaes.)	107.95	122.35 Y
37218	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	141.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, injection into, one or more, excluding insertion of fiducial markers (Anaes.)	107.95	122.35 Y
37219	1/05/1994	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/05/1994	1/07/2021	350.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate or prostatic bed, needle biopsy of, by the transperineal route, using prostatic ultrasound guidance and obtaining one or more prostatic specimens, being a service associated with a service to which item 55600 or 55603 applies (Anaes.)	263.1	298.15 Y
37220	1/11/2001	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1086.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, radioactive seed implantation of, urological component, using transrectal ultrasound guidance: (a) for a patient with: (i) localised prostatic malignancy at clinical stages T1 (clinically inapparent tumour not palpable or visible by imaging) or T2 (tumour confined within prostate); and (ii) a Gleason score of less than or equal to 7 (Grade Group 1 to Grade Group 3); and (iii) a prostate specific antigen (PSA) of not more than 10ng/ml at the time of diagnosis; and (b) performed by a urologist at an approved site in association with a radiation oncologist; and (c) being a service associated with: (i) services to which items15138 and 55603 apply; and (ii) a service to which item60506 or 60509 applies (Anaes.)	814.9	Y
37221	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostatic abscess, endoscopic drainage of (Anaes.)	363.95	Y
37223	1/05/1997	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	214.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/1997	PROSTATIC COIL, insertion of, under ultrasound control (Anaes.)	160.95	Y
37224	1/05/2003	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/07/2021	1/07/2021	336.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, diathermy or cauterisation,other than a service associated with a service to which item 37201, 37202, 37203, 37206, 37207, 37208 or 37215 applies (Anaes.)	252.25	285.9 Y
37226	1/05/2020	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/05/2020	1/07/2021	292.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Prostate or prostatic bed, needle biopsy of, using prostatic magnetic resonance imaging techniques and obtaining 1 or more prostatic specimens. (Anaes.)(Anaes.)	219.2	248.45 Y
37227	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/11/2006	1/07/2021	588.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2007	PROSTATE, transperineal insertion of catheters into, for high dose rate brachytherapy using ultrasound guidance including any associated cystoscopy. The procedure must be performed at an approved site in association with a radiation oncologist, and be associated with a service to which item 15131 or 15132 applies. (Anaes.)	441.6	500.85 Y
37230	1/05/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/05/2006	1/07/2021	1084.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, ablation by electrocautery or high-energy transurethral microwave thermotherapy, with or without cystoscopy and with or without urethroscopy (Anaes.)	813.3	996.45 Y
37233	1/05/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/05/2006	1/07/2021	580.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, ablation by electrocautery or high-energy transurethral microwave thermotherapy, with or without cystoscopy and with or without urethroscopy, continuation, within 10 days, of a urological procedure of the prostate that had to be discontinued for medical reasons (Anaes.)	435.6	493.65 Y
37245	1/03/2013	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	1313.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Prostate, endoscopic enucleation of, for the treatment of benign prostatic hyperplasia: (a) with morcellation, including mechanical morcellation or by an endoscopic technique; and (b) with or without cystoscopy; and (c) with or without urethroscopy; and other than a service associated with a service to which item36827, 36854, 37008, 37201, 37202, 37203, 37206, 37207, 37208, 37303, 37321 or 37324 applies (Anaes.)	985	Y
37300	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	48.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	URETHRAL SOUNDS, passage of, as an independent procedure (Anaes.)	36.4	41.25 Y
37303	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	77.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	URETHRAL STRICTURE, dilatation of (Anaes.)	57.85	65.55 Y
37306	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	URETHRA, repair of rupture of distal section (Anaes.) (Assist.)	507.15	Y
37309	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	URETHRA, repair of rupture of prostatic or membranous segment (Anaes.) (Assist.)	721.65	Y
37318	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	287.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Urethroscopy, with or without cystoscopy, with one or more of biopsy, diathermy, visual laser destruction of urethral calculi or removal of foreign body or calculi (Anaes.)	215.85	344.65 Y
37321	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	A	1/12/1991	1/07/2021	97.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	URETHRAL MEATOTOMY, EXTERNAL (Anaes.)	72.85	82.55 Y
37324	1/12/1991	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	239.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Urethrotomy or urethrostomy, internal or external (Anaes.)(Assist.)	179.4	Y

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37327	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	336.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHROTOMY, optical, for urethral stricture (Anaes.) (Assist.)	252.25		Y
37330	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHRECTOMY, partial or complete, for removal of tumour (Anaes.) (Assist.)	507.15		Y
37333	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	580.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETHROVAGINAL FISTULA, closure of (Anaes.) (Assist.)	435.6		Y
37336	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHRORECTAL FISTULA, closure of (Anaes.) (Assist.)	578.7		Y
37338	1/05/2016	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	948.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Urethral synthetic male sling system, division or removal of, for urethral obstruction, sling erosion, pain or infection, following previous surgery for urinary incontinence, other than a service associated with a service to which item 37340 or 37341 applies (Anaes.) (Assist.)	711.2		Y
37339	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	249.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Periurethral or transurethral injection of urethral bulking agents for the treatment of urinary incontinence, including cystoscopy and urethroscopy, other than a service associated with a service to which item 18375 or 18379 applies (Anaes.)	187.2	212.2	Y
37340	1/05/2001	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	948.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Urethral synthetic sling, division or removal of, for urethral obstruction, sling erosion, pain or infection following previous surgery for urinary incontinence, vaginal approach, other than a service associated with a service to which item 37341 or 37344 applies (Anaes.) (Assist.)	711.2		Y
37341	1/05/2001	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	948.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Urethral sling, division or removal of, for urethral obstruction, sling erosion, pain or infection following previous surgery for urinary incontinence, suprapubic, combined suprapubic and vaginal or combined suprapubic and perineal approach, other than a service associated with a service to which item 37340 or 37344 applies (Anaes.) (Assist.)	711.2		Y
37342	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	866.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHROPLASTYsingle stage operation (Anaes.) (Assist.)	650.2		Y
37343	1/05/2001	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1447.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2001	URETHROPLASTY, single stage operation, transpubic approach via separate incisions above and below the symphysis pubis, excluding laparotomy, symphysiotomy and suprapubic cystotomy, with or without re-routing of the urethra around the crura (Anaes.) (Assist.)	1085.65		Y
37344	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	948.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Urethral autologous fascial sling (or other biological sling), division or removal of, for urethral obstruction, sling erosion, pain or infection following previous surgery for urinary incontinence, vaginal approach, other than a service to which 37340 or 37341 applies (Anaes.) (Assist.)	711.2		Y
37345	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHROPLASTY2 stage operationfirst stage (Anaes.) (Assist.)	539.55		Y
37348	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	URETHROPLASTY2 stage operationsecond stage (Anaes.) (Assist.)	539.55		Y
37351	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	287.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHROPLASTY, not being a service to which another item in this Group applies (Anaes.) (Assist.)	215.85		Y
37354	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	336.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	HYPOSPADIAS, meatotomy and hemicircumcision (Anaes.) (Assist.)	252.25		Y
37369	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	194.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHRA, excision of prolapse of (Anaes.)	145.65		Y
37372	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Urethral diverticulum, excision of (Anaes.) (Assist.)	721.65		Y
37375	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1204.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	URETHRAL SPHINCTER, reconstruction by bladder tubularisation technique or similar procedure (Anaes.) (Assist.)	903.6		Y
37381	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ARTIFICIAL URINARY SPHINCTER, insertion of cuff, perineal approach (Anaes.) (Assist.)	578.7		Y
37384	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1204.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ARTIFICIAL URINARY SPHINCTER, insertion of cuff, abdominal approach (Anaes.) (Assist.)	903.6		Y
37387	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	336.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ARTIFICIAL URINARY SPHINCTER, insertion of pressure regulating balloon and pump (Anaes.) (Assist.)	252.25		Y
37388	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	101.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Artificial urinary sphincter, sterile, percutaneous adjustment of filling volume	76.45	86.65	
37390	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ARTIFICIAL URINARY SPHINCTER, revision or removal of, with or without replacement (Anaes.) (Assist.)	721.65		Y
37393	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	239.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PRIAPISM, decompression by glandular stab cavernosospongiosum shunt or penile aspiration with or without lavage (Anaes.)	179.4	203.35	Y
37396	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PRIAPISM, shunt operation for, not being a service to which item 37393 applies (Anaes.) (Assist.)	578.7		Y
37402	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, partial amputation of (Anaes.) (Assist.)	363.95		Y
37405	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, complete or radical amputation of (Anaes.) (Assist.)	721.65		Y
37408	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, repair of laceration of cavernous tissue, or fracture involving cavernous tissue (Anaes.) (Assist.)	363.95		Y
37411	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	962.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PENIS, repair of avulsion (Anaes.) (Assist.)	721.65	874.3	Y
37415	1/07/1996	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/1996	1/07/2021	48.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Penis, injection of, for the investigation and treatment of erectile dysfunction. Applicable not more than twice in a 36-month period	36.4	41.25	
37417	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	580.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Penis, correction of chordee by plication techniques including Nesbit's corporoplasty (Anaes.) (Assist.)	435.6		Y
37418	1/05/2001	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2001	1/07/2021	771.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Penis, correction of chordee with incision or excision of fibrous plaque or plaques, with or without mobilisation of one or both of the neuro-vascular bundle and urethra (Anaes.) (Assist.)	578.7	683.65	Y
37423	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Penis, lengthening by translocation of corpora, in conjunction with partial penectomy or penile epispadias secondary repair, either as primary or secondary procedures (Anaes.) (Assist.)	721.65		Y
37426	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1014.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, artificial erection device, insertion of, into 1 or both corpora (Anaes.) (Assist.)	760.55		Y
37429	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	336.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, artificial erection device, insertion of pump and pressure regulating reservoir (Anaes.) (Assist.)	252.25		Y
37432	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	962.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, artificial erection device, complete or partial revision or removal of components, with or without replacement (Anaes.) (Assist.)	721.65		Y
37435	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	97.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PENIS, frenuloplasty as an independent procedure (Anaes.)	72.85	82.55	Y
37438	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	287.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Scrotum, partial excision of, for histologically proven malignancy or infection (Anaes.) (Assist.)	215.85	244.65	Y
37601	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	287.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	SPERMATOCELE OR EPIDIDYMAL CYST, excision of, 1 or more of, on 1 side (Anaes.)	215.85	244.65	Y
37604	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	287.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Exploration of scrotal contents, with or without fixation and with or without biopsy, unilateral or bilateral, other than a service associated with sperm harvesting for IVF (Anaes.)	215.85	244.65	Y
37605	1/05/2007	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/07/2021	203.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2013	Transcutaneous sperm retrieval, unilateral, from either the testis or the epididymis, for the purposes ofintracytoplasmic sperm injection, for male factor infertility, excluding a service to which item 13218 applies. (Anaes.)	291.45	330.35	Y
37606	1/05/2007	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/07/2021	577	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2013	Open surgical sperm retrieval, unilateral, including the exploration of scrotal contents, with our without biopsy, for the purposes of intracytoplasmic sperm injection, for male factor infertility, performed in a hospital, excluding a service to which item13218 or 37604 applies. (Anaes.)	432.75	490.45	Y
37607	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1443.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Bilateral retroperitoneal lymph node dissection, for testicular tumour, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	1082.45		Y
37610	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2171.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Bilateral retroperitoneal lymph node dissection, for testicular tumour, following previous similar retroperitoneal dissection, retroperitoneal radiation therapy or chemotherapy, other than a service associated with a service to which item 30390 or 30627 applies (Anaes.) (Assist.)	1628.5		Y
37613	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	287.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	EPIDIDYMECTOMY (Anaes.)	215.85	244.65	Y
37616	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2008	VASOVASOSTOMY or VASOEPIDIDYMOSTOMY, unilateral, using operating microscope, not being a service associated with sperm harvesting for IVF (Anaes.) (Assist.)	539.55		Y
37619	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	287.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2008	VASOVASOSTOMY or VASOEPIDIDYMOSTOMY, unilateral, not being a service associated with sperm harvesting for IVF (Anaes.) (Assist.)	215.85	244.65	Y
37623	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	239.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2002	VASOTOMY OR VASECTOMY, unilateral or bilateral NOTE:Strict legal requirements apply in relation to sterilisation procedures on minors.Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law.Observe the explanatory note before submitting a claim. (Anaes.)	179.4	203.35	Y
37800	1/11/1994	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PATENT URACHUS, excision of, on a patient 10 years of age or over. (Anaes.) (Assist.)	406.8		Y
37801	1/09/2015	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	705.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	PATENT URACHUS, excision of, when performed on a patient under 10 years of age (Anaes.) (Assist.)	528.9		Y
37803	1/11/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	UNDESCENDED TESTIS, orchidopexy for, not being a service to which item 37806 applies, on a patient 10 years of age or over. (Anaes.) (Assist.)	406.8		Y
37804	1/09/2015	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	705.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	UNDESCENDED TESTIS, orchidopexy for, not being a service to which item 37807 applies, on apatient under 10 years of age (Anaes.) (Assist.)	528.9		Y
37806	1/11/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	626.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	UNDESCENDED TESTIS in inguinal canal close to deep inguinal ring or within abdominal cavity, orchidopexy for, on a patient 10 years of age or over (Anaes.) (Assist.)	470.05	538.8	Y
37807	1/09/2015	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/2015	1/07/2021	814.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	UNDESCENDED TESTIS in inguinal canal close to deep inguinal ring or within abdominal cavity, orchidopexy for, on a patient under 10 years of age (Anaes.) (Assist.)	611.05	726.8	Y
37809	1/11/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	626.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	UNDESCENDED TESTIS, revision orchidopexy for, on a patient 10 years of age or over. (Anaes.) (Assist.)	470.05		Y
37810	1/09/2015	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	814.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	UNDESCENDED TESTIS, revision orchidopexy for, on a patient under 10 years of age (Anaes.) (Assist.)	611.05		Y
37812	1/11/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	578.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	IMPALPABLE TESTIS, exploration of groin for, not being a service associated with a service to which items 37803, 37806 and 37809 applies, on a patient 10 years of age or over. (Anaes.) (Assist.)	433.9		Y
37813	1/09/2015	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	752.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	IMPALPABLE TESTIS, exploration of groin for, not being a service associated with a service to which items 37804, 37807 and 37810 applies, on a patient under 10 years of age (Anaes.) (Assist.)	564.05		Y
37815	1/11/1994	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	96.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, examination under anaesthesia with erection test on a patient 10 years of age or over. (Anaes.)	72.4		Y

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37816	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	125.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, examination under anaesthesia with erection test, on a patient under 10 years of age (Anaes.)	94.15	Y
37818	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	511.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, glanuloplasty incorporating meatal advancement, on a patient 10 years of age or over (Anaes.) (Assist.)	383.55	434.65 Y
37819	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	664.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, glanuloplasty incorporating meatal advancement, on a patient under 10 years of age (Anaes.) (Assist.)	498.6	576.9 Y
37821	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	866.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, distal, 1 stage repair, on a patient 10 years of age or over. (Anaes.) (Assist.)	650.2	Y
37822	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	1126.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, distal, 1 stage repair, on a patient under 10 years of age (Anaes.) (Assist.)	845.25	Y
37824	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1205.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, proximal, 1 stage repair, on a patient 10 years of age or over (Anaes.) (Assist.)	903.95	Y
37825	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	1566.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, proximal, 1 stage repair, on a patient under 10 years of age (Anaes.) (Assist.)	1175.15	Y
37827	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	555.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, staged repair, first stage, on a patient 10 years of age or over (Anaes.) (Assist.)	416.45	Y
37828	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	721.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, staged repair, first stage, on a patient under 10 years of age (Anaes.) (Assist.)	541.35	Y
37830	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	719.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, staged repair, second stage, on a patient 10 years of age or over (Anaes.) (Assist.)	539.55	631.5 Y
37831	1/11/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2015	1/07/2021	935.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	HYPOSPADIAS, staged repair, second stage, on a patient under 10 years of age (Anaes.) (Assist.)	701.55	847.45 Y
37833	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	343.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hypospadias, repair of urethral fistula, on patient 10 years of age or over (Anaes.) (Assist.)	257.55	Y
37834	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/08/2015	1/07/2021	446.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hypospadias, repair of urethral fistula, on a patient under 10 years of age (Anaes.) (Assist.)	334.8	Y
37836	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	723.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	EPISPADIAS, staged repair, first stage (Anaes.) (Assist.)	542.4	Y
37839	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	819.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	EPISPADIAS, staged repair, second stage (Anaes.) (Assist.)	614.65	Y
37842	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1591.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Exstrophy of bladder or epispadias, primary or secondary repair with or without bladder neck tightening, with or without ureteric reimplantation (Anaes.) (Assist.)	1193.3	Y
37845	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	723.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Congenital disorder of sexual differentiation with urogenital sinus, external genitoplasty, with or without endoscopy (Anaes.) (Assist.)	542.4	Y
37848	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1301.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Congenital disorder of sexual differentiation with urogenital sinus, external genitoplasty with endoscopy and vaginoplasty (Anaes.) (Assist.)	976.3	Y
37851	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	964.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Congenital disorder of sexual differentiation, vaginoplasty for, with or without endoscopy (Anaes.) (Assist.)	723.1	Y
37854	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	381.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Urethral valve, destruction of, including cystoscopy and urethroscopy (Anaes.)	286	Y
38200	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Right heart catheterisation with any one or more of the following: (a) fluoroscopy; (b) oximetry; (c) dye dilution curves; (d) cardiac output measurement by any method; (e) shunt detection; (f) exercise stress test; other than a service associated with a service to which item 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38254 or 38268 applies (Anaes.)	347.65	384 Y
38203	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	553.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Left heart catheterisation by percutaneous arterial puncture, arteriotomy or percutaneous left ventricular puncture, with any one or more of the following: (a) fluoroscopy; (b) oximetry; (c) dye dilution curves; (d) cardiac output measurements by any method; (e) shunt detection; (f) exercise stress test; other than a service associated with a service to which item 38200, 38206, 38244, 38247, 38248, 38249, 38251, 38252 or 38254 applies (Anaes.)	414.85	470.15 Y
38206	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	668.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Right heart catheterisation with left heart catheterisation via the right heart or by another procedure, with any one or more of the following: (a) fluoroscopy; (b) oximetry; (c) dye dilution curves; (d) cardiac output measurements by any method; (e) shunt detection; (f) exercise stress test; other than a service associated with a service to which item 38200, 38203, 38244, 38247, 38248, 38249, 38251, 38252 or 38254 applies (Anaes.)	501.55	580.8 Y
38209	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	858.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1996	CARDIAC ELECTROPHYSIOLOGICAL STUDYUp to and including 3 catheter investigation of any 1 or more oflyoscope, atrioventricular conduction, sinus node function or simple ventricular tachycardia studies, not being a service associated with a service to which item 38212 or 38213 applies (Anaes.)	643.95	770.7 Y
38212	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1428.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Cardiac electrophysiological study for: (a) the investigation of supraventricular tachycardia involving 4 or more catheters; or (b) complex tachycardia inductions; or (c) multiple catheter mapping; or (d) acute intravenous anti-arrhythmic drug testing with pre and post drug inductions; or (e) catheter ablation to intentionally induce complete atrioventricular block; or (f) intracaperative mapping; other than a service associated with a service to which item 38208 or 38213 applies (Anaes.)	1071.05	1283.15 Y
38213	1/11/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	425.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cardiac electrophysiological study, performed either: (a) during insertion of implantable defibrillator; or (b) for defibrillation threshold testing at a different time to implantation; other than a service associated with a service to which item 38208 or 38212 applies (Anaes.)	319	361.55 Y
38241	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	488.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Use of a coronary pressure wire, if the service is: (a) performed during selective coronary angiography, percutaneous angioplasty or transluminal insertion of one or more stents; and (b) to measure fractional flow reserve, non-hyperaemic pressure ratios or coronary flow reserve in intermediate coronary artery or graft lesions (stenosis of 50 to 70%); and (c) to determine whether revascularisation is appropriate, if previous functional imaging: (i) has not been performed; or (ii) has been performed but the results are inconclusive or do not apply to the vessel being interrogated; and (d) performed on one or more coronary vascular territories (Anaes.)	366.55	415.4 Y
38244	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	930	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (acute coronary syndrome)the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Selective coronary angiography: (a) for a patient who is eligible for the service under clause 5.10.17A; and (b) with placement of one or more catheters and injection of opaque material into native coronary arteries; and (c) with or without left heart catheterisation, left ventriculography or aortography; and (d) including all associated imaging; other than a service associated with a service to which 38200, 38203, 38206, 38247, 38248, 38249, 38251 or 38252 applies (Anaes.)	690	832.1 Y
38247	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1473.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (acute coronary syndrome - graft) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Selective coronary and graft angiography: (a) for a patient who is eligible for the service under clause 5.10.17A; and (b) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and (c) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and (d) with or without left heart catheterisation, left ventriculography or aortography; and (e) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38248, 38249, 38251 or 38252 applies (Anaes.)	1105.5	1386.05 Y
38248	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	930	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (stable coronary syndrome) the service only applies if the patient meets the requirements of the descriptor and the of Note: TR.8.3 and TR.8.5 Selective coronary angiography: (a) for a patient who is eligible for the service under clause 5.10.17B; and (b) as part of the management of the patient; and (c) with placement of catheters and injection of opaque material into native coronary arteries; and (d) with or without left heart catheterisation, left ventriculography or aortography; and (e) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38249, 38251 or 38252 applies—applicable each 3 months (Anaes.)	690	832.1 Y
38249	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1473.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (stable coronary syndrome - graft) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.3 and TR.8.5 Selective coronary and graft angiography: (a) for a patient who is eligible for the service under clause 5.10.17B; and (b) as part of the management of the patient; and (c) with placement of one or more catheters and injection of opaque material into native coronary arteries; and (d) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and (e) with or without left heart catheterisation, left ventriculography or aortography; and (f) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38251 or 38252 applies—applicable once each 3 months (Anaes.)	1105.5	1386.05 Y
38251	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	930	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: (pre-operative assessment) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.5 Selective coronary angiography: (a) for a symptomatic patient with valvular or other non-coronary structural heart disease; and (b) as part of the management of the patient for: (i) pre-operative assessment for planning non-coronary cardiac surgery, including by transcatheter approaches; or (ii) evaluation of valvular heart disease or other non-coronary structural heart disease where clinical impression is discordant with non-invasive assessment; and (c) with placement of catheters and injection of opaque material into native coronary arteries; and (d) with or without left heart catheterisation, left ventriculography or aortography; and (e) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249 or 38252 applies—applicable once each 12 months (Anaes.)	690	832.1 Y
38252	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1473.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: (pre-operative assessment - graft) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.5 Selective coronary and graft angiography: (a) For a symptomatic patient with valvular or other non-coronary structural heart disease; and (b) as part of the management of the patient for: (i) pre-operative assessment for planning non-coronary cardiac surgery, including by transcatheter approaches; or (ii) evaluation of valvular heart disease or other non-coronary structural heart disease where clinical impression is discordant with non-invasive assessment; and (c) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and (d) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and (e) with or without left heart catheterisation, left ventriculography or aortography; and (f) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249 or 38251 applies—applicable once each 12 months (Anaes.)	1105.5	1386.05 Y
38254	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Right heart catheterisation: (a) performed at the same time as a service to which item 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313 or 38314 applies; and (b) including any of the following (if performed): (i) fluoroscopy; (ii) oximetry; (iii) dye dilution curves; (iv) cardiac output measurement; (v) shunt detection; (vi) exercise stress test (Anaes.)	347.65	384 Y
38256	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	278.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	TEMPORARY TRANSVENOUS PACEMAKING ELECTRODE, insertion of (Anaes.)	208.6	236.4 Y
38270	1/05/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	949.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	BALLOON VALVULOPLASTY OR ISOLATED ATRIAL SEPTOSTOMY, including cardiac catheterisations before and after balloon dilatation (Anaes.) (Assist.)	711.95	861.35 Y

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38272	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	949.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Atrial septal defect or patent foramen closure: (a) for congenital heart disease in a patient with documented evidence of right heart overload or paradoxical embolism; and (b) using a septal occluder or similar device, by transcatheter approach; and (c) including right or left heart catheterisation (or both); other than a service associated with a service to which Item 38200, 38203, 38206 or 38254 applies (Anaes.) (Assist.)	711.95	861.35	Y
38273	1/07/2014	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2014	1/07/2021	949.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2014	Patent ductus arteriosus, transcatheter closure of, including cardiac catheterisation and any imaging associated with the service (Anaes.) (Assist.)	711.95		Y
38274	1/07/2014	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2014	1/07/2021	777.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ventricular septal defect, transcatheter closure of, with cardiac catheterisation, excluding imaging (H) (Anaes.) (Assist.)	583.2		Y
38275	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	310.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	MYOCARDIAL BIOPSY, by cardiac catheterisation (Anaes.)	232.7	263.75	Y
38276	1/11/2017	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	949.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Transcatheter occlusion of left atrial appendage, and cardiac catheterisation performed by the same practitioner, for stroke prevention in a patient who has non-valvular atrial fibrillation, if: (a) the patient is at increased risk of thromboembolism demonstrated by: (i) a prior stroke (whether of an ischaemic or unknown type), transient ischaemic attack or non-central nervous system systemic embolism; or (ii) at least 2 of the following risk factors: (A) an age of 65 years or more; (B) hypertension; (C) diabetes mellitus; (D) heart failure or left ventricular ejection fraction of 35% or less (or both); (E) vascular disease (prior myocardial infarction, peripheral artery disease or aortic plaque); and (b) the patient has an absolute and permanent contraindication to oral anticoagulation (confirmed by written documentation that is provided by a medical practitioner, independent of the practitioner rendering the service); and (c) the service is not associated with a service to which Item38200, 38203, 38206 or 38254 applies (H) (Anaes.) (Assist.)	711.95		Y
38285	1/11/2004	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	160.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Insertion of implantable ECG loop recorder, by a specialist or consultant physician, for the diagnosis of a primary disorder, including initial programming and testing, if: (a) the patient has recurrent unexplained syncope and does not have a structural heart defect associated with a high risk of sudden cardiac death; and (b) a diagnosis has not been achieved through all other available cardiac investigations; and (c) a neurogenic cause is not suspected (Anaes.)	120.45	136.5	Y
38286	1/11/2004	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	144.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of implantable ECG loop recorder (Anaes.)	108.45	122.95	Y
38287	1/07/1998	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	2183.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	ABLATION OF ARRHYTHMIA CIRCUIT OR FOCUS or isolation procedure involving 1 atrial chamber (Anaes.) (Assist.)	1637.7	2095.65	Y
38288	1/05/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2018	1/07/2021	200.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2018	Implantable loop recorder, insertion of, for diagnosis of atrial fibrillation, if: (a) the patient to whom the service is provided has been diagnosed as having had an embolic stroke of undetermined source; and (b) the bases of the diagnosis included the following: (i) the medical history of the patient; (ii) physical examination; (iii) brain and carotid imaging; (iv) cardiac imaging; (v) surface ECG testing including 24-hour Holter monitoring; and (c) atrial fibrillation is suspected; and (d) the patient: (i) does not have a permanent indication for oral anticoagulants; or (ii) does not have a permanent oral anticoagulants contraindication; including initial programming and testing (Anaes.)	150.6	170.65	Y
38290	1/07/1998	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2780.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	ABLATION OF ARRHYTHMIA CIRCUITS OR FOCUS or isolation procedure involving both atrial chambers and including curative procedures for atrial fibrillation (Anaes.) (Assist.)	2085.15		Y
38293	1/07/1998	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	2984.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	VENTRICULAR ARRHYTHMIA, with mapping and ablation, including all associated electrophysiological studies performed on the same day (Anaes.) (Assist.)	2238.2	2896.35	Y
38307	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1844.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: (acute coronary syndrome -1 coronary territory with selective coronary angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17A; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1383.45	1756.7	Y
38308	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2122.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note:(acute coronary syndrome -2 coronary territories with selective coronary angiography)the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17A; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d)performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1591.7	2034.35	Y
38309	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	1250.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Percutaneous transluminal rotational atherectomy of one or more coronary arteries, including all associated imaging, if: (a) the target stenosis within at least one coronary artery is heavily calcified and balloon angioplasty with or without stenting is not feasible without rotational atherectomy; and (b) the service is performed in conjunction with a service to which Item 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies Applicable only once on each occasion the service is performed (Anaes.) (Assist.)	938.05	1162.8	Y
38310	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2399.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (acute coronary syndrome -3 coronary territories with selective coronary angiography)the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17A; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1799.95	2312	Y
38311	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1844.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: (stablemulti-vessel disease-1 coronary territory with selective angiography)the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.4 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause S.10.17C for the service and a service to which Item 38314 applies; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 1 coronary vascular territory; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1383.45	1756.7	Y
38313	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2122.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: (stablemulti-vessel disease-2 coronary territories with selective angiography)the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.4 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause S.10.17C for the service and a service to which Item 38314 applies; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1591.7	2034.35	Y
38314	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2399.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: (stable multi-vessel disease - 3 coronary territory with selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.4 and TR.8.5Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17C; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1799.95	2312	Y
38316	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1648.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (acute coronary syndrome -1 coronary territory without selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17A; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on one coronary vascular territory; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	1236.75	1561.05	Y
38317	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2088.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (acute coronary syndrome -2 coronary territories without selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17A; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 3808, 3810, 3811, 3813, 3814, 3816, 3817, 3819, 3820, 3822 or 3823 applies (Anaes.) (Assist.)	1566.6	2000.9	Y
38319	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2366.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/07/2021	Note: (acute coronary syndrome -3 coronary territories without selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.2 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause S.10.17A; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 3808, 3810, 3811, 3813, 3814, 3816, 3817, 3819, 3820, 3822 or 3823 applies (Anaes.) (Assist.)	1774.85	2278.55	Y

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38320	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	1648.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Note: (stabilemulti-vessel disease-1 coronary territory without selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.4 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause 5.10.17C for the service and a service to which Item 38323 applies; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on one coronary vascular territory; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38322 or 38323 applies (Anaes.) (Assist.)	1236.75	1561.05	Y
38322	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2088.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Note: (stabilemulti-vessel disease-2 coronary territories with selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.4 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause 5.10.17C for the service and a service to which Item 38323 applies; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320 or 38323 applies (Anaes.) (Assist.)	1566.6	2000.9	Y
38323	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	2366.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Note: (stabilemulti-vessel disease-3 coronary territories with selective angiography) the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: TR.8.4 and TR.8.5 Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17C; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which Item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320 or 38322 applies (Anaes.) (Assist.)	1774.85	2278.55	Y
38350	1/11/2005	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	664.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2010	SINGLE CHAMBER PERMANENT TRANSVENOUS ELECTRODE, insertion, removal or replacement of, including cardiac electrophysiological services where used for pacemaker implantation (Anaes.)	498.45		Y
38353	1/11/2005	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	265.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2010	PERMANENT CARDIAC PACEMAKER, insertion, removal or replacement of, not for cardiac resynchronisation therapy, including cardiac electrophysiological services where used for pacemaker implantation (Anaes.)	199.35		Y
38356	1/11/2005	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	871.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2010	DUAL CHAMBER PERMANENT TRANSVENOUS ELECTRODES, insertion, removal or replacement of, including cardiac electrophysiological services where used for pacemaker implantation (Anaes.)	653.45		Y
38358	1/11/2005	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/01/2022	2984.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Extraction of one or more chronically implanted transvenous pacing or defibrillator leads, by percutaneous method, with locking stylets and snares, with extraction sheaths (if any), if: (a) the leads have been in place for more than 6 months and require removal; and (b) the service is performed: (i) in association with a service to which Item 61109 or 30509 applies; and (ii) by a specialist or consultant physician who has undergone the training to perform the service; and (iii) in a facility where cardiothoracic surgery is available and a thoracotomy can be performed immediately and without transfer; and (c) the service is performed by an interventional cardiologist—a cardiothoracic surgeon is in attendance during the service (H) (Anaes.) (Assist.)	2238.2		Y
38359	1/11/2005	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	139	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	PERICARDIUM, pericardiosis of (excluding aftercare) (Anaes.)	104.25	118.15	Y
38362	1/11/2005	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	400.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	INTRA-AORTIC BALLOON PUMP, percutaneous insertion of (Anaes.)	300.4	340.45	Y
38365	1/05/2006	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/05/2006	1/07/2021	265.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Insertion, removal or replacement of permanent cardiac synchronisation device, if the patient: (a) has all of the following: (i) chronic heart failure, classified as New York Heart Association class III or IV (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 130 ms; or (b) has all of the following: (i) chronic heart failure, classified as New York Heart Association class II (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 150 ms; other than a service associated with a service to which Item 38212 applies(H) (Anaes.) (Assist.)	199.35		Y
38368	1/05/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2006	1/07/2021	1274.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Insertion, removal or replacement of permanent transvenous left ventricular electrode, through the coronary sinus, for the purpose of cardiac resynchronisation therapy, including right heart catheterisation and any associated venograms, if the patient: (a) has all of the following: (i) chronic heart failure, classified as New York Heart Association class III or IV (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 130 ms; or (b) has all of the following: (i) chronic heart failure, classified as New York Heart Association class II (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 150 ms; other than a service associated with a service to which Item 35200, 38200 or 38212 applies (H) (Anaes.) (Assist.)	955.65		Y
38415	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	415.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	EMPYEMA, radical operation for, involving resection of rib (Anaes.) (Assist.)	311.7	353.25	Y
38416	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/2021	1/07/2021	586.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Endoscopic ultrasound guided fine needle aspiration biopsy or biopsies (endoscopy with ultrasound imaging) to obtain one or more specimens from either or both of the following: (a) mediastinal masses; (b) locoregional nodes to stage non-small cell lung carcinoma; other than a service associated with a service to which an item in Subgroup 1 of this Group, or item 38417 or 50054, applies (Anaes.)	439.65	498.25	Y
38417	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/2021	1/07/2021	586.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Endobronchial ultrasound guided biopsy or biopsies (bronchoscopy with ultrasound imaging, with or without associated fluoroscopic imaging) to obtain one or more specimens by: (a) transbronchial biopsy or biopsies of peripheral lung lesions; or (b) fine needle aspirations of one or more mediastinal masses; or (c) fine needle aspirations of locoregional nodes to stage non-small cell lung carcinoma; other than a service associated with a service to which an item in Subgroup 1 of this Group, item 38416, 38420 or 38423, or an item in Subgroup 15 of Group 13, applies (Anaes.)	439.65	498.25	Y
38418	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	997.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	THORACOTOMY, exploratory, with or without biopsy (Anaes.) (Assist.)	747.95		Y
38419	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/2021	1/07/2021	185.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Bronchoscopy, as an independent procedure (Anaes.)	138.95	157.5	Y
38420	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/2021	1/07/2021	244.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Bronchoscopy with one or more endobronchial biopsies or other diagnostic or therapeutic procedures (Anaes.)	183.45	207.95	Y
38421	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	554.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	THORACOTOMY, with pulmonary decortication (Anaes.) (Assist.)	1195.55		Y
38422	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/03/2021	1/07/2021	192.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Bronchus, removal of foreign body in (Anaes.) (Assist.)	287		Y
38423	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/2021	1/07/2021	247.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Fibreoptic bronchoscopy with one or more transbronchial lung biopsies, with or without bronchial or broncho-alveolar lavage, with or without the use of interventional imaging (Anaes.) (Assist.)	200.55	227.25	Y
38424	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2004	1/07/2021	997.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	THORACOTOMY, with pleurectomy or pleurodesis, OR ENUCLEATION OF HYDATID cysts (Anaes.) (Assist.)	747.95		Y
38425	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	628.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Endoscopic laser resection of endobronchial tumours for relief of obstruction including any associated endoscopic procedures (Anaes.) (Assist.)	471.6		Y
38426	1/03/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/03/2021	1/07/2021	471.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Trachea or bronchus, dilatation of stricture and endoscopic insertion of stent (Anaes.) (Assist.)	353.8		Y
38427	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1231.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	THORACOPLASTY (complete) - 3 or more ribs (Anaes.) (Assist.)	923.55		Y
38428	1/11/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2021	1/11/2021	256.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Bronchoscopy with dilatation of tracheal stricture (Anaes.)	192.4	218.05	Y
38430	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	634.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	THORACOPLASTY (in stages)each stage (Anaes.) (Assist.)	475.95		Y
38436	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	259.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2004	THORACOSCOPY, with or without division of pleural adhesions, including insertion of intercostal catheter where necessary, with or without biopsy (Anaes.)	194.9		Y
38438	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1594.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/1997	PNEUMONECTOMY or LOBECTOMY or SEGMENTECTOMY not being a service associated with a service to which Item 38418 applies (Anaes.) (Assist.)	1195.55		Y
38440	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1193.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	LUNG, wedge resection of (Anaes.) (Assist.)	895.3		Y
38441	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1888.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	RADICAL LOBECTOMY or PNEUMONECTOMY including resection of chest wall, diaphragm, pericardium, or formal mediastinal node dissection (Anaes.) (Assist.)	1416.6		Y
38446	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1231.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	THORACOTOMY or STERNOTOMY, for removal of thymus or mediastinal tumour (Anaes.) (Assist.)	923.55		Y
38447	1/07/1993	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1594.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	PERICARDIECTOMY via sternotomy or anterolateral thoracotomy without cardiopulmonary bypass (Anaes.) (Assist.)	1195.55		Y
38448	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	377.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	MEDIASTINUM, cervical exploration of, with or without biopsy (Anaes.) (Assist.)	283.35		Y
38449	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2230.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	PERICARDIECTOMY via sternotomy or anterolateral thoracotomy with cardiopulmonary bypass (Anaes.) (Assist.)	1672.55		Y
38450	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	891.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2005	PERICARDIUM, transthoracic open surgical drainage of (Anaes.) (Assist.)	668.55		Y
38452	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	596.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/06/2017	PERICARDIUM, subxiphoid open surgical drainage of (Anaes.) (Assist.)	447.75		Y
38453	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1790.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1992	TRACHEAL excision and repair without cardiopulmonary bypass (Anaes.) (Assist.)	1343		Y
38455	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2422	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	TRACHEAL EXCISION AND REPAIR OF, with cardiopulmonary bypass (Anaes.) (Assist.)	1816.5		Y
38456	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1594.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	INTRATHORACIC OPERATION on heart, lungs, great vessels, bronchial tree, oesophagus or mediastinum, or on more than 1 of these organs, not being a service to which another item in this Group applies (Anaes.) (Assist.)	1195.55		Y
38457	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1488.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	PECTUS EXCAVATUM or PECTUS CARINATUM, repair or radical correction of (Anaes.) (Assist.)	1116.15		Y
38458	1/07/1993	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	793.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	PECTUS EXCAVATUM, repair of, with implantation of subcutaneous prosthesis (Anaes.) (Assist.)	594.95		Y
38460	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	286.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	STERNAL WIRE OR WIRES, removal of (Anaes.)	214.95		Y

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38661	1/07/2021	ITable]	3	TB	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1490.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	TMVr, by transvenous or transeptal techniques, for permanent coaptation of mitral valve leaflets using one or more Mitraclips™, including intra-operative diagnostic imaging, if: (a) the patient has each of the following risk factors: (i) moderate to severe, or severe, symptomatic degenerative (primary) mitral valve regurgitation (grade 3+ or 4+); (ii) left ventricular ejection fraction of 30% or more; (iii) symptoms of mild, moderate or severe chronic heart failure (New York Heart Association class II, III or IV); and (b) as a result of a TMVr suitability case conference, the patient has been: (i) assessed as having an unacceptably high risk for surgical mitral valve replacement; and (ii) recommended as being suitable for the service; and (c) the service is performed: (i) by a cardiothoracic surgeon, or an interventional cardiologist, accredited by the TMVr accreditation committee to perform the service; and (ii) via transfemoral venous delivery, unless transfemoral venous delivery is contraindicated or not feasible; and (iii) in a hospital that is accredited by the TMVr accreditation committee as a suitable hospital for the service; and (d) a service to which this item, or Item38463, applies has not been provided to the patient in the previous 5 years (H) (Anaes.) (Assist.)	1117.7	Y
38662	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	339.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	STERNOTOMY WOUND, debridement of, not involving reopening of the mediastinum (Anaes.)	254.75	Y
38663	1/07/2021	ITable]	3	TB	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1490.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	TMVr, by transvenous or transeptal techniques, for permanent coaptation of mitral valve leaflets using one or more Mitraclips™, including intra-operative diagnostic imaging, if: (a) the patient has each of the following risk factors: (i) moderate to severe, or severe, symptomatic functional (secondary) mitral valve regurgitation (grade 3+ or 4+); (ii) left ventricular ejection fraction of 30% to 50%; (iii) left ventricular end systolic diameter of not more than 70mm; (iv) symptoms of mild, moderate or severe chronic heart failure (New York Heart Association class II, III or IV) that persist despite maximally tolerated guideline directed medical therapy; and (b) as a result of a TMVr suitability case conference, the patient has been: (i) assessed as having an unacceptably high risk for surgical mitral valve replacement; and (ii) recommended as being suitable for the service; and (c) the service is performed: (i) by a cardiothoracic surgeon, or an interventional cardiologist, accredited by the TMVr accreditation committee to perform the service; and (ii) via transfemoral venous delivery, unless transfemoral venous delivery is contraindicated or not feasible; and (iii) in a hospital that is accredited by the TMVr accreditation committee as a suitable hospital for the service; and (d) a service to which this item, or Item38463, applies has not been provided to the patient in the previous 5 years (H) (Anaes.) (Assist.)	1117.7	Y
38664	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	369.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	STERNOTOMY WOUND, debridement of, involving curettage of infected bone with or without removal of wires but not involving reopening of the mediastinum (Anaes.)	276.9	Y
38666	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	996.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	STERNUM, reopening on, for dehiscence or infection involving reopening of the mediastinum, with or without rewiring (Anaes.) (Assist.)	747.65	Y
38667	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	997.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Insertion, removal or replacement of permanent myocardial electrode, by open surgical approach, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	747.95	Y
38668	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1535.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	STERNUM AND MEDIASTINUM, reoperation for infection of, involving muscle advancement flaps or greater omentum (Anaes.) (Assist.)	1152	Y
38669	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1790.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	STERNUM AND MEDIASTINUM, reoperation for infection of, involving muscle advancement flaps and greater omentum (Anaes.) (Assist.)	1343	Y
38671	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1095.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Insertion of implantable defibrillator, including insertion of patches for the insertion of one or more transvenous endocardial leads, if the patient has one of the following: (a) a history of haemodynamically significant ventricular arrhythmias in the presence of structural heart disease; (b) documented high-risk generic cardiac disease; (c) ischaemic heart disease, with a left ventricular ejection fraction of less than 30% at least one month after experiencing a myocardial infarction and while using optimised medical therapy; (d) chronic heart failure, classified as New York Heart Association class III or IV, with a left ventricular ejection fraction of less than 35% (despite optimised medical therapy); other than a service to which Item 38212 applies (H) (Anaes.) (Assist.)	821.5	Y
38672	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	299.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Insertion, replacement or removal of implantable defibrillator generator, if the patient has one of the following: (a) a history of haemodynamically significant ventricular arrhythmias in the presence of structural heart disease; (b) documented high-risk generic cardiac disease; (c) ischaemic heart disease, with a left ventricular ejection fraction of less than 30% at least one month after experiencing a myocardial infarction and while on optimised medical therapy; (d) chronic heart failure, classified as New York Heart Association class II or III, with a left ventricular ejection fraction of less than 35% (despite optimised medical therapy); other than a service to which Item 38212 applies (H) (Anaes.) (Assist.)	224.65	Y
38674	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2257.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Repair, augmentation or replacement of branch pulmonary arteries—left or right (or both), with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1692.85	Y
38677	1/11/1995	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2084.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Valve annuloplasty with insertion of ring, other than: (a) a service to which Item 38516 or 38517 applies; or (b) a service associated with a service to which to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1563.45	Y
38684	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2112.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Aortic or pulmonary valve replacement with bioprosthesis or mechanical prosthesis, including retrograde cardioplegia (if performed), other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1584.15	Y
38685	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	850.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1995	MITRAL ANNULUS, reconstruction of, after decalcification, when performed in association with valve surgery (Anaes.) (Assist.)	637.65	Y
38687	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1790.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	MITRAL VALVE, open valviotomy of (Anaes.) (Assist.)	1343	Y
38690	1/11/1995	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	577	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Reconstruction and re-implantation of sub-valvular structures, if performed in conjunction with a service to which Item 38499 applies (H) (Anaes.) (Assist.)	432.75	Y
38693	1/11/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2036.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1998	OPERATIVE MANAGEMENT of acute infective endocarditis, in association with heart valve surgery (Anaes.) (Assist.)	1527.7	Y
38695	1/11/2017	ITable]	3	TB	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	A	1/03/2022	1/07/2021	1490.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2022	TAVI, for the treatment of symptomatic severe aortic stenosis, performed via transfemoral delivery, unless transfemoral delivery is contraindicated or not feasible, if: the TAVI patient is at high risk for surgery; and the service: (i) is performed by a TAVI Practitioner in a TAVI Hospital ; and (ii) includes all intraoperative diagnostic imaging that the TAVI Practitioner performs upon the TAVI Patient; not being a service which has been rendered within 5 years of a service to which this item or 38514 applies (H) (Anaes.) (Assist.)	1117.7	Y
38699	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2112.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Mitral or tricuspid valve replacement with bioprothesis or mechanical prosthesis, including retrograde cardioplegia (if performed), other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1584.15	Y
38702	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2458.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Coronary artery bypass, including cardiopulmonary bypass, with or without retrograde cardioplegia, with or without vein grafts, and including at least one of the following: (a) harvesting of left internal mammary artery and vein graft material; (b) harvesting of left internal mammary artery; (c) harvesting of vein graft material; other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applied(H) (Anaes.) (Assist.)	1838.7	Y
38508	1/11/1995	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1966.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Repair or reconstruction of left ventricular aneurysm, including plication, resection and primary and patch repairs, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1497.15	Y
38509	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2485.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Repair of ischaemic ventricular septal rupture, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1864.1	Y
38510	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	648.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Artery harvesting (other than of the left internal mammary), for coronary artery bypass, if: (a) more than one arterial graft is required; and (b) the service is performed in conjunction with a service to which Item 38502 applies (H) (Anaes.) (Assist.)	486.95	Y
38511	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	624.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Coronary artery bypass, with the aid of tissue stabilisers, if the service is performed: (a) without cardiopulmonary bypass; and (b) in conjunction with a service to which Item 38502 applies (H) (Anaes.) (Assist.)	468.25	Y
38512	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2183.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Division of accessory pathway, isolation procedure, procedure on atrioventricular node or perinodal tissues involving one atrial chamber only, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1637.7	Y
38513	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1040.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Creation of graft anastomosis, including Y-graft, T-graft and graft-to-graft extensions, with micro-arterial or micro-venous anastomosis using microsurgical techniques, if the service is performed in conjunction with a service to which Item 38502 applies (H) (Anaes.) (Assist.)	780.45	Y
38514	1/03/2022	ITable]	3	TB	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	1490.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2022	TAVI, for the treatment of symptomatic severe aortic stenosis, performed via transfemoral delivery, unless transfemoral delivery is contraindicated or not feasible, if: the TAVI patient is at intermediate risk for surgery; and the service: is performed by a TAVI practitioner in a TAVI Hospital; and includes all intraoperative diagnostic imaging that the TAVI Practitioner performs upon the TAVI Patient; not being a service which has been rendered within 5 years of a service to which this item or 38495 applies (H) (Anaes.) (Assist.)	1117.7	Y
38515	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2760.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Division of accessory pathway, isolation procedure, procedure on atrioventricular node or perinodal tissues involving both atrial chambers and including curative surgery for atrial fibrillation, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2085.15	Y
38516	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2509.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Simple valve repair: (a) with or without annuloplasty; and (b) including quadrangular resection, cleft closure or affixt; and (c) including retrograde cardioplegia (if performed); other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1881.95	Y
38517	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	3055.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Complex valve repair: (a) with or without annuloplasty; and (b) including retrograde cardioplegia (if performed); and (c) including one of the following: (i) neochords; (ii) chordal transfer; (iii) patch augmentation; (iv) multiple leaflets; other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies(H) (Anaes.) (Assist.)	2291.9	Y
38518	1/11/1992	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2984.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Ventricular arrhythmia with mapping and muscle ablation, with or without aneurysmectomy, other than a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2238.2	Y
38519	1/07/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1100	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Valve explant of a previous prosthesis, if performed during open cardiac surgery, not being a service associated with a service to which Item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	825	Y

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38550	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2337.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Repair or replacement of ascending thoracic aorta: (a) including: (i) cardiopulmonary bypass; and (ii) retrograde cardioplegia (if performed); and (b) not including valve replacement or repair or implantation of coronary arteries; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1753.15	Y
38553	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2942.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Repair or replacement of ascending thoracic aorta: (a) including: (i) aortic valve replacement or repair; and (i) cardiopulmonary bypass; and (ii) retrograde cardioplegia (if performed); and (b) not including implantation of coronary arteries; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2207.2	Y
38554	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	4236.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Valve sparing aortic root surgery, with reimplantation of aortic valve and coronary arteries and replacement of the ascending aorta, including cardiopulmonary bypass, and including retrograde cardioplegia (if performed), other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	3177.35	Y
38555	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	3374	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Simple replacement or repair of aortic arch, performed in conjunction with a service to which item 38550, 38553, 38554, 38556, 38568 or 38571 applies, including: (a) deep hypothermic circulatory arrest; and (b) peripheral cannulation for cardiopulmonary bypass; and (c) antegrade or retrograde cerebral perfusion (if performed); other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38603, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2530.5	Y
38556	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3230.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Repair or replacement of ascending thoracic aorta, including: (a) aortic valve replacement or repair; and (b) implantation of coronary arteries; and (c) cardiopulmonary bypass; and (d) retrograde cardioplegia (if performed); other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38603, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2423.9	Y
38557	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	3894.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Complex replacement or repair of aortic arch, performed in conjunction with a service to which item 38550, 38553, 38554, 38556 or 38571 applies, including: (a) debranching and reimplantation of head and neck vessels; and (b) deep hypothermic circulatory arrest; and (c) peripheral cannulation for cardiopulmonary bypass; and (d) antegrade or retrograde cerebral perfusion (if performed); other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2920.75	Y
38558	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	5083.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Aortic repair involving augmentation of hypoplastic or interrupted aortic arch, if: (a) the patient is a neonate; and (b) the service includes: (i) the use of antegrade cerebral perfusion or deep hypothermic circulatory arrest and associated myocardial preservation; and (ii) retrograde cardioplegic; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	3812.8	Y
38568	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1938.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Repair or replacement of descending thoracic aorta, without shunt or cardiopulmonary bypass, by open exposure, percutaneous or endovascular means, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1453.85	Y
38571	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2209.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Repair or replacement of descending thoracic aorta, with shunt or cardiopulmonary bypass, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1657.25	Y
38572	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2067.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Operative management of aortic rupture or dissection, if the service: (a) is performed in conjunction with a service to which item 38550, 38553, 38554, 38555, 38556, 38557, 38558, 38568, 38571, 38706 or 38709 applies; and (b) is not associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1550.7	Y
38600	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1594.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	CENTRAL CANNULATION for cardiopulmonary bypass excluding post-operative management, not being a service associated with a service to which another item in this Subgroup applies (Anaes.) (Assist.)	1195.55	Y
38603	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	997.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Peripheral cannulation for cardiopulmonary bypass, excluding post-operative management, other than a service: (a) in which peripheral cannulation is used in preference to central cannulation for valve or coronary bypass procedures; or (b) associated with a service to which item 38555 or 38572 applies (H) (Anaes.) (Assist.)	747.95	Y
38609	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	498.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Insertion of intra-aortic balloon pump, by arteriotomy, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies(H) (Anaes.) (Assist.)	373.95	Y
38612	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	558.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Removal of intra-aortic balloon pump, with closure of artery by direct suture, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies(H) (Anaes.) (Assist.)	419.2	Y
38615	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1594.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Insertion of a left or right ventricular assist device, for use as: (a) a bridge to cardiac transplantation in patients with refractory heart failure who are: (i) currently on a heart transplant waiting list, or (ii)expected to be suitable candidates for cardiac transplantation following a period of support on the ventricularassist device; or (b) acute post cardiotomy support for failure to wean from cardiopulmonary transplantation; or (c)cardio-respiratory support for acute cardiac failure which is likely to recover with short term support of less than 6weeks; other than a service associated with a service to which: (d) item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies; or (e) another item in this Schedule applies if the service described in the item is for the use of a ventricular assist device as destination therapy in the management of a patient with heart failure who is not expected to be a suitable candidate for cardiac transplantation (H) (Anaes.) (Assist.)	1195.55	Y
38618	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1986.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Insertion of a left and right ventricular assist device, for use as: (a)a bridge to cardiac transplantation in patients with refractory heart failure who are: (i)currently on a heart transplant waiting list, or (ii)expected to be suitable candidates for cardiac transplantation following a period of support on the ventricular assist device; or (b)acute post cardiotomy support for failure to wean from cardiopulmonary transplantation; or (c)cardio-respiratory support for acute cardiac failure which is likely to recover with short term support of less than 6 weeks; other than a service associated with a service to which: (d) item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies; or (e) another item in this Schedule applies if the service described in the item is for the use of a ventricular assist device as destination therapy in the management of a patient with heart failure who is not expected to be a suitable candidate for cardiac transplantation (H) (Anaes.) (Assist.)	1490.25	Y
38621	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	794.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	LEFT OR RIGHT VENTRICULAR ASSIST DEVICE, removal of, as an independent procedure, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38627, 38806 or 45503 applies (H) (Anaes.) (Assist.)	594.95	Y
38624	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	892.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	LEFT AND RIGHT VENTRICULAR ASSIST DEVICE, removal of, as an independent procedure, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38627, 38806 or 45503 applies (H) (Anaes.) (Assist.)	668.55	Y
38627	1/07/1998	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	695.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	EXTRA-CORPOREAL MEMBRANE OXYGENATION, BYPASS OR VENTRICULAR ASSIST DEVICE CANNULAE, adjustment and re-positioning of, by open operation, in patients supported by these devices, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38627, 38806 or 45503 applies (H) (Anaes.) (Assist.)	522.55	Y
38637	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	577	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	PATENT DISEASED coronary artery bypass vein graft or grafts, dissection, disconnection and oversewing of, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	432.75	Y
38643	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1567.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Thoracotomy or sternotomy, by any procedure: (a) including any division of adhesions if the time taken to divide the adhesions exceeds 30 minutes; and (b) other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1175.75	Y
38653	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2090.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Open heart surgery, other than a service: (a) to which another item in this Group applies; or (b) associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1567.9	Y
38656	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	997.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	THORACOTOMY or median sternotomy for post-operative bleeding, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	747.95	Y
38670	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1986.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	CARDIAC TUMOUR, excision of, involving the wall of the atrium or inter-atrial septum, without patch or conduit reconstruction, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1489.95	Y
38673	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2235.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	CARDIAC TUMOUR, excision of, involving the wall of the atrium or inter-atrial septum, requiring reconstruction with patch or conduit, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1677	Y
38677	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2091.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	CARDIAC TUMOUR arising from ventricular myocardium, partial thickness excision of, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1568.85	Y
38680	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2481.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	CARDIAC TUMOUR arising from ventricular myocardium, full thickness excision of including repair or reconstruction, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1860.9	Y
38700	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1110.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	PATENT DUCTUS ARTERIOSUS, shunt, collateral or other single large vessel, division or ligation of, without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	833	Y
38703	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2008.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Patent ductus arteriosus, shunt, collateral or other single large vessel, division or ligation of, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1506.65	Y
38706	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1896.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	AORTA, anastomosis or repair of, without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1422.15	Y
38709	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2235.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Anastomosis or repair of aorta, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1676.6	Y
38715	1/11/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1775.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	MAIN PULMONARY ARTERY, banding, debanding or repair of, without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1331.6	Y

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38718	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2245.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Banding, debanding or repair of main pulmonary artery, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies(H) (Anaes.) (Assist.)	1684.3	Y
38721	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1556.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	VENA CAVA, anastomosis or repair of, without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1167.35	Y
38724	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2264.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Vena cava, anastomosis or repair of, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1698.45	Y
38727	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1556.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/08/2021	Anastomosis or repair of intrathoracic vessels, without cardiopulmonary bypass, performed as a primary procedure, other than a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38700, 38703, 38706, 38709, 38715, 38718, 38721, 38724, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1167.35	Y
38730	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Anastomosis or repair of intrathoracic vessels, with cardiopulmonary bypass, performed as a primary procedure, other than a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38700, 38703, 38706, 38709, 38715, 38718, 38721, 38724, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38733	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1556.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	SYSTEMIC PULMONARY or CAVO-PULMONARY SHUNT, creation of, without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1167.35	Y
38736	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	SYSTEMIC PULMONARY or CAVO-PULMONARY SHUNT, creation of, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38739	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2036.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Atrial septectomy, with or without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1527.45	Y
38742	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2002.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Atrial septal defect, closure by open exposure and direct suture or patch, for congenital heart disease in a patient with documented evidence of right heart overload or paradoxical embolism, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1501.55	Y
38745	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	INTRA-ATRIAL BAFFLE, insertion of, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38748	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	VENTRICULAR SEPTECTOMY, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38751	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ventricular septal defect, closure by direct suture or patch, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38754	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2780.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	INTRAVENTRICULAR BAFFLE OR CONDUIT, insertion of, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2085.15	Y
38757	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	EXTRACARDIAC CONDUIT, insertion of, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38760	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	EXTRACARDIAC CONDUIT, replacement of, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38764	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ventricular myectomy, for relief of right or left ventricular obstruction, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38766	1/11/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2221	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	VENTRICULAR AUGMENTATION, right or left, for congenital heart disease, other than a service associated with a service to which item11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1665.75	Y
38800	1/11/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	40.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	THORACIC CAVITY, aspiration of, for diagnostic purposes, not being a service associated with a service to which item 38803 applies	30.05	34.05
38803	1/11/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	80	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	THORACIC CAVITY, aspiration of, with therapeutic drainage (paracentesis), with or without diagnostic sample	60	68
38806	1/11/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	139	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	INTERCOSTAL DRAIN, insertion of, not involving resection of rib (excluding aftercare) (Anaes.)	104.25	118.15 Y
38809	1/11/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	171.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	INTERCOSTAL DRAIN, insertion of, with pleurodesis and not involving resection of rib (excluding aftercare) (Anaes.)	128.45	145.6 Y
38812	1/11/2005	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	217.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	PERCUTANEOUS NEEDLE BIOPSY of lung (Anaes.)	163.25	185.05 Y
39000	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	78.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1991	LUMBAR PUNCTURE (Anaes.)	58.8	66.6 Y
39007	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	165.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Procedure to obtain access to intracranial space (including subdural space, ventricle or basal cistern), percutaneously or by burr-hole (Anaes.)	124.45	141.05 Y
39013	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	113.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Injection of one or more zygo-apophyseal or costo-transverse joints with one or more of contrast media, local anaesthetic or corticosteroid under image guidance (Anaes.)	85.2	96.55 Y
39014	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/2022	1/03/2022	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Medial branch block of one or more primary posterior rami, injection of an anaesthetic agent under image guidance (Anaes.)	97.45	110.45 Y
39015	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Intracranial parenchymal pressure monitoring device, insertion of—including burr hole (excluding after care) (Anaes.)	293.45	Y
39018	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	645.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cerebrospinal reservoir, ventricular reservoir or external ventricular drain, insertion of, with or without stereotaxy (Anaes.) (Assist.)	645.15	Y
39100	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	187.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Injection of primary branch of trigeminal nerve (ophthalmic, maxillary or mandibular branches) with alcohol, cortisone, phenol, or similar neurolytic substance, under image guidance (Anaes.)	185.4	210.15 Y
39109	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1475.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Trigeminal ganglistomy by radiofrequency, balloon or glycerol, including stereotaxy (Anaes.) (Assist.)	1306.1	1387.15 Y
39110	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	Y	N	Y	N	N	N	C	1/03/2022	1/03/2022	279.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	11/04/2022	Left lumbar percutaneous zygapophyseal joint denervation by radio-frequency probe, or cryoprobe, using radiological imaging control Applicable to one or more services provided in a single attendance, for not more than 3 attendances in a 12 month period (Anaes.)	209.2	237.1 Y
39111	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	Y	N	Y	N	N	N	C	1/03/2022	1/03/2022	279.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	11/04/2022	Right lumbar percutaneous zygapophyseal joint denervation by radio-frequency probe, or cryoprobe, using radiological imaging control Applicable to one or more services provided in a single attendance, for not more than 3 attendances in a 12 month period (Anaes.)	209.2	237.1 Y
39113	1/11/2020	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	2474.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Cranial nerve, neurectomy or intracranial decompression of, using microsurgical techniques, including stereotaxy and cranioplasty (Anaes.) (Assist.)	1855.85	Y
39116	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	Y	N	Y	N	N	N	C	1/03/2022	1/03/2022	309.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	11/04/2022	Left thoracic percutaneous zygapophyseal joint denervation by radio-frequency probe or cryoprobe using radiological imaging control Applicable to one or more services provided in a single attendance, for not more than 3 attendances in a 12 month period (Anaes.)	232.45	263.45 Y
39117	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	Y	N	Y	N	N	N	C	1/03/2022	1/03/2022	309.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	11/04/2022	Right thoracic percutaneous zygapophyseal joint denervation by radio-frequency probe, or cryoprobe, using radiological imaging control Applicable to one or more services provided in a single attendance, for not more than 3 attendances in a 12 month period (Anaes.)	232.45	263.45 Y
39118	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	Y	N	Y	N	N	N	C	1/12/1991	1/03/2022	340.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	11/04/2022	Left cervical percutaneous zygapophyseal joint denervation by radio-frequency probe, or cryoprobe, using radiological imaging control Applicable to one or more services provided in a single attendance, for not more than 3 attendances in a 12 month period (Anaes.)	255.7	289.8 Y
39119	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	Y	N	Y	N	N	N	C	1/03/2022	1/03/2022	340.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	11/04/2022	Right cervical percutaneous zygapophyseal joint denervation by radio-frequency probe, or cryoprobe, using radiological imaging control Applicable to one or more services provided in a single attendance, for not more than 3 attendances in a 12 month period (Anaes.)	255.7	289.8 Y
39121	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	657.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PERCUTANEOUS CORDOTOMY (Anaes.) (Assist.)	493.05	569.45 Y
39124	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1682.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	CORDOTOMY OR MYELOTOMY, partial or total laminectomy for, or operation for dorsal root entry zone (Drez) lesion (Anaes.) (Assist.)	1261.75	Y
39125	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	310.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Spinal catheter, insertion or replacement of, and connection to a subcutaneous implanted infusion pump, for the management of chronic pain, including cancer pain (H) (Anaes.) (Assist.)	232.6	Y
39126	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	376.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	All of the following:(a) infusion pump, subcutaneous implantation or replacement of;(b) connection of the pump to a spinal catheter;(c) filling of reservoir with a therapeutic agent or agents;with or without programming the pump, for the management of chronic pain, including cancer pain (H) (Anaes.) (Assist.)	282.45	Y
39127	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	492.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Subcutaneous reservoir and spinal catheter, insertion of, for the management of chronic pain, including cancer pain (H) (Anaes.)	369.65	Y
39128	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	686.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	All of the following:(a) infusion pump, subcutaneous implantation of;(b) spinal catheter, insertion of;(c) connection of pump to catheter;(d) filling of reservoir with a therapeutic agent or agents;with or without programming the pump, for the management of chronic pain, including cancer pain (H) (Anaes.) (Assist.)	515	Y
39129	1/03/2022	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	631.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Peripheral lead or leads, percutaneous placement of, including intraoperative test stimulation, for the management of chronic neuropathic pain or pain from refractory angina pectoris (H) (Anaes.) (Assist.)	473.5	Y
39130	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	701.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Epidural lead or leads, percutaneous placement of, including intraoperative test stimulation, for the management of chronic neuropathic pain or pain from refractory angina pectoris (H) (Anaes.) (Assist.)	526.1	Y
39131	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/1993	1/07/2021	133	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Epidural or peripheral nerve electrodes (management, adjustment, or reprogramming of neurostimulator), with a medical practitioner attending, for the management of chronic neuropathic pain or pain from refractory angina pectoris—each day	99.75	113.05

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39133	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	165.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Either:(a) subcutaneously implanted infusion pump, removal of; or(b) spinal catheter, removal or repositioning of;for the management of chronic pain, including cancer pain (H) (Anaes.)	124.45		Y
39134	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	354.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Neurostimulator or receiver, subcutaneous placement of, including placement and connection of extension wires to epidural or peripheral nerve electrodes, for the management of chronic neuropathic pain or pain from refractory angina pectoris (H) (Anaes.) (Assist.)	265.8		Y
39135	1/11/2004	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	165.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Neurostimulator or receiver that was inserted for the management of chronic neuropathic pain or pain from refractory angina pectoris, open surgical removal of, performed in the operating theatre of a hospital (H) (Anaes.) (Assist.)	124.45		Y
39136	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	165.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Epidural or peripheral nerve lead that was implanted for the management of chronic neuropathic pain or pain from refractory angina pectoris, open surgical removal of, performed in the operating theatre of a hospital (H) (Anaes.) (Assist.)	124.45		Y
39137	1/11/2004	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	629.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Epidural or peripheral nerve lead that was implanted for the management of chronic neuropathic pain or pain from refractory angina pectoris, open surgical repositioning of, to correct displacement or unsatisfactory positioning, including intraoperative test stimulation, other than a service to which item 39130, 39138 or 39139 applies (H) (Anaes.) (Assist.)	472.45		Y
39138	1/11/2004	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	701.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Peripheral nerve lead or leads, surgical placement of, including intraoperative test stimulation, for the management of chronic neuropathic pain where the leads are intended to remain in situ long term (H) (Anaes.) (Assist.)	526.1		Y
39139	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	941.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Epidural lead, surgical placement of one or more of by partial or total laminectomy, including intraoperative test stimulation, for the management of chronic neuropathic pain or pain from refractory angina pectoris (H) (Anaes.) (Assist.)	706.35		Y
39140	1/05/1997	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	304.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/1997	EPIDURAL CATHETER, insertion of, under imaging control, with epidurogram and epidural therapeutic injection for lysis of adhesions (Anaes.)	228.55	259	Y
39300	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	367.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve, digital or cutaneous, primary repair of, using microsurgical techniques, other than a service associated with a service to which item 39330 applies—applicable once per nerve (H) (Anaes.) (Assist.)	275.8		Y
39303	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve, digital or cutaneous, delayed repair of, using microsurgical techniques, including either or both of the following (if performed): (a) neurolysis; (b) transposition of nerve to facilitate repair; other than a service associated with a service to which item 30022 applies—applicable once per nerve (H) (Anaes.) (Assist.)	363.75		Y
39306	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	704.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve trunk, primary repair of, using microsurgical techniques, other than a service associated with a service to which item 39330 applies (H) (Anaes.) (Assist.)	528.2		Y
39307	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	857.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Reconstruction of nerve trunk using biological or synthetic nerve conduit, using microsurgical techniques, other than a service associated with a service to which item 39330 applies (Anaes.) (Assist.)	643.2	769.65	Y
39309	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	743.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve trunk, delayed repair of, using microsurgical techniques, including either or both of the following (if performed): (a) neurolysis; (b) transposition of nerve or nerve transfer to facilitate repair; other than a service associated with a service to which item 30023 or 39321 applies (H) (Anaes.) (Assist.)	557.55		Y
39312	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	414.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve trunk, internal neurolysis or, neurolysis of, using microsurgical techniques, other than a service associated with a service to which item30023 applies (H) (Anaes.) (Assist.)	311.05		Y
39315	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1071.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve trunk, nerve graft to, by cable graft, using microsurgical techniques, including any of the following (if performed): (a) harvesting of nerve graft; (b) proximal and distal anastomosis of nerve graft; (c) transposition of nerve to facilitate grafting; (d) neurolysis; other than a service associated with a service to which item 30023 or 39330 applies (H) (Anaes.) (Assist.)	804		Y
39318	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	665.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Nerve, digital or cutaneous, nerve graft to, using microsurgical techniques, including either or both of the following (if performed): (a) harvesting of nerve graft from separate donor site; (b) proximal and distal anastomosis of nerve graft; other than a service associated with a service to which item 39330 applies (H) (Anaes.) (Assist.)	498.9		Y
39319	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	485	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Reconstruction of digital or cutaneous nerve using biological or synthetic nerve conduit, using microsurgical techniques, other than a service associated with a service to which item 39330 applies (Anaes.) (Assist.)	363.75	412.25	Y
39321	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	492.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	15/07/2021	Transposition of nerve, excluding the ulnar nerve at the elbow, other than a service associated with a service to which item 39330 applies (H) (Anaes.) (Assist.)	369.65		Y
39323	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Percutaneous denervation (excluding medial branch nerve) by cryotherapy or radiofrequency probe, other than a service to which another item applies, applicable not more than 6 times for a given nerve in a 12 month period (Anaes.)	216	244.8	Y
39324	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Neurectomy or removal of tumour or neuroma from superficial peripheral nerve (Anaes.) (Assist.)	216	244.8	Y
39327	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	492.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	NEURECTOMY, NEUROTOMY or removal of tumour from deep peripheral or cranial nerve, by open operation, not being a service to which item 45575, 45576, 45578 or 45579 applies (Anaes.) (Assist.)	369.75		Y
39328	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	492.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Neurectomy, neurotomy or removal of tumour from deep peripheral nerve, by open operation, for upper limb surgery (H) (Anaes.) (Assist.)	369.75		Y
39329	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	367.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Extensive neurolysis of radial, median or ulnar nerve trunk nerve in the forearm or arm, other than a service associated with a service to which item 30022, 30303, 39309, 39312, 39315, 39318, 39324, 39327 or 39330 applies (Anaes.) (Assist.)	275.8	312.55	Y
39330	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Neurolysis by open operation without transposition, other than a service associated with a service to which item 30023, 39321, 39328, 39329, 39332, 39336, 39339, 39342, 39345, 49774 or 49775 applies (H) (Anaes.) (Assist.)	216		Y
39331	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Carpal tunnel release, including division of transverse carpal ligament or release of median nerve, by any method, including either or both of the following (if performed): (a) synovectomy; (b) neurolysis Other than a service associated with a service to which item 30023 or 46339 applies (Anaes.) (Assist.)	216	244.8	Y
39332	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	438.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of carpal tunnel release, including division of transverse carpal ligament or release of median nerve, by any method, including either or both of the following (if performed): (a) synovectomy; (b) neurolysis; other than a service associated with a service to which item 30023 or 46339 applies. (Anaes.) (Assist.)	324.05	367.25	Y
39333	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	414.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	BRACHIAL PLEXUS, exploration of, not being a service to which another item in this Group applies (Anaes.) (Assist.)	311.05	352.5	Y
39336	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Ulnar nerve decompression at elbow or wrist (cubital tunnel or Guyon's canal) without transposition, by any method, including neurolysis (if performed), other than a service associated with a service to which item 30023 applies (Anaes.) (Assist.)	216	244.8	Y
39339	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	438.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of ulnar nerve decompression at elbow (cubital tunnel) without transposition, by any method, including neurolysis (if performed); other than a service associated with a service to which item 30023 applies (Anaes.) (Assist.)	324.05	367.25	Y
39342	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	566.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Ulnar nerve decompression at elbow (cubital tunnel), including any of the following (if performed): (a) associated transposition; (b) subcutaneous or submuscular transposition of the nerve; (c) medial epicondylectomy; (d) osteotomy and reconstruction of the flexor origin; (e) neurolysis; other than a service associated with a service to which item 30023 applies (Anaes.) (Assist.)	425.1	481.75	Y
39345	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Localised decompression of radial, median or ulnar nerve, or branches of, in the forearm for compressive neuropathy, including neurolysis (if performed), other than a service associated with a service to which item 30023 applies (Anaes.) (Assist.)	216	244.8	Y
39503	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	993.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Facio-hypoglossal nerve or facio-accessory nerve, anastomosis of (Anaes.) (Assist.)	745.3		Y
39604	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	1866.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Any of the following procedures for intracranial haemorrhage or swelling:(a) craniotomy, craniectomy or burr-holes for removal of intracranial haemorrhage, including stereotaxy;(b) craniotomy or craniectomy for brain swelling, stroke, or raised intracranial pressure, including for subtemporal decompression, including stereotaxy; or(c) post-operative re-opening, including for swelling or post-operative cerebrospinal fluid leak. (Anaes.) (Assist.)	1399.7		Y
39610	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	993.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Fractured skull, without brain laceration or dural penetration, repair of (Anaes.) (Assist.)	745.3		Y
39612	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1165.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Fractured skull, with brain laceration or dural penetration but without cerebrospinal fluid, rhinorrhoea or otorrhoea, repair of (Anaes.) (Assist.)	874.45		Y
39615	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1989.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Fractured skull, after trauma, with cerebrospinal fluid rhinorrhoea or otorrhoea, repair of, including stereotaxy and dermofat graft (Anaes.) (Assist.)	1492.15		Y
39638	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	4429.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Anterior or middle cranial fossa or cavernous sinus, tumour or vascular lesion, removal or radical excision of, including stereotaxy and cranioplasty—conjoint surgery, principal surgeon (Anaes.) (Assist.)	3322.25		Y
39639	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	3539.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Anterior or middle cranial fossa or cavernous sinus, tumour or vascular lesion, removal or radical excision of, including stereotaxy and cranioplasty—conjoint surgery, co-surgeon (Assist.)	2654.85		
39641	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	4672.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Anterior or middle cranial fossa or cavernous sinus, tumour or vascular lesion, removal or radical excision of, including stereotaxy and craniopasty - one surgeon (Anaes.) (Assist.)	3504.15		Y
39651	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	5764.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Petro-clival, clival or foramen magnum tumour or vascular lesion, removal or radical excision of, including stereotaxy and craniopasty - one surgeon (Anaes.) (Assist.)	4323.2		Y
39654	1/07/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	4429.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Petro-clival, clival or foramen magnum tumour or vascular lesion, removal or radical excision of, including stereotaxy and craniopasty—conjoint surgery, principal surgeon (Anaes.) (Assist.)	3322.25		Y
39656	1/07/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3539.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Petro-clival, clival or foramen magnum tumour or vascular lesion, removal or radical excision of, including stereotaxy and craniopasty—conjoint surgery, co-surgeon (Assist.)	2654.85		
39700	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1885.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Skull tumour, benign or malignant, excision of, including stereotaxy and cranioplasty (Anaes.) (Assist.)	1414.35		Y
39703	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1514.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Intracranial tumour, cyst or other brain tissue, either or both of: (a) burr hole and biopsy of; (b) drainage of; including stereotaxy (Anaes.) (Assist.)	1135.65		Y
39710	1/11/2020	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	2521.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Intracranial tumour, one or more, biopsy, drainage, decompression or removal of, through a single craniotomy, including stereotaxy and craniopasty (Anaes.) (Assist.)	1891.2		Y

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39712	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3851.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Transcranial tumour removal or biopsy of one or more of any of the following: (a) meningioma; (b) pinealoma; (c) craniopharyngioma; (d) pituitary tumour; (e) intraventricular lesion; (f) brain stem lesion; (g) any other intracranial tumour; by any means (with or without endoscopy), through a single craniotomy, including stereotaxy and cranioplasty (Anaes.) (Assist.)	2888.75		Y
39715	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2811.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Pituitary tumour, removal of, by transphenoidal approach, including stereotaxy and dermis, dermofat or fascia grafting, other than a service associated with a service to which item 40600 applies (Anaes.) (Assist.)	2108.3		Y
39718	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1698.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Arachnoidal cyst, craniotomy for, including stereotaxy and neuroendoscopy (Anaes.) (Assist.)	1273.55		Y
39720	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	3603.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Awake craniotomy for functional neurosurgery (Anaes.) (Assist.)	2702.4		Y
39801	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	5764.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Aneurysm, clipping, proximal ligation, or reinforcement of sac, including stereotaxy and cranioplasty (Anaes.) (Assist.)	4323.2		Y
39803	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	5764.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial arteriovenous malformation or fistula, treatment through a craniotomy, including stereotaxy, cranioplasty and all angiography (Anaes.) (Assist.)	4323.2		Y
39815	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1901.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	CAROTID-CAVERNOUS FISTULA, obliteration of - combined cervical and intracranial procedure (Anaes.) (Assist.)	1426	1813.4	Y
39818	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2523.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial vascular bypass using indirect techniques, including stereotaxy (Anaes.) (Assist.)	1892.6		Y
39821	1/07/1995	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3595.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial vascular bypass using direct anastomosis techniques, including stereotaxy (Anaes.) (Assist.)	2696.55		Y
39900	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1514.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial infection, treated by burr hole, including stereotaxy, other than a service associated with a service to which item 40600 applies (Anaes.) (Assist.)	1135.65		Y
39903	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2273.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial infection, treated by craniotomy, including stereotaxy, other than a service associated with a service to which item 40600 applies (Anaes.) (Assist.)	1704.9		Y
39906	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	829.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Osteomyelitis of skull or removal of infected bone flap, craniectomy for, other than a service associated with a service to which item 40600 applies (Anaes.) (Assist.)	622.05		Y
40004	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	1721.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Ventricular, lumbar or cisternal shunt diversion, insertion or revision of, including stereotaxy (Anaes.) (Assist.)	1291.15		Y
40012	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1780.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Endoscopic ventriculostomy for treatment of cerebrospinal fluid circulation disorders, including stereotaxy (Anaes.) (Assist.)	1335.15		Y
40018	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	165.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LUMBAR CEREBROSPINAL FLUID DRAIN, insertion of (Anaes.)	124.45	141.05	Y
40104	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	1056.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Spinal myelomeningocele or spinal meningocele, excision and closure of, other than a service associated with a service to which item40600 applies (Anaes.) (Assist.)	792.3		Y
40106	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2507.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Chiari malformation, decompression for, including laminectomy, dermofat graft and stereotaxy, other than a service associated with a service to which item 40600 applies (Anaes.) (Assist.)	1880.85		Y
40109	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1946.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Encephalocoele or cranial meningocele, excision and closure of, including stereotaxy and dermofat graft (Anaes.) (Assist.)	1459.8		Y
40112	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2486.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Tethered cord, release of, including lipomeningocele or diastematomyelia, multiple levels, including laminectomy or hemilaminectomy, other than a service associated with a service to which item 40600 applies (Anaes.) (Assist.)	1864.8		Y
40119	1/11/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	993.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Craniosynostosis, operation for, other than a service associated with a service to which item40600 applies (Anaes.) (Assist.)	745.3		Y
40600	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	993.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Cephaloplasty, reconstructive, other than a service associated with a service to which item39113, 39638, 39639, 39641, 39651, 39654, 39656, 39700, 39710, 39712, 39715, 39801, 39803 or 40703 applies (Anaes.) (Assist.)	745.3		Y
40700	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2437.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Corpus callosotomy, for epilepsy, including stereotaxy (Anaes.) (Assist.)	1828.1		Y
40701	1/11/2017	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	354.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Vagus nerve stimulation therapy through stimulation of the left vagus nerve, subcutaneous placement of electrical pulse generator, for: (a) management of refractory generalised epilepsy; or (b) treatment of refractory focal epilepsy not suitable for resective epilepsy surgery (Anaes.) (Assist.)	265.8		Y
40702	1/11/2017	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	165.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Vagus nerve stimulation therapy through stimulation of the left vagus nerve, surgical repositioning or removal of electrical pulse generator inserted for: (a) management of refractory generalised epilepsy; or (b) treatment of refractory focal epilepsy not suitable for resective epilepsy surgery (Anaes.) (Assist.)	124.45		Y
40703	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2521.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Corticectomy, topectomy or partial lobectomy, for epilepsy, including stereotaxy and cranioplasty (Anaes.) (Assist.)	1891.2		Y
40704	1/11/2017	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	701.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Vagus nerve stimulation therapy through stimulation of the left vagus nerve, surgical placement of lead, including connection of lead to left vagus nerve and intra-operative test stimulation, for: (a) management of refractory generalised epilepsy; or (b) treatment of refractory focal epilepsy not suitable for resective epilepsy surgery (Anaes.) (Assist.)	526.1		Y
40705	1/11/2017	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	629.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Vagus nerve stimulation therapy through stimulation of the left vagus nerve, surgical repositioning or removal of lead attached to left vagus nerve for: (a) management of refractory generalised epilepsy; or (b) treatment of refractory focal epilepsy not suitable for resective epilepsy surgery (Anaes.) (Assist.)	472.45		Y
40706	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	3603.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Hemispherectomy or functional hemispherectomy, for intractable epilepsy, including stereotaxy (Anaes.) (Assist.)	2702.45		Y
40707	1/11/2017	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2017	1/07/2021	197.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Vagus nerve stimulation therapy through stimulation of the left vagus nerve, electrical analysis and programming of vagus nerve stimulation therapy device using external wand, for: (a) management of refractory generalised epilepsy; or (b) treatment of refractory focal epilepsy not suitable for resective epilepsy surgery	148.05	167.8	
40708	1/11/2017	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2017	1/07/2021	354.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Vagus nerve stimulation therapy through stimulation of the left vagus nerve, surgical replacement of battery in electrical pulse generator inserted for: (a) management of refractory generalised epilepsy; or (b) treating refractory focal epilepsy not suitable for resective epilepsy surgery (Anaes.) (Assist.)	265.8		Y
40709	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1780.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial electrode placement by burr hole, including stereotaxy (Anaes.) (Assist.)	1335.65		Y
40712	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3603.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial electrode placement by craniotomy, single or multiple, including stereotactic EEG, including stereotaxy (Anaes.) (Assist.)	2702.45		Y
40801	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1816.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Functional stereotactic procedure including computer assisted anatomical localisation, physiological localisation, and lesion production, by any method, in the basal ganglia, brain stem or deep white matter tracts, other than a service associated with deep brain stimulation for Parkinson's disease, essential tremor or dystonia (Anaes.) (Assist.)	1362.45		Y
40803	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1244.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Intracranial stereotactic procedure by any method, other than: (a) a service to which item40801 applies; or (b) a service associated with a service to which item39018, 39109, 39113, 39604, 39615, 39638, 39639, 39641, 39651, 39654, 39656, 39700, 39710, 39712, 39715, 39718, 39720, 39801, 39803, 39818, 39821, 39900, 39903, 40004, 40012, 40106, 40109, 40700, 40703, 40706, 40709 or 40712 applies (Anaes.) (Assist.)	933.15	1156.25	Y
40850	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2356.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) functional stereotactic procedure including computer assisted anatomical localisation, physiological localisation including twist drill, burr hole craniotomy or craniectomy and insertion of electrodes for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability (Anaes.) (Assist.)	1767.15		Y
40851	5/05/2003	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	4123.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (bilateral) functional stereotactic procedure including computer assisted anatomical localisation, physiological localisation including twist drill, burr hole craniotomy or craniectomy and insertion of electrodes for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.) (Assist.)	3092.7		Y
40852	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	354.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) subcutaneous placement of neurostimulator receiver or pulse generator for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.) (Assist.)	265.8		Y
40854	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	547.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) revision or removal of brain electrode for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.)	410.8		Y
40856	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	265.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) removal or replacement of neurostimulator receiver or pulse generator for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.)	199.35		Y
40858	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	547.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) placement, removal or replacement of extension leadfor the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.)	410.8		Y
40860	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2106.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) target localisation incorporating anatomical and physiological techniques, including intra-operative clinical evaluation, for the insertion of a single neurostimulation wire for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.)	1578.5		Y
40862	1/02/2002	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	197.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	DEEP BRAIN STIMULATION (unilateral) electronic analysis and programming of neurostimulator pulse generator for the treatment of: Parkinson's disease where the patient's response to medical therapy is not sustained and is accompanied by unacceptable motor fluctuations; or Essential tremor or dystonia where the patient's symptoms cause severe disability. (Anaes.)	148.05	167.8	Y
40905	1/05/2004	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2020	1/07/2021	626.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2020	Craniotomy, performed by a neurosurgeon in conjunction with the correction of craniofacial abnormalities (Anaes.) (Assist.)	469.6		Y

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41500	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	85.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1996	EAR, foreign body (other than ventilating tube) in, removal of, other than by simple syringing (Anaes.)	64.35	72.95	Y
41501	1/11/2019	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2020	Examination of glottal cycles and vibratory characteristics of the vocal folds by a specialist in the practice of the specialist's specialty of otolaryngology using videostroboscopy, including capturing audio, video, frequency and intensity, for confirmation of diagnosis , or for confirmation of treatment effectiveness where there is failure to progress or respond as expected, for: dysphonia where non stroboscopic techniques of the visualising the larynx have failed to identify any frank abnormality of the vocal folds; or benign or malignant vocal fold lesions; or premalignant or malignant laryngeal lesions; or vocal fold motion impairment or glottal insufficiency; or evaluation of vocal fold function after treatment or phonosurgery other than a service associated with a service to which item 41764 applies or with a services associated with the administration of a general anaesthetic	144.85	164.15	
41503	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EAR, foreign body in, removal of, involving incision of external auditory canal (Anaes.)	188.35	211.2	Y
41506	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	149.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	AURAL POLYP, removal of (Anaes.)	112.4	127.4	Y
41509	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	169.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTERNAL AUDITORY MEATUS, surgical removal of keratosis obturans from, not being a service to which another item in this Group applies (Anaes.)	127.2	144.15	Y
41512	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	609.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MEATOPLASTY involving removal of cartilage or bone or both cartilage and bone, not being a service to which item 41515 applies (Anaes.) (Assist.)	457.25		Y
41515	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	400.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MEATOPLASTY involving removal of cartilage or bone or both cartilage and bone, being a service associated with a service to which item 41530, 41548, 41557, 41560 or 41563 applies (Anaes.) (Assist.)	300.1		Y
41518	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	966.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXTERNAL AUDITORY MEATUS, removal of EXOSTOSES IN (Anaes.) (Assist.)	724.8		Y
41521	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1028.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Correction of AUDITORY CANAL STENOSIS, including meatoplasty, with or without grafting (Anaes.) (Assist.)	771.7		Y
41524	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	297.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RECONSTRUCTION OF EXTERNAL AUDITORY CANAL, being a service associated with a service to which items 41557, 41560 and 41563 apply (Anaes.) (Assist.)	222.95		Y
41527	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MYRINGOPLASTY, transaural approach (Rosen incision) (Anaes.) (Assist.)	458.55		Y
41530	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	996.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MYRINGOPLASTY, postaural or endaural approach with or without mastoid inspection (Anaes.)	747.1		Y
41533	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1190.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ATTICOTOMY without reconstruction of the bony defect, with or without myringoplasty (Anaes.) (Assist.)	893		Y
41536	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1333.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ATTICOTOMY with reconstruction of the bony defect, with or without myringoplasty (Anaes.) (Assist.)	1000.25		Y
41539	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OSSICULAR CHAIN RECONSTRUCTION (Anaes.) (Assist.)	850.55		Y
41542	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1242.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OSSICULAR CHAIN RECONSTRUCTION AND MYRINGOPLASTY (Anaes.) (Assist.)	932		Y
41545	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MASTOIDECTOMY (CORTICAL) (Anaes.) (Assist.)	406.8		Y
41548	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	719.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OBLITERATION OF THE MASTOID CAVITY (Anaes.) (Assist.)	539.85		Y
41551	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1657.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MASTOIDECTOMY, intracapsular technique, with myringoplasty (Anaes.) (Assist.)	1243.25		Y
41554	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MASTOIDECTOMY, intracapsular technique, with myringoplasty and ossicular chain reconstruction (Anaes.) (Assist.)	1464.75		Y
41557	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MASTOIDECTOMY (RADICAL OR MODIFIED RADICAL) (Anaes.) (Assist.)	850.55		Y
41560	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1242.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MASTOIDECTOMY (RADICAL OR MODIFIED RADICAL) AND MYRINGOPLASTY (Anaes.)	932		Y
41563	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1528.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MASTOIDECTOMY (RADICAL OR MODIFIED RADICAL), MYRINGOPLASTY AND OSSICULAR CHAIN RECONSTRUCTION (Anaes.) (Assist.)	1153.75		Y
41564	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1889.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	MASTOIDECTOMY (RADICAL OR MODIFIED RADICAL), OBLITERATION OF THE MASTOID CAVITY, BLIND SAC CLOSURE OF EXTERNAL AUDITORY CANAL AND OBLITERATION OF EUSTACHIAN TUBE (Anaes.) (Assist.)	1492		Y
41566	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	REVISION OF MASTOIDECTOMY (radical, modified radical or intact wall), including myringoplasty (Anaes.) (Assist.)	850.55		Y
41569	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1242.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DECOMPRESSION OF FACIAL NERVE in its mastoid portion (Anaes.) (Assist.)	932		Y
41572	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1075.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LABYRINTHOTOMY OR DESTRUCTION OF LABYRINTH (Anaes.) (Assist.)	806.35		Y
41575	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2534.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CEREBELLOPONTINE ANGLE TUMOUR, removal of by 2 surgeons operating conjointly, by transmastoid, translabyrinthine or retromastoid approach transmastoid, translabyrinthine or retromastoid procedure (including aftercare) (Anaes.) (Assist.)	1900.8		Y
41576	1/11/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	3801.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	CEREBELLO - PONTINE ANGLE TUMOUR, removal of, by transmastoid, translabyrinthine or retromastoid approach - intracranial procedure (including aftercare) not being a service to which item 41578 or 41579 applies (Anaes.) (Assist.)	2851.25		Y
41578	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2534.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	CEREBELLOPONTINE ANGLE TUMOUR, removal of, by transmastoid, translabyrinthine or retromastoid approach, (intracranial procedure) - conjoint surgery, principal surgeon (Anaes.) (Assist.)	1900.8		Y
41579	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1900.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	CEREBELLO-PONTINE ANGLE TUMOUR, removal of, by transmastoid, translabyrinthine or retromastoid approach, (intracranial procedure) - conjoint surgery, co-surgeon (Assist.)	1425.6		
41581	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	2915.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	TUMOUR INVOLVING INFRA-TEMPORAL FOSSA, removal of, involving craniotomy and radical excision of (Anaes.) (Assist.)	2186.3		Y
41584	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2000.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PARTIAL TEMPORAL BONE RESECTION for removal of tumour involving mastoidectomy with or without decompression of facial nerve (Anaes.) (Assist.)	1500.45		Y
41587	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2724.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TOTAL TEMPORAL BONE RESECTION for removal of tumour (Anaes.) (Assist.)	2043.55		Y
41590	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1242.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ENDOLYMPHATIC SAC, TRANSMASTOID DECOMPRESSION with or without drainage of (Anaes.) (Assist.)	932		Y
41593	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1616.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TRANSLABYRINTHINE VESTIBULAR NERVE SECTION (Anaes.) (Assist.)	1214.7		Y
41596	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1810	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RETROLABYRINTHINE VESTIBULAR NERVE SECTION or COCHLEAR NERVE SECTION, or BOTH (Anaes.) (Assist.)	1357.5		Y
41599	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1810	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INTERNAL AUDITORY MEATUS, exploration by middle cranial fossa approach with cranial nerve decompression (Anaes.) (Assist.)	1357.5		Y
41603	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	OSSEO-INTEGRATION PROCEDURE - implantation of titanium fixture for use with implantable bone conduction hearing system device, in patients: -With a permanent or long term hearing loss; and -Unable to utilise conventional air or bone conduction hearing aid for medical or audiological reasons; and -With bone conduction thresholds that accord to recognised criteria for the implantable bone conduction hearing device being inserted. Not being a service associated with a service to which items 41554, 45794 or 45797 (Anaes.)	393.25	445.7	Y
41604	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	144.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	OSSEO-INTEGRATION PROCEDURE - fixation of transcutaneous abutment implantation of titanium fixture for use with implantable bone conduction hearing system device, in patients: -With a permanent or long term hearing loss; and -Unable to utilise conventional air or bone conduction hearing aid for medical or audiological reasons; and -With bone conduction thresholds that accord to recognised criteria for the implantable bone conduction hearing device being inserted. Not being a service associated with a service to which items 41554, 45794 or 45797 (Anaes.)	145.6	165	Y
41608	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	STAPEDECTOMY (Anaes.) (Assist.)	850.55		Y
41611	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	729.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	STAPES MOBILISATION (Anaes.) (Assist.)	547.3		Y
41614	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1134.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ROUND WINDOW SURGERY including repair of cochleotomy (Anaes.) (Assist.)	850.55	1046.15	Y
41615	1/05/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	1134.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1994	OVAL WINDOW SURGERY, including repair of fistula, not being a service associated with a service to which any other item in this Group applies (Anaes.) (Assist.)	850.55	1046.15	Y
41617	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1972	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	COCHLEAR IMPLANT, insertion of, including mastoidectomy (Anaes.) (Assist.)	1479		Y
41618	1/05/2017	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2017	1/07/2021	1953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Middle ear implant, partially implantable, insertion of, via mastoidectomy, for patients with: (a) stable sensorineural hearing loss; and (b) outer ear pathology that prevents the use of a conventional hearing aid; and (c) a PTA4 of less than 80 dBHL; and (d) bilateral, symmetrical hearing loss with PTA thresholds in both ears within 20 dBHL (0.5-4kHz) of each other; and (e) speech perception discrimination of at least 60% correct for word lists with appropriately amplified sound; and (f) a normal middle ear; and (g) normal tympanometry; and (h) on audiometry, an air-bone gap of less than 10 dBHL (0.5-4kHz) across all frequencies; and (i) no other inner ear disorders . (Anaes.) (Assist.)	1464.75		Y
41620	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	857.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GLOMUS TUMOUR, transtympanic removal of (Anaes.) (Assist.)	643.5		Y
41623	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1242.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GLOMUS TUMOUR, transmastoid removal of, including mastoidectomy (Anaes.) (Assist.)	932		Y
41626	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	149.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ABSCESS OR INFLAMMATION OF MIDDLE EAR, operation for (excluding aftercare) (Anaes.)	112.4	127.4	Y
41629	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MIDDLE EAR, EXPLORATION OF (Anaes.) (Assist.)	406.8		Y
41632	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MIDDLE EAR, insertion of tube for DRAINAGE OF (including myringotomy) (Anaes.)	186.35	211.2	Y
41635	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1190.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEARANCE OF MIDDLE EAR FOR GRANULOMA, CHOLESTEATOMA and POLYP, 1 or more, with or without myringoplasty (Anaes.) (Assist.)	893	1102.75	Y
41638	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1486.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEARANCE OF MIDDLE EAR FOR GRANULOMA, CHOLESTEATOMA and POLYP, 1 or more, with or without myringoplasty with ossicular chain reconstruction (Anaes.) (Assist.)	1114.65		Y
41641	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	49.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PERFORATION OF TYMPANUM, cauterisation or diathermy of (Anaes.)	37.05	41.95	Y
41644	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	148.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXCISION OF RIM OF EARDRUM PERFORATION, not being a service associated with myringoplasty (Anaes.)	111.5	126.4	Y
41647	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	114.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EAR TOILET requiring use of operating microscope and microinspection of tympanic membrane with or without general anaesthesia (Anaes.)	85.75	97.2	Y
41650	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	114.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TYMPANIC MEMBRANE, microinspection of 1 or both ears under general anaesthesia, not being a service associated with a service to which another item in this Group applies (Anaes.)	85.75	97.2	Y

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41653	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	74.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EXAMINATION OF NASAL CAVITY or POSTNASAL SPACE, or NASAL CAVITY AND POSTNASAL SPACE, UNDER GENERAL ANAESTHESIA, not being a service associated with a service to which another item in this Group applies (Anaes.)	56.15	63.65	Y
41656	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	127.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NASAL HAEMORRHAGE, POSTERIOR, ARREST OF, with posterior nasal packing with or without cauterisation and with or without anterior pack (excluding aftercare) (Anaes.)	95.85	108.65	Y
41659	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	80.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NOSE, removal of FOREIGN BODY IN, other than by simple probing (Anaes.)	60.55	68.6	Y
41662	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	85.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NASAL POLYP OR POLYPI (SIMPLE), removal of	64.35	72.95	
41668	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	228.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	NASAL POLYP OR POLYPI, removal of (Anaes.)	171.65		Y
41671	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NASAL SEPTUM, SEPTOPLASTY, SUBMUCOUS RESECTION or closure of septal perforation (Anaes.)	377.15		Y
41672	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	627.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	NASAL SEPTUM, reconstruction of (Anaes.) (Assist.)	470.5		Y
41674	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	104.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Cauterisation (other than by chemical means) or cauterisation by chemical means when performed under general anaesthesia or diathermy of septum or turbinates—one or more of these procedures (including any consultation on the same occasion) other than a service associated with another operation on the nose (Anaes.)	78.45	88.95	Y
41677	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	91.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	NASAL HAEMORRHAGE, arrest of during an episode of epistaxis by cauterisation or nasal cavity packing or both (Anaes.)	70.25	79.65	Y
41683	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIVISION OF NASAL ADHESIONS, with or without stenting not being a service associated with any other operation on the nose and not performed during the postoperative period of a nasal operation (Anaes.)	91.5	103.7	Y
41686	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	74.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DISLOCATION OF TURBINATE OR TURBINATES, 1 or both sides, not being a service associated with a service to which another item in this Group applies (Anaes.)	56.15	63.65	Y
41689	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	142.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TURBINECTOMY or turbinectomies, partial or total, unilateral (Anaes.)	106.55		Y
41692	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	185.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TURBINATES, submucous resection of, unilateral (Anaes.)	138.95		Y
41698	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	33.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY ANTRUM, PROOF PUNCTURE AND LAVAGE OF (Anaes.)	25.4	28.8	Y
41701	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	95.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY ANTRUM, proof puncture and lavage of, under general anaesthesia (requiring admission to hospital) not being a service associated with a service to which another item in this Group applies (Anaes.)	71.7		Y
41704	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	37.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY ANTRUM, LAVAGE OFeach attendance at which the procedure is performed, including any associated consultation (Anaes.)	28.35	32.15	Y
41707	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	466.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY ARTERY, transantral ligation of (Anaes.) (Assist.)	350.1		Y
41710	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTROSTOMY (RADICAL) (Anaes.) (Assist.)	406.8		Y
41713	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	631.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTROSTOMY (RADICAL) with transantral ethmoidectomy or transantral vidian neurectomy (Anaes.) (Assist.)	473.35		Y
41716	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTRUM, intranasal dissection, or removal of foreign body from (Anaes.) (Assist.)	230.8		Y
41719	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTRUM, drainage of through tooth socket (Anaes.)	91.8	104	Y
41722	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CHOANITRESTRICTA, plastic closure of (Anaes.) (Assist.)	458.55	523.5	Y
41725	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	466.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ETHMOIDAL ARTERY OR ARTERIES, transorbital ligation of (unilateral) (Anaes.) (Assist.)	350.1		Y
41728	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	933.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LATERAL RHINOTOMY with removal of tumour (Anaes.) (Assist.)	700.25		Y
41729	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	591.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	SCIRMOID OF NOSE, excision of, with intranasal extension (Anaes.) (Assist.)	443.8		Y
41731	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	808.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	FRONTONASAL ETHMOIDECTOMY by external approach with or without sphenoidectomy (Anaes.) (Assist.)	606.45		Y
41734	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1055.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RADICAL FRONTOETHMOIDECTOMY with osteoplastic flap (Anaes.) (Assist.)	791.35		Y
41737	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FRONTAL SINUS, OR ETHMOIDAL SINUSES ON THE ONE SIDE, intranasal operation on (Anaes.) (Assist.)	377.15		Y
41740	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	61.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FRONTAL SINUS, catheterisation of (Anaes.)	45.9		Y
41743	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	351.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FRONTAL SINUS, trephine of (Anaes.) (Assist.)	263.4		Y
41746	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	808.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FRONTAL SINUS, radical obliteration of (Anaes.) (Assist.)	606.45	720.7	Y
41749	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	631.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ETHMOIDAL SINUSES, external operation on (Anaes.) (Assist.)	473.35		Y
41752	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SPHENOIDAL SINUS, intranasal operation on (Anaes.) (Assist.)	230.8		Y
41755	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	EUSTACHIAN TUBE, catheterisation of (Anaes.)	36.3	41.15	Y
41764	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	127.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	NASENDOSCOPY or SINOSCOPY or FIBREOPTIC EXAMINATION of NASOPHARYNX and LARYNX, one or more of these procedures, unilateral or bilateral examination (Anaes.)	95.85	108.65	Y
41767	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	766.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	NASOPHARYNGEAL ANGIOFIBROMA, removal of (Anaes.) (Assist.)	575.2	679	Y
41770	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	729.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PHARYNGEAL POUCH, removal of, with or without cricopharyngeal myotomy (Anaes.) (Assist.)	547.3		Y
41773	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PHARYNGEAL POUCH, ENDOSCOPIC RESECTION OF (Dohlman's operation) (Anaes.) (Assist.)	458.55		Y
41776	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	609.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CRICOPHARYNGEAL MYOTOMY with or without inversion of pharyngeal pouch (Anaes.) (Assist.)	457.25		Y
41779	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	729.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PHARYNGOTOMY (lateral), with or without total excision of tongue (Anaes.) (Assist.)	547.3		Y
41782	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	990.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PARTIAL PHARYNGECTOMY via PHARYNGOTOMY (Anaes.) (Assist.)	743.05	902.8	Y
41785	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1229	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PARTIAL PHARYNGECTOMY via PHARYNGOTOMY with partial or total glossectomy (Anaes.) (Assist.)	921.75		Y
41786	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	366.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	UVULOPALATOPHARYNGOPLASTY, with or without tonsillectomy, by any means (Anaes.) (Assist.)	575.2		Y
41787	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	591.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	UVULECTOMY AND PARTIAL PALATECTOMY WITH LASER INCISION OF THE PALATE, with or without tonsillectomy, 1 or more stages, including any revision procedures within 12 months (Anaes.) (Assist.)	443.8	503.8	Y
41789	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tonsils or tonsils and adenoids, removal of, in a patient aged less than 12 years(including any examination of the postnasal space and nasopharynx and the infiltration of local anaesthetic), not being a service to which item 41764 applies (Anaes.)	230.8		Y
41793	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tonsils or tonsils and adenoids, removal of, in a patient 12 years of age or over (including any examination of the postnasal space and nasopharynx and the infiltration of local anaesthetic), not being a service to which item 41764 applies (Anaes.)	289.95		Y
41797	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	149.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TONSILS OR TONSILS AND ADENOIDS, ARREST OF HAEMORRHAGE requiring general anaesthesia, following removal of (Anaes.)	112.4		Y
41801	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	169.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Adenoids, removal of (including any examination of the postnasal space and nasopharynx and the infiltration of local anaesthetic), not being a service to which item 41764 applies (Anaes.)	127.2		Y
41804	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	91.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LINGUAL TONSIL OR LATERAL PHARYNGEAL BANDS, removal of (Anaes.)	70.25		Y
41807	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	72.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PERITONSILLAR ABSCESS (quinsy), incision of (Anaes.)	54.7	62	Y
41810	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	37.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	UVULOTOMY or UVULECTOMY (Anaes.)	27.8	31.5	Y
41813	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VALLECULAR OR PHARYNGEAL CYSTS, removal of (Anaes.) (Assist.)	278.1		Y
41816	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OESOPHAGOSCOPY (with rigid oesophagoscope) (Anaes.)	144.85	164.15	Y
41822	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OESOPHAGOSCOPY (with rigid oesophagoscope), with biopsy (Anaes.)	186.35		Y
41825	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OESOPHAGOSCOPY (with rigid oesophagoscope), with removal of foreign body (Anaes.) (Assist.)	278.1		Y
41828	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	54.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	OESOPHAGEAL STRICTURE, dilatation of, without oesophagoscopy (Anaes.)	40.8	46.2	Y
41831	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	371.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Oesophagus, endoscopic pneumatic dilatation of,for treatment of achalasia (Anaes.) (Assist.)	278.6	315.75	Y
41832	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	237.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	OESOPHAGUS, balloon dilatation of, using interventional imaging techniques (Anaes.)	178.35	202.1	Y
41834	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1341.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LARYNGECTOMY (TOTAL) (Anaes.) (Assist.)	1006.05		Y
41837	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1286.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VERTICAL HEMILARYNGECTOMY including tracheostomy (Anaes.) (Assist.)	964.65		Y
41840	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1581.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUPRAGLOTTIC LARYNGECTOMY including tracheostomy (Anaes.) (Assist.)	1186.05		Y
41843	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1390.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LARYNGOPHARYNGECTOMY or PRIMARY RESTORATION OF ALIMENTARY CONTINUITY after laryngopharyngectomy USING STOMACH OR BOWEL (Anaes.) (Assist.)	1042.95		Y
41855	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	299.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MICROLARYNGOSCOPY (Anaes.) (Assist.)	224.9		Y
41858	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	514.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MICROLARYNGOSCOPY with removal of juvenile papillomata (Anaes.) (Assist.)	385.65		Y
41861	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	628.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	MICROLARYNGOSCOPY with removal of benign lesions of the larynx by laser surgery (Anaes.) (Assist.)	471.6		Y
41864	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	424	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MICROLARYNGOSCOPY WITH REMOVAL OF TUMOUR (Anaes.) (Assist.)	318		Y
41867	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	638.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MICROLARYNGOSCOPY with arytenoidectomy (Anaes.) (Assist.)	478.7		Y
41868	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	404.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	LARYNGEAL WEB, division of, using microlaryngoscopic techniques (Anaes.)	303.3		Y
41870	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	473.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1997	INJECTION OF VOCAL CORD BY TEFLON, FAT, COLLAGEN OR GELFOAM (Anaes.) (Assist.)	355		Y
41873	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LARYNX, FRACTURED, operation for (Anaes.) (Assist.)	458.55	523.5	Y

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41876	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	611.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LARYNX, external operation on, OR LARYNGOFISSURE with or without cordectomy (Anaes.) (Assist.)	458.55	523.5	Y
41879	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	990.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LARYNGOPLASTY or TRACHEOPLASTY, including tracheostomy (Anaes.) (Assist.)	743.05		Y
41880	23/11/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	264.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/1999	TRACHEOSTOMY by a percutaneous technique using sequential dilatation or partial splitting method to allow insertion of a cuffed tracheostomy tube (Anaes.)	198.3		Y
41881	1/07/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	418.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/1999	TRACHEOSTOMY by open exposure of the trachea, including separation of the strap muscles or division of the thyroid isthmus, where performed (Anaes.) (Assist.)	313.55		Y
41884	1/07/1995	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	94.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2014	CRICOTHYROSTOMY by direct stab or Seldinger technique, using mini tracheostomy device (Anaes.)	71.1		Y
41885	1/07/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	299.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	TRACHE-OESOPHAGEAL FISTULA, formation of, as a secondary procedure following laryngectomy, including associated endoscopic procedures (Anaes.) (Assist.)	224.7	254.65	Y
41886	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	185.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	TRACHEA, removal of foreign body in (Anaes.)	138.95	157.5	Y
41907	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	127.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	NASAL SEPTUM BUTTON, insertion of (Anaes.)	95.85	108.65	Y
41910	1/07/1993	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	406.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	DUCT OF MAJOR SALIVARY GLAND, transposition of (Anaes.) (Assist.)	304.55		Y
42503	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	106.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	OPHTHALMOLOGICAL EXAMINATION under general anaesthesia, not being a service associated with a service to which another item in this Group applies (Anaes.)	80		Y
42504	1/05/2020	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/05/2020	1/07/2021	312.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Glaucoma, implantation of a micro-bypass surgery stent system into the trabecular meshwork, if: (a) conservative therapies have failed, are likely to fail, or are contraindicated; and (b) the service is performed by a specialist with training that is recognised by the Conjoint Committee for the Recognition of Training in Micro-Bypass Glaucoma Surgery (Anaes.)	234.75	266.05	Y
42505	1/11/2018	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	C	1/11/2018	1/07/2021	312.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/02/2019	Complete removal from the eye of a trans-trabecular drainage device or devices, with or without replacement, following device related medical complications necessitating complete removal. (Anaes.)	234.75	266.05	Y
42506	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	500.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	EYE, ENUCLEATION OF, with or without sphere implant (Anaes.) (Assist.)	375.6	425.65	Y
42509	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	633.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	EYE, ENUCLEATION OF, with insertion of integrated implant (Anaes.) (Assist.)	475.35		Y
42510	1/05/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	730.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	EYE, enucleation of, with insertion of hydroxy apatite implant or similar coralline implant (Anaes.) (Assist.)	547.9		Y
42512	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	500.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	GLOBE, EVISCERATION OF (Anaes.) (Assist.)	375.6	425.65	Y
42515	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	633.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	GLOBE, EVISCERATION OF, AND INSERTION OF INTRASCLERAL BALL OR CARTILAGE (Anaes.) (Assist.)	475.35		Y
42518	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	367.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1996	ANOPHTHALMIC ORBIT, INSERTION OF CARTILAGE OR ARTIFICIAL IMPLANT as a delayed procedure, or REMOVAL OF IMPLANT FROM SOCKET, or PLACEMENT OF A MOTILITY INTEGRATING PEG by drilling into an existing orbital implant (Anaes.) (Assist.)	275.8		Y
42521	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1251.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ANOPHTHALMIC SOCKET, reconstruct, by insertion of a wired-in conformer, integrated implant or dermofat graft, as a secondary procedure (Anaes.) (Assist.)	939		Y
42524	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	212.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ORBIT, SKIN GRAFT TO, as a delayed procedure (Anaes.)	159.65	180.95	Y
42527	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	422.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	COMPLETE SOCKET RECONSTRUCTION INCLUDING MUCOUS MEMBRANE GRAFTING AND STENT MOULD (Anaes.) (Assist.)	316.9		Y
42530	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	657.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ORBIT, EXPLORATION with or without biopsy, requiring REMOVAL OF BONE (Anaes.) (Assist.)	493.05		Y
42533	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	422.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ORBIT, EXPLORATION OF, with drainage or biopsy not requiring removal of bone (Anaes.) (Assist.)	316.9		Y
42536	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	868.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ORBIT, EXENTERATION OF, with or without skin graft and with or without temporalis muscle transplant (Anaes.) (Assist.)	651.3		Y
42539	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1236.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ORBIT, EXPLORATION OF, with removal of tumour or foreign body, requiring removal of bone (Anaes.) (Assist.)	927.3		Y
42542	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	524.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	ORBIT, exploration of anterior aspect with removal of tumour or foreign body (Anaes.) (Assist.)	393.25		Y
42543	1/07/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	919.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	ORBIT, exploration of retrobulbar aspect with removal of tumour or foreign body (Anaes.) (Assist.)	689.75		Y
42545	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1330.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	ORBIT, decompression of, for dysthyroid eye disease, by fenestration of 2 or more walls, or by the removal of intraorbital periburbar and retrobulbar fat from each quadrant of the orbit, 1 eye (Anaes.) (Assist.)	997.65		Y
42548	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	790.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	OPTIC NERVE MENINGES, incision of (Anaes.) (Assist.)	592.65		Y
42551	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	657.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	EYE, PENETRATING WOUND OR RUPTURE OF, not involving intraocular structures repair involving suture of cornea or sclera, or both, not being a service to which item 42632 applies (Anaes.) (Assist.)	493.05	569.45	Y
42554	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	766.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2012	EYE, PENETRATING WOUND OR RUPTURE OF, with incarceration or prolapse of uveal tissue repair (Anaes.) (Assist.)	575.2		Y
42557	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1071.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2012	EYE, PENETRATING WOUND OR RUPTURE OF, with incarceration of lens or vitreous repair (Anaes.) (Assist.)	804		Y
42563	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	540	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2012	INTRAOCULAR FOREIGN BODY, removal from anterior segment (Anaes.) (Assist.)	405	459	Y
42569	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1071.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2012	INTRAOCULAR FOREIGN BODY, removal from posterior segment (Anaes.) (Assist.)	804		Y
42572	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ORBITAL ABSCESS OR CYST, drainage of (Anaes.)	91.65	103.85	Y
42573	1/11/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	236.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	DERMOID, periorbital, excision of, on a patient 10 years of age or over (Anaes.)	177.5	201.2	Y
42574	1/11/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	502.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1994	DERMOID, orbital, excision of (Anaes.) (Assist.)	377.15	427.45	Y
42575	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	86.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	TARSAL CYST, extirpation of (Anaes.)	64.55	73.15	Y
42576	1/09/2015	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/2015	1/07/2021	347.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	DERMOID, periorbital, excision of, on a patient under 10 years of age (Anaes.)	230.8	261.55	Y
42581	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	ECTROPION OR ENTROPION, tarsal cauterisation of (Anaes.)	91.65	103.85	Y
42584	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TARSORRHAPHY (Anaes.) (Assist.)	216	244.8	Y
42587	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	54.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	TRICHIASIS (due to causes other than trachoma), treatment of by cryotherapy, laser or electrolysis - each eyelid (Anaes.)	40.6	46	Y
42588	1/11/2018	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	54.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	TRICHIASIS (due to trachoma), treatment of by cryotherapy, laser or electrolysis - each eyelid (Anaes.)	40.6	46	Y
42590	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	352.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CANTHOPLASTY, medial or lateral (Anaes.) (Assist.)	264.05	299.25	Y
42593	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	212.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LACRIMAL GLAND, excision of palpebral lobe (Anaes.)	159.65		Y
42596	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	524.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LACRIMAL SAC, excision of, or operation on (Anaes.) (Assist.)	393.25	445.7	Y
42599	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	657.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LACRIMAL CANALICULAR SYSTEM, establishment of patency by closed operation using silicone tubes or similar, 1 eye (Anaes.) (Assist.)	493.05	569.45	Y
42602	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	657.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LACRIMAL CANALICULAR SYSTEM, establishment of patency by open operation, 1 eye (Anaes.) (Assist.)	493.05	569.45	Y
42605	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	485	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LACRIMAL CANALICULUS, immediate repair of (Anaes.) (Assist.)	363.75	412.25	Y
42608	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	LACRIMAL DRAINAGE by insertion of glass tube, as an independent procedure (Anaes.) (Assist.)	234.75	266.05	Y
42610	1/05/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	100.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	NASOLACRIMAL TUBE (unilateral), removal or replacement of, or LACRIMAL PASSAGES, probing for obstruction, unilateral, with or without lavage - under general anaesthesia (Anaes.)	75.15	85.15	Y
42611	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	150.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1998	NASOLACRIMAL TUBE (bilateral), removal or replacement of, or LACRIMAL PASSAGES, probing for obstruction, bilateral, with or without lavage - under general anaesthesia (Anaes.)	112.65	127.7	Y
42614	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	50.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	NASOLACRIMAL TUBE (unilateral), removal or replacement of, or LACRIMAL PASSAGES, probing to establish patency of the lacrimal passage and/or site of obstruction, unilateral, including lavage, not being a service associated with a service to which item 42610 applies (excluding aftercare)	37.7	42.75	
42615	1/05/1994	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/1994	1/07/2021	75.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	NASOLACRIMAL TUBE (bilateral), removal or replacement of, or LACRIMAL PASSAGES, probing to establish patency of the lacrimal passage and/or site of obstruction, bilateral, including lavage, not being a service associated with a service to which item 42611 applies (excluding aftercare)	56.4	63.9	
42617	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	142.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PUNCTUM SNIP operation (Anaes.)	106.9	121.15	Y
42620	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	54.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	PUNCTUM, occlusion of, by use of a plug (Anaes.)	41.1	46.6	Y
42622	1/11/1996	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	86.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1996	PUNCTUM, permanent occlusion of, by use of electrical cautery (Anaes.)	64.55	73.15	Y
42623	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	727.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	DACRYOCYSTORHINOSTOMY (Anaes.) (Assist.)	545.85		Y
42626	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1171.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	DACRYOCYSTORHINOSTOMY where a previous dacryocystorhinostomy has been performed (Anaes.) (Assist.)	880.35	1085.85	Y
42629	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	884.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	CONJUNCTIVORHINOSTOMY including dacryocystorhinostomy and fashioning of conjunctival flaps (Anaes.) (Assist.)	663.15		Y
42632	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	CONJUNCTIVAL PERITOMY OR REPAIR OF CORNEAL LACERATION by conjunctival flap (Anaes.)	91.65	103.85	Y
42635	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CORNEAL PERFORATIONS, sealing of, with tissue adhesive (Anaes.) (Assist.)	234.75	266.05	Y
42638	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	391.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	CONJUNCTIVAL GRAFT OVER CORNEA (Anaes.) (Assist.)	293.45	332.6	Y
42641	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	508.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	AUTOCONJUNCTIVAL TRANSPLANT, or mucous membrane graft (Anaes.) (Assist.)	381.45	432.3	Y

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42644	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	75.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	CORNEA OR SCLERA, complete removal of embedded foreign body from - not more than once on the same day by the same practitioner (excluding aftercare) (Anaes.)	56.3	63.8	Y
42647	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	212.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CORNEAL SCARS, removal of, by partial keratectomy, not being a service associated with a service to which item 42686 applies (Anaes.)	159.65	180.95	Y
42650	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	75.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CORNEA, epithelial debridement for corneal ulcer or corneal erosion (excluding aftercare) (Anaes.)	56.3	63.8	Y
42651	1/07/1998	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	167.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	CORNEA, epithelial debridement for eliminating band keratopathy (Anaes.)	125.5	142.25	Y
42652	1/05/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2018	1/07/2021	1248.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Corneal collagen cross linking, on a patient with a corneal ectatic disorder, with evidence of progression—per eye (Anaes.)	936.5	1160.75	Y
42653	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1360.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2014	CORNEA transplantation of (Anaes.) (Assist.)	1020.6		Y
42656	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1727.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	CORNEA, transplantation of, second and subsequent procedures (Anaes.) (Assist.)	1362.85		Y
42662	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	938.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SCLERA, transplantation of, full thickness, including collection of donor material (Anaes.) (Assist.)	704.15		Y
42665	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	626.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SCLERA, transplantation of, superficial or lamellar, including collection of donor material (Anaes.) (Assist.)	469.55	538.15	Y
42667	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	147.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	RUNNING CORNEAL SUTURE, manipulation of, performed within 4 months of corneal grafting, to reduce astigmatism where a reduction of 2 dioptres of astigmatism is obtained, including any associated consultation	110.75	125.55	
42668	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	78.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CORNEAL SUTURES, removal of, not earlier than 6 weeks after operation requiring use of slit lamp or operating microscope (Anaes.)	58.8	66.6	Y
42672	1/11/2003	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	938.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	CORNEAL INCISIONS, to correct corneal astigmatism of more than 11/2 dioptres following anterior segment surgery, including appropriate measurements and calculations, performed as an independent procedure (Anaes.) (Assist.)	704.15	850.95	Y
42673	1/11/2003	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	ADDITIONAL CORNEAL INCISIONS, to correct corneal astigmatism of more than 11/2 dioptres, including appropriate measurements and calculations, performed in conjunction with other anterior segment surgery (Anaes.) (Assist.)	352.05	398.95	Y
42676	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	120.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	CONJUNCTIVA, biopsy of, as an independent procedure	90.3	102.3	
42677	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	62.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONJUNCTIVA, CAUTERY OF, INCLUDING TREATMENT OF PANNUSeach attendance at which treatment is given including any associated consultation (Anaes.)	47.6	53.95	Y
42680	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONJUNCTIVA, cryotherapy to, for melanotic lesions or similar using CO² or N²O (Anaes.)	234.75	266.05	Y
42683	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	125.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONJUNCTIVAL CYSTS, removal of, requiring admission to hospital or approved day-hospital facility (Anaes.)	93.95		Y
42686	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	284.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PTERYGIUM, removal of (Anaes.)	213.6	242.05	Y
42689	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PINGUECULA, removal of, not being a service associated with the fitting of contact lenses (Anaes.)	91.65	103.85	Y
42692	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	LIMBIC TUMOUR, removal of, excluding Pterygium (Anaes.) (Assist.)	216	244.8	Y
42695	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	LIMBIC TUMOUR, excision of, requiring keratectomy or sclerectomy, excluding Pterygium (Anaes.) (Assist.)	352.05	398.95	Y
42698	1/12/1991	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	618.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	LENS EXTRACTION, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye (Anaes.)	464.1	530.9	Y
42701	1/12/1991	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	345.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	INTRAOCULAR LENS, insertion of, excluding surgery performed for the correction of refractive errorexcept for anisometropia greater than 3 dioptres following the removal of cataract in the first eye (Anaes.)	258.9	293.4	Y
42702	1/11/1996	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	P	N	C	1/11/2005	1/07/2021	791.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	LENS EXTRACTION AND INSERTION OF INTRAOCULAR LENS, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye (Anaes.)	593.6	703.55	Y
42703	1/11/1996	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	595.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	INTRAOCULAR LENS or IRIS PROSTHESIS insertion of, into the posterior chamber with fixation to the iris or sclera (Anaes.) (Assist.)	446.4	507.3	Y
42704	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	485	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	INTRAOCULAR LENS, REMOVAL or REPOSITIONING of by open operation, not being a service associated with a service to which item 42703 applies (Anaes.)	363.75	412.25	Y
42705	1/05/2017	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	N	C	1/05/2017	1/07/2021	948.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	LENS EXTRACTION AND INSERTION OF INTRAOCULAR LENS, excluding surgery performed for the correction of refractive errorexcept for anisometropia greater than 3 dioptres following the removal of cataract in the first eye, performed in association with insertion of a trans-trabecular drainage device or devices, in a patient diagnosed with open angle glaucoma who is not adequately responsive to topical anti-glaucoma medications or who is intolerant of anti-glaucoma medication. (Anaes.)	711.05	860.15	Y
42707	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	829.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	INTRAOCULAR LENS, REMOVAL of and REPLACEMENT with a different lens, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye (Anaes.)	622.05	741.5	Y
42710	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	938.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	INTRAOCULAR LENS, removal of, and replacement with a lens inserted into the posterior chamber and fixated to the iris or sclera (Anaes.) (Assist.)	704.15	850.95	Y
42713	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	391.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	IRIS SUTURING, McCannel technique or similar, for fixation of intraocular lens or repair of iris defect (Anaes.) (Assist.)	293.45	332.6	Y
42716	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	1244.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CATARACT, JUVENILE, removal of, including subsequent needlings (Anaes.) (Assist.)	933.15	1156.25	Y
42719	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	540	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	REMOVAL OF VITREOUS, and/or CAPSULAR or LENS MATERIAL, via a limbal approach,not being a service associated with a service to which item 42698, 42702, 42716, 42725 or 42731 applies (Anaes.) (Assist.)	405	459	Y
42725	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1391.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Vitrectomy via pars plana sclerotomy, including one or more of the following:(a) removal of vitreous; (b) division of vitreous bands; (c) removal of epiretinal membranes; (d) capsulotomy (Anaes.) (Assist.)	1044.5		Y
42731	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1580.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	LIMBAL OR PARS PLANA LENSECTOMY combined with vitrectomy, not being a service associated with items 42698, 42702, 42719, or 42725 (Anaes.) (Assist.)	1185.45		Y
42734	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Capsulotomy, other than by laser, and other than a service associated with a service to which item 42725 or 42731 applies (Anaes.) (Assist.)	234.75	266.05	Y
42738	1/03/2012	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	N	C	1/03/2012	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2012	PARACENTESIS OF ANTERIOR CHAMBER OR VITREOUS CAVITY, or both, for the injection of therapeutic substances, or the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes, 1 or more of, as an independent procedure.	234.75	266.05	
42739	1/03/2012	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	N	C	1/03/2012	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PARACENTESIS OF ANTERIOR CHAMBER OR VITREOUS CAVITY, or both, for the injection of therapeutic substances, or the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes,one or more of, as an independent procedure, for a patient requiring the administration of anaesthetic by an anaesthetist. (Anaes.)	234.75	266.05	Y
42740	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	N	C	1/12/1991	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2012	INTRAVITREAL INJECTION OF THERAPEUTIC SUBSTANCES, or the removal of vitreous humour for diagnostic purposes, 1 or more of, as a procedure associated with other intraocular surgery. (Anaes.)	234.75	266.05	Y
42741	1/07/2008	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	Posterior juxtascleral depot injection of a therapeutic substance, for the treatment of subfoveal choroidal neovascularisation due to age-related macular degeneration, 1 or more of (Anaes.)	234.75	266.05	Y
42743	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	657.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTERIOR CHAMBER, IRRIGATION OF BLOOD FROM, as an independent procedure (Anaes.) (Assist.)	493.05	569.45	Y
42744	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	312.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2014	Needle revision of glaucoma filtration bleb, following glaucoma filtering procedure (Anaes.)	234.6	265.85	Y
42746	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2005	1/07/2021	993.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	GLAUCOMA, filtering operation for, where conservative therapies have failed, are likely to fail, or are contraindicated (Anaes.) (Assist.)	745.3		Y
42749	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1246.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GLAUCOMA, filtering operation for, where previous filtering operation has been performed (Anaes.) (Assist.)	933.15		Y
42752	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1392.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	GLAUCOMA, insertion of drainage device incorporating an extraocular reservoir for, such as a Molteno device (Anaes.) (Assist.)	1044.5		Y
42755	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	172.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	GLAUCOMA, removal of drainage device incorporating an extraocular reservoir for, such as a Molteno device (Anaes.)	129.15	146.35	Y
42758	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2005	1/07/2021	727.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Goniotomy for the treatment of primary congenital glaucoma, excluding the minimally invasive implantation of glaucoma drainage devices (Anaes.) (Assist.)	545.85		Y
42761	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	540	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIVISION OF ANTERIOR OR POSTERIOR SYNECHIAE, as an independent procedure, other than by laser (Anaes.) (Assist.)	405	459	Y
42764	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	540	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	IRIDECTOMY (including excision of tumour of iris) OR IRIDOTOMY, as an independent procedure, other than by laser (Anaes.) (Assist.)	405	459	Y
42767	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TUMOUR, INVOLVING CILIARY BODY OR CILIARY BODY AND IRIS, excision of (Anaes.) (Assist.)	850.9		Y
42770	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	306.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1996	CYCLODESTRUCTIVE procedures for the treatment of intractable glaucoma, treatment to 1 eye, to a maximum of 2 treatments to that eye in a 2 year period (Anaes.) (Assist.)	230.1	260.75	Y
42773	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	938.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	DETACHED RETINA, pneumatic retinopexy for, not being a service associated with a service to which item 42776 applies (Anaes.) (Assist.)	704.15	850.95	Y
42776	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1392.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DETACHED RETINA, buckling or resection operation for (Anaes.) (Assist.)	1044.5		Y
42779	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1727.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	DETACHED RETINA, revision of scleral buckling operation for (Anaes.) (Assist.)	1362.85		Y
42782	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	LASER TRABECULOPLASTY, for the treatment of glaucoma. Each treatment to 1 eye, to a maximum of 4 treatments to that eye in a 2 year period (Anaes.) (Assist.)	352.05	398.95	Y
42785	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	367.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	LASER IRIDOTOMY - each treatment episode to 1 eye, to a maximum of 3 treatments to that eye in a 2 year period (Anaes.) (Assist.)	275.8	312.55	Y

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42788	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	367.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Laser capsulotomy—each treatment episode to one eye, to a maximum of 2 treatments to that eye in a 2 year period—other than a service associated with a service to which item 42702 applies (Anaes.) (Assist.)	1/05/2017	275.8	312.55	Y
42791	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	367.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Laser vitreolysis or corticolysis of lens material or fibriolysis, excluding vitreolysis in the posterior vitreous cavity—each treatment to one eye, to a maximum of 3 treatments to that eye in a 2 year period (Anaes.) (Assist.)	1/11/2018	275.8	312.55	Y
42794	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	70.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	DIVISION OF SUTURE BY LASER following glaucoma filtration surgery, each treatment to 1 eye, to a maximum of 2 treatments to that eye in a 2 year period (Anaes.)	1/07/2014	52.85	59.9	Y
42801	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1092.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EPISCLERAL RADIOACTIVE PLAQUE (Ruthenium 106 or Iodine 125), for the treatment of choroidal melanomas, insertion of (Anaes.) (Assist.)	1/11/2006	819.2		Y
42802	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	545.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EPISCLERAL RADIOACTIVE PLAQUE (Ruthenium 106 or Iodine 125), for the treatment of choroidal melanomas, removal of (Anaes.) (Assist.)	1/11/2006	409.5		Y
42805	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	TANTALUM MARKERS, surgical insertion to the sclera to localise the tumour base to assist in planning of radiotherapy of choroidal melanomas, 1 or more (Anaes.) (Assist.)	1/11/2005	457.75	522.4	Y
42806	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	367.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	IRIS TUMOUR, laser photocoagulation of (Anaes.) (Assist.)	1/12/1991	275.8	312.55	Y
42807	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	370.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	PHOTOMYDRIASIS, laser	1/05/1997	277.65	316.7	
42808	1/05/1997	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	370.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Laser peripheral iridoplasty	1/07/2014	277.65	316.7	
42809	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	RETINA, photocoagulation of, not being a service associated with photodynamic therapy with verteporfin (Anaes.) (Assist.)	1/11/2002	352.05	398.95	Y
42810	1/11/1996	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	590.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	PHOTOTHERAPEUTIC KERATECTOMY, by laser, for corneal scarring or disease, excluding surgery for refractive error (Anaes.)	1/11/1996	443.05	502.8	Y
42811	1/11/2005	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	TRANSPUPILLARY THERMOTHERAPY, for treatment of choroidal and retinal tumours or vascular malformations (Anaes.)	1/11/2005	352.05	398.95	Y
42812	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	172.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Removal of scleral buckling material, from an eye having undergone previous scleral buckling surgery (Anaes.)	1/11/2012	129.15	146.35	Y
42815	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	657.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	VITREOUS CAVITY, removal of silicone oil or other liquid vitreous substitutes from, during a procedure other than that in which the vitreous substitute is inserted (Anaes.) (Assist.)	1/11/2012	493.05		Y
42818	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	RETINA, CRYOTHERAPY TO, as an independent procedure, or when performed in conjunction with item 42808 or 42770 (Anaes.)	1/11/2012	457.75	522.4	Y
42821	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	94.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	OCULAR TRANSILLUMINATION, for the diagnosis and measurement of intraocular tumours (Anaes.)	1/11/2005	70.55	79.95	Y
42824	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	72.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	RETROBULBAR INJECTION OF ALCOHOL OR OTHER DRUG, as an independent procedure	1/12/1991	54.55	61.8	
42833	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SQUINT, OPERATION FOR, ON 1 OR BOTH EYES, 1 operation involving a total of 1 OR 2 MUSCLES on a patient aged 15 years or over (Anaes.) (Assist.)	1/11/2006	457.75		Y
42836	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	758.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SQUINT, OPERATION FOR, ON 1 OR BOTH EYES, the operation involving a total of 1 OR 2 MUSCLES, on a patient aged 15 years or over, or where the patient has had previous squint, retinal or extra ocular operations on the eye or eyes, or on a patient with concurrent thyroid eye disease (Anaes.) (Assist.)	1/11/2006	569.25		Y
42839	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	727.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SQUINT, OPERATION FOR, ON 1 OR BOTH EYES, the operation involving a total of 3 OR MORE MUSCLES on a patient aged 15 years or over (Anaes.) (Assist.)	1/11/2006	545.85		Y
42842	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	907.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SQUINT, OPERATION FOR, ON 1 OR BOTH EYES, the operation involving a total of 3 or MORE MUSCLES, on a patient aged 14 years or under, or where the patient has had previous squint, retinal or extra ocular operations on the eye or eyes, or on a patient with concurrent thyroid eye disease (Anaes.) (Assist.)	1/11/2006	680.75		Y
42845	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	197.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	READJUSTMENT OF ADJUSTABLE SUTURES, 1 or both eyes, as an independent procedure following an operation for correction of squint (Anaes.)	1/12/1991	147.85	167.55	Y
42848	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	727.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SQUINT, muscle transplant for (Hummelsheim type, or similar operation) on a patient aged 15 years or over (Anaes.) (Assist.)	1/11/2006	545.85		Y
42851	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	907.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	SQUINT, muscle transplant for (Hummelsheim type, or similar operation) on a patient aged 14 years or under, or where the patient has had previous squint, retinal or extra ocular operations on the eye or eyes, or on a patient with concurrent thyroid eye disease (Anaes.) (Assist.)	1/11/2006	680.75		Y
42854	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	RUPTURED MEDIAL PALPEBRAL LIGAMENT or ruptured EXTRAOCULAR MUSCLE, repair of (Anaes.) (Assist.)	1/12/1991	316.9	359.15	Y
42857	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	RESUTURING OF WOUND FOLLOWING INTRAOCULAR PROCEDURES with or without excision of prolapsed iris (Anaes.) (Assist.)	1/12/1991	316.9	359.15	Y
42860	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	938.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EYELID (upper or lower), scleral or Goretex or other non-autogenous graft to, with recession of the lid retractors (Anaes.) (Assist.)	1/07/1998	704.15	850.95	Y
42863	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	805.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EYELID, recession of (Anaes.) (Assist.)	1/07/1998	604.5	718.05	Y
42866	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	782.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ENTROPION or TARSAL ECTROPION, repair of, by tightening, shortening or repair of inferior retractors by open operation across the entire width of the eyelid (Anaes.) (Assist.)	1/07/1998	586.8	694.45	Y
42869	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	571.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EYELID closure in facial nerve paralysis, insertion of foreign implant for (Anaes.) (Assist.)	1/12/1991	428.45	485.6	Y
42872	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	250.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	EYEBROW, elevation of, by skin excision, to correct for a reduced field of vision caused by paretic, involutional, or traumatic eyebrow descent/ptosis to a position below the superior orbital rim (Anaes.)	1/11/2018	187.85	212.9	Y
43021	1/08/2007	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/08/2007	1/07/2021	473.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Photodynamic therapy, one eye, including the infusion of Verteporfin continuously through a peripheral vein, using a non-thermal laser at a wavelength of 689nm, for the treatment of choroidal neovascularisation.	1/08/2007	355.15	402.5	
43022	1/08/2007	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/08/2007	1/07/2021	376.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Photodynamic therapy, both eyes, including the infusion of Verteporfin continuously through a peripheral vein, using a non-thermal laser at a wavelength of 689nm, for the treatment of choroidal neovascularisation.	1/08/2007	426.2	483.05	
43023	1/08/2007	[Table]	3	T8	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/08/2007	1/07/2021	92.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Infusion of Verteporfin for discontinued photodynamic therapy, where a session of therapy which would have been provided under item 43021 or 43022 has been discontinued on medical grounds.	1/08/2007	69.05	78.25	
43521	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	483.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	OPERATION ON SKULL (Anaes.) (Assist.)	1/12/1991	362.55		Y
43527	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	270.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Operation on sternum, clavicle, rib, metacarpus, carpus, phalanx, metatarsus, tarsus, mandible or maxilla (other than alveolar margins), by open or arthroscopic means, for septic arthritis or osteomyelitis—one approach, inclusive of the adjoining joint (Anaes.) (Assist.)	1/07/2021	278.1		Y
43530	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	270.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Operation on scapula, ulna, radius, tibia, fibula, humerus or femur, by open or arthroscopic means, for septic arthritis or osteomyelitis—one approach, inclusive of the adjoining joint (Anaes.) (Assist.)	1/07/2021	278.1	315.2	Y
43533	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Operation on spine or pelvic bones, by open or arthroscopic means, for septic arthritis or osteomyelitis—one approach, inclusive of the adjoining joint (Anaes.) (Assist.)	1/07/2021	458.55	523.5	Y
43801	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	996.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	INTESTINAL MALROTATION with or without volvulus, laparotomy for, not involving bowel resection (Anaes.) (Assist.)	1/11/1994	747.1		Y
43804	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1060.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	INTESTINAL MALROTATION with or without volvulus, laparotomy for, with bowel resection and anastomosis, with or without formation of stoma (Anaes.) (Assist.)	1/11/1994	795.45		Y
43805	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	UMBILICAL, EPIGASTRIC OR LINEA ALBA HERNIA, repair of, on a patient under 10 years of age (Anaes.)	1/07/2021	278.1		Y
43807	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1157.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	DUODENAL ATRESIA or STENOSIS, duodenoduodenostomy or duodenojejunostomy for (Anaes.) (Assist.)	1/11/1994	867.8		Y
43810	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1349.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	JEJUNAL ATRESIA, bowel resection and anastomosis for, with or without tapering (Anaes.) (Assist.)	1/11/1994	1012.45		Y
43813	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1349.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	MECONIUM ILEUS, laparotomy for, complicated by 1 or more of associated volvulus, atresia, intesinal perforation with or without meconium peritonitis (Anaes.) (Assist.)	1/11/1994	1012.45		Y
43816	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1253.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ILEAL ATRESIA, COLONIC ATRESIA OR MECONIUM ILEUS not being a service associated with a service to which item 43813 applies, laparotomy for (Anaes.) (Assist.)	1/11/1994	940.05		Y
43819	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1012.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Aganglionic Coli, laparotomy for, with or without frozen section biopsies and formation of stoma (Anaes.) (Assist.)	1/09/2015	759.3		Y
43822	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1012.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ANORECTAL MALFORMATION, laparotomy and colostomy for (Anaes.) (Assist.)	1/11/1994	759.3		Y
43825	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1157.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	NEONATAL ALIMENTARY OBSTRUCTION, laparotomy for, not being a service to which any other item in this Subgroup applies (Anaes.) (Assist.)	1/11/1994	867.8		Y
43828	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1278.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ACUTE NEONATAL NECROTISING ENTEROCOLITIS, laparotomy for, with resection, including any anastomoses or stoma formation (Anaes.) (Assist.)	1/11/1994	958.75		Y
43831	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	996.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	ACUTE NEONATAL NECROTISING ENTEROCOLITIS where no definitive procedure is possible, laparotomy for (Anaes.) (Assist.)	1/11/1994	747.1		Y
43832	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	679.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Branchial fistula, removal of, on a patient under 10 years of age (Anaes.) (Assist.)	1/07/2021	509.55		Y
43834	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1157.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	BOWEL RESECTION for necrotising enterocolitis stricture or strictures, including any anastomoses or stoma formation (Anaes.) (Assist.)	1/11/1994	867.8		Y
43835	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	705.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	STRANGULATED, INCARCERATED OR OBSTRUCTED HERNIA, repair of, without bowel resection, on apatient under 10 years of age (Anaes.) (Assist.)	1/07/2021	528.9		Y
43837	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1446.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	CONGENITAL DIAPHRAGMATIC HERNIA, repair by thoracic or abdominal approach, with diagnosis confirmed in the first 24 hours of life (Anaes.) (Assist.)	1/11/1994	1084.7		Y
43838	1/09/2015	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	1294.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	Diaphragmatic hernia, congenital repair of, by thoracic or abdominal approach, not being a service to which any of items 31569 to 31581 apply, on a patient under 10 years of age (Anaes.) (Assist.)	1/07/2021	971.2		Y

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43840	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1253.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	CONGENITAL DIAPHRAGMATIC HERNIA, repair by thoracic or abdominal approach, diagnosed after the first day of life and before 20 days of age (Anaes.) (Assist.)	940.05		Y
43841	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	628.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	7/08/2021	Femoral or inguinal hernia or infantile hydrocele, repair of, on a patient under 10 years of age, other than a service to which item 30651 or 43835 applies (H) (Anaes.) (Assist.)	471.25		Y
43843	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1928.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	OESOPHAGEAL ATRESIA (with or without repair of tracheo-oesophageal fistula), complete correction of, not being a service to which item 43846 applies (Anaes.) (Assist.)	1446.35		Y
43846	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2073.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	OESOPHAGEAL ATRESIA (with or without repair of tracheo-oesophageal fistula), complete correction of, in infant of birth weight less than 1500 grams (Anaes.) (Assist.)	1554.8		Y
43849	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	530.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	OESOPHAGEAL ATRESIA, gastrostomy for (Anaes.) (Assist.)	397.75		Y
43852	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	1687.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	OESOPHAGEAL ATRESIA, thoracostomy for, and division of tracheo-oesophageal fistula without anastomosis (Anaes.) (Assist.)	1265.45		Y
43855	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1783.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	OESOPHAGEAL ATRESIA, delayed primary anastomosis for (Anaes.) (Assist.)	1337.9		Y
43858	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	626.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	OESOPHAGEAL ATRESIA, cervical oesophagostomy for (Anaes.) (Assist.)	470.05		Y
43861	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1735.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	CONGENITAL CYSTADENOMATOID MALFORMATION OR CONGENITAL LOBAR EMPHYSEMA, thoracotomy and lung resection for (Anaes.) (Assist.)	1301.75		Y
43864	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1301.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	GASTROSCHISIS, operation for (Anaes.) (Assist.)	976.3		Y
43867	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	721.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	GASTROSCHISIS or Exomphalos, secondary operation for, with removal of silo (Anaes.) (Assist.)	542.4		Y
43870	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1012.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	EXOMPHALOS containing small bowel only, operation for (Anaes.) (Assist.)	759.3		Y
43873	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1349.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	EXOMPHALOS containing small bowel and other viscera, operation for (Anaes.) (Assist.)	1012.45		Y
43876	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1157.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	SACROCOCCYGEAL TERATOMA, excision of, by posterior approach (Anaes.) (Assist.)	867.8		Y
43879	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1349.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	SACROCOCCYGEAL TERATOMA, excision of, by combined posterior and abdominal approach (Anaes.) (Assist.)	1012.45		Y
43882	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	1735.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	CLOACAL EXSTROPHY, operation for (Anaes.) (Assist.)	1301.75	1647.75	Y
43900	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1157.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	TRACHEO-OESOPHAGEAL FISTULA without atresia, division and repair of (Anaes.) (Assist.)	867.8		Y
43903	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1928.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	OESOPHAGEAL ATRESIA or CORROSIVE OESOPHAGEAL STRICTURE, oesophageal replacement for, utilising gastric tube, jejunum or colon (Anaes.) (Assist.)	1446.35		Y
43906	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1687.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	OESOPHAGUS, resection of congenital, anastomic or corrosive stricture and anastomosis, not being a service to which item 43903 applies (Assist.) (Assist.)	1265.45		Y
43909	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1687.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	TRACHEOMALACIA, aortopexy for (Anaes.) (Assist.)	1265.45		Y
43912	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1594.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	THORACOTOMY and excision of 1 or more of bronchogenic or enterogenous cyst or mediastinal teratoma (Anaes.) (Assist.)	1195.55		Y
43915	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	1205.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	EVENTRATION, plication of diaphragm for (Anaes.) (Assist.)	903.95		Y
43930	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	HYPERTROPHIC PYLORIC STENOSIS, pyloromyotomy for (Anaes.) (Assist.)	347.65		Y
43933	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	ISOPERITONEALIZATION, laparotomy and manipulative reduction of (Anaes.) (Assist.)	406.95		Y
43936	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1012.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	INTUSSUSCEPTION, laparotomy and resection with anastomosis (Anaes.) (Assist.)	759.3		Y
43939	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	VENTRAL HERNIA following neonatal closure of exomphalos or gastroschisis, repair of (Anaes.) (Assist.)	578.55		Y
43942	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	241.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	ABDOMINAL WALL VITELLO INTESTINAL REMNANT, excision of (Anaes.)	180.85		Y
43945	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1012.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	PATENT VITELLO INTESTINAL DUCT, excision of (Anaes.) (Assist.)	759.3		Y
43948	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	144.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	UMBILICAL GRANULOMA, excision of, under general anaesthesia (Anaes.)	108.6		Y
43951	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	906.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	GASTRO-OESOPHAGEAL REFLUX with or without hiatus hernia, laparotomy and fundoplication for, without gastrostomy (Anaes.) (Assist.)	680		Y
43954	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1108.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	GASTRO-OESOPHAGEAL REFLUX with or without hiatus hernia, laparotomy and fundoplication for, with gastrostomy (Anaes.) (Assist.)	831.75		Y
43957	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1205.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	GASTRO-OESOPHAGEAL REFLUX, LAPAROTOMY AND FUNDOPLICATION for, with or without hiatus hernia, in child with neurological disease, with gastrostomy (Anaes.) (Assist.)	903.95		Y
43960	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	434	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	ANORECTAL MALFORMATION, perineal anoplasty of (Anaes.) (Assist.)	318		Y
43963	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1687.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	ANORECTAL MALFORMATION, posterior sagittal anorectoplasty of (Anaes.) (Assist.)	1265.45		Y
43966	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1928.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	ANORECTAL MALFORMATION, posterior sagittal anorectoplasty of, with laparotomy (Anaes.) (Assist.)	1446.35		Y
43969	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2651.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	PERSISTENT CLOACA, total correction of, with genital repair using posterior sagittal approach, with or without laparotomy (Anaes.) (Assist.)	1888.7		Y
43972	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1928.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	CHOLEDOCHAL CYST, resection of, with 1 duct anastomosis (Anaes.) (Assist.)	1446.35		Y
43975	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2265.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	CHOLEDOCHAL CYST, resection of, with 2 duct anastomoses (Anaes.) (Assist.)	1699.5		Y
43978	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1928.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	BILIARY ATRESIA, portoenterostomy for (Anaes.) (Assist.)	1446.35		Y
43981	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	530.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	NEPHROBLASTOMA, NEUROBLASTOMA OR OTHER MALIGNANT TUMOUR, laparotomy (exploratory), including associated biopsies, where no other intra-abdominal procedure is performed (Anaes.) (Assist.)	397.75		Y
43984	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1349.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	NEPHROBLASTOMA, radical nephrectomy for (Anaes.) (Assist.)	1012.45		Y
43987	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1494.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	NEUROBLASTOMA, radical excision of (Anaes.) (Assist.)	1121		Y
43990	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1582.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	Aganglionosis Coli, definitive resection with pull-through anastomosis, with or without frozen section biopsies, when aganglionic segment extends to sigmoid colon (Anaes.) (Assist.)	1374.1		Y
43993	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	1976.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	Aganglionosis Coli, definitive resection with pull-through anastomosis, with or without frozen section biopsies, when aganglionic segment extends into descending or transverse colon with or without resiting of stoma (Anaes.) (Assist.)	1482.5		Y
43996	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	2137.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	Aganglionosis Coli, total colectomy for total colonic aganglionosis with ileoanal pull-through, with or without side to side ileocolic anastomosis (Anaes.) (Assist.)	1663.35		Y
43999	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	277.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	Aganglionosis Coli, anal sphincterotomy as an independent procedure for (Anaes.) (Assist.)	208		Y
44101	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	347.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	RECTUM, examination of, on a patient under 2 years of age, under general anaesthesia with full thickness biopsy or removal of polyp or similar lesion (Anaes.) (Assist.)	260.7		Y
44102	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	267.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	RECTUM, examination of, on a patient 2 years of age or over, under general anaesthesia with full thickness biopsy or removal of polyp or similar lesion (Anaes.) (Assist.)	200.55		Y
44104	1/09/2015	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/09/2015	1/07/2021	61.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	RECTAL PROLAPSE, SUBMUCOSAL or perirectal injection for, on a patient under 2 years of age, under general anaesthesia (Anaes.)	45.8	51.9	Y
44105	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	46.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	RECTAL PROLAPSE, SUBMUCOSAL or perirectal injection for, on a patient 2 years of age or over, under general anaesthesia (Anaes.)	35.2	39.9	Y
44108	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/09/2015	511.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	INGUINAL HERNIA repair at age less than 12 months (Anaes.) (Assist.)	383.55		Y
44111	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	598.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	OBSTRUCTED OR STRANGULATED INGUINAL HERNIA, repair, at age, less than 12 months including orchidopexy when performed (Anaes.) (Assist.)	449.25	511.05	Y
44114	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	598.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2015	INGUINAL HERNIA repair at age less than 12 months when orchidopexy also required (Anaes.) (Assist.)	449.25		Y
44130	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	482.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	LYMPHADENECTOMY, for atypical mycobacterial infection or other granulomatous disease (Anaes.) (Assist.)	361.55	409.75	Y
44133	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	382.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	TORTICOLLIS, open division of sternomastoid muscle for (Anaes.) (Assist.)	287		Y
44136	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	INGROWN TOE NAIL, operation for, under general anaesthesia (Anaes.)	132.3	149.9	Y
44225	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of hand, transcarpal (H) (Anaes.) (Assist.)	230.8		Y
44228	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of hand, proximal to wrist radiocarpal joint, through forearm (H) (Anaes.) (Assist.)	278.1		Y
44231	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	AMPUTATION AT SHOULDER (Anaes.) (Assist.)	458.55		Y
44234	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1242.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	INTERSCAPULOTHORACIC AMPUTATION (Anaes.) (Assist.)	932	1154.75	Y
44238	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	149.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of one digit of one foot, distal to metatarsal head, including any of the following (if performed): (a) resection of bone or joint; (b) excision of neuroma; (c) skin cover with homodigital flaps (H) (Anaes.) (Assist.)	112.4		Y
44242	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	228.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of 2 digits of one foot, distal to metatarsal head, including any of the following (if performed): (a) resection of bone or joint; (b) excision of neuroma; (c) skin cover with homodigital flaps (H) (Anaes.) (Assist.)	171.65		Y
44246	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	264.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of 3 digits of one foot, distal to metatarsal head, including any of the following (if performed): (a) resection of bone or joint; (b) excision of neuroma; (c) skin cover with homodigital flaps (H) (Anaes.) (Assist.)	198.2		Y
44250	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	299.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of 4 digits of one foot, distal to metatarsal head, including any of the following (if performed): (a) resection of bone or joint; (b) excision of neuroma; (c) skin cover with homodigital flaps (H) (Anaes.) (Assist.)	224.9		Y
44254	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	343.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of 5 digits of one foot, distal to metatarsal head, including any of the following (if performed): (a) resection of bone or joint; (b) excision of neuroma; (c) skin cover with homodigital flaps (H) (Anaes.) (Assist.)	257.4		Y

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44358	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	228.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of one ray of one foot, proximal to the metatarsal head, including any of the following (if performed): (a) resection of bone; (b) excision of neuromas; (c) skin cover or reconstructing with homodigital flaps (iii) (Anaes.) (Assist.)		171.65		Y
44359	1/11/1999	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	274.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of one or more toes of one foot, or amputation at midfoot or hindfoot of one foot, for diabetic or other microvascular disease; (a) including any of the following (if performed): (i) resection of bone; (ii) excision of neuromas; (iii) excision of one or more bones of the foot; (iv) treatment of underlying infection; (v) skin cover or reconstructing with homodigital flaps; and (b) excluding aftercare; —applicable only once per foot per occasion on which the service is performed (iii) (Anaes.) (Assist.)		205.95		Y
44361	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	454.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of foot, at ankle or hindfoot, including any of the following (if performed): (a) resection of bone; (b) excision of neuromas; (c) skin cover; (iii) (Anaes.) (Assist.)		340.6		Y
44364	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of foot, transtarsal, including any of the following (if performed): (a) resection of bone; (b) excision of neuromas; (c) skin cover; (iii) (Anaes.) (Assist.)		230.8		Y
44367	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	543.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/07/2021	Amputation through thigh, at knee or below knee (iii) (Anaes.) (Assist.)		407.35		Y
44370	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	749.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	AMPUTATION AT HIP (Anaes.) (Assist.)		562.05		Y
44373	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1528.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	HINDQUARTER, amputation of (Anaes.) (Assist.)		1153.75	1450.4	Y
44376	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/12/1991			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/07/2021	Amputation stump, re-amputation of, to provide adequate skin and muscle cover (Anaes.) (Assist.)	1/11/1998 75% of the oriental amputation fee			Y
45000	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	563.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Single stage local muscle flap repair, on eyelid, nose, lip, neck, hand, thumb, finger or genitals not in association with any of items 31256 to 31276 (Anaes.)		422.45	478.8	Y
45003	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	626.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Single stage local myocutaneous flap repair to one defect, simple and small not in association with any of items 31256 to 31276 (Anaes.)		469.55	538.15	Y
45006	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1079.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SINGLE STAGE LARGE MYOCUTANEOUS FLAP REPAIR to 1 defect, (pectoralis major, latissimus dorsi, or similar large muscle) (Anaes.) (Assist.)		809.8		Y
45009	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	394.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SINGLE STAGE LOCAL muscle flap repair to 1 defect, simple and small (Anaes.) (Assist.)		295.8		Y
45012	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	660.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SINGLE STAGE LARGE MUSCLE FLAP REPAIR to 1 defect, (pectoralis major, gastrocnemius, gracilis or similar large muscle) (Anaes.) (Assist.)		495.6		Y
45015	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MUSCLE OR MYOCUTANEOUS FLAP, delay of (Anaes.)		234.75		Y
45018	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2020	Dermis, dermofat or fascia graft (other than transfer of fat by injection): (a) if the service is not associated with neurosugical services for spinal disorders mentioned in any of Item51011 to 51171; and (b) other than a service associated with a service to which Item39615, 39715, 40100 or 40109 applies (Anaes.) (Assist.)		369.65	418.95	Y
45019	19/06/1997	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	412.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Full face chemical peel for severely sun-damaged skin, if: (a) the damage affects at least 75% of the facial skin surface area; and (b) the contour through photo-damage (dermatochalasis); and (c) the photo-damage involves: (i) a solar keratosis total exceeding 10 individual lesions; or (ii) solar lentigines; or (iii) freckling, yellowing or thickening of the skin; or (iv) solar kertoses which have proven refractory to, or recurred following, cryosurgeries; and (d) at least medium depth peeling agents are used; and (e) the chemical peeling performed in the operating theatre of a hospital by a medical practitioner recognised as possessing the specialty of dermatology or plastic surgery. Applicable once only in any 12 month period (Anaes.)		309.6		Y
45021	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	186.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	ABRASIVE THERAPY for severely disfiguring scarring resulting from trauma, burns or acne - limited to 1 aesthetic area (Anaes.)		138.45	156.9	Y
45024	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	414.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	ABRASIVE THERAPY for severely disfiguring scarring resulting from trauma, burns or acne - more than 1 aesthetic area (Anaes.)		311.05	352.5	Y
45025	1/11/1995	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1995	1/07/2021	186.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	CARBON DIOXIDE LASER OR ERBIUM LASER (not including fractional laser therapy) resurfacing of the face or neck for severely disfiguring scarring resulting from trauma, burns or acne - limited to 1 aesthetic area (Anaes.)		138.45	156.9	Y
45026	1/11/1995	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/11/1995	1/07/2021	414.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	CARBON DIOXIDE LASER OR ERBIUM LASER (not including fractional laser therapy) resurfacing of the face or neck for severely disfiguring scarring resulting from trauma, burns or acne - more than 1 aesthetic area (Anaes.)		311.05	352.5	Y
45027	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	125.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANGIOMA, cauterisation of or injection into, where undertaken in the operating theatre of a hospital (Anaes.)		93.95	106.5	Y
45030	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	134.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ANGIOMA (haemangioma or lymphangioma or both) of skin and subcutaneous tissue (excluding facial muscle or breast) or mucous surface, small, excision and suture of (Anaes.)		100.85	114.3	Y
45033	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	250.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ANGIOMA (haemangioma or lymphangioma or both), large or involving deeper tissue including facial muscle or breast, excision and suture of (Anaes.)		187.85	212.9	Y
45035	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	730.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ANGIOMA (haemangioma or lymphangioma or both), large and deep, involving muscles or nerves, excision of (Anaes.) (Assist.)		547.9		Y
45036	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1173.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ANGIOMA (haemangioma or lymphangioma or both) of neck, deep, excision of (Anaes.) (Assist.)		880.35		Y
45039	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	250.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS MALFORMATION (3 centimetres or less) of superficial tissue, excision of (Anaes.)		187.85	212.9	Y
45042	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	320.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ARTERIOVENOUS MALFORMATION, (greater than 3 centimetres), excision of (Anaes.) (Assist.)		240.7	272.8	Y
45045	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	320.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1991	ARTERIOVENOUS MALFORMATION on eyelid, nose, lip, ear, neck, hand, thumb, finger or genitals, excision of (Anaes.)		240.7	272.8	Y
45048	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	805.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	LYMPHOEDEMATOUS tissue or lymphangiectasis, of lower leg and foot, or thigh, or upper arm, or forearm and hand, major excision of (Anaes.) (Assist.)		604.5		Y
45051	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Contour reconstruction by open repair of contour defects, due to deformity, if: (a) contour reconstructive surgery is indicated because the deformity is secondary to congenital absence of tissue or has arisen from trauma (other than trauma from previous cosmetic surgery); and (b) insertion of a non-biological implant is required, other than one or more of the following: (i) insertion of a non-biological implant that is a component of another service specified in Group T8; (ii) injection of liquid or semisolid material; (iii) an oral and maxillofacial implant service to which Item51221 applies; (b) a service to insert mesh; and (c) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)		369.75		Y
45054	1/11/1999	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	256.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	LIMB OR CHEST, decompression escharotomy of (including all incisions), for acute compartment syndrome secondary to burn (Anaes.) (Assist.)		192.1		Y
45060	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1322.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Developmental breast abnormality, single stage correction of, if: (a) the correction involves either: (i) bilateral mastopexy for symmetrical tubular breasts; or (ii) surgery on both breasts with a combination of insertion of one or more implants (which must have at least a 10% volume difference), mastopexy or reduction mammoplasty, if there is a difference in breast volume, as demonstrated by an appropriate volumetric measurement technique, of at least 20% in normally shaped breasts, or 10% in tubular breasts or in breasts with abnormally high inframammary folds; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes Applicable only once per occasion on which the service is provided (Anaes.) (Assist.)		992.1		Y
45061	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1322.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Developmental breast abnormality, 2 stage correction of, first stage, involving surgery on both breasts with a combination of insertion of one or more tissue expanders, mastopexy or reduction mammoplasty, if: (a) there is a difference in breast volume, as demonstrated by an appropriate volumetric measurement technique, of at least: (i) 20% in normally shaped breasts; or (ii) 10% in tubular breasts or in breasts with abnormally high inframammary folds; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes. Applicable only once per occasion on which the service is provided (Anaes.) (Assist.)		992.1		Y
45062	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	957.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Developmental breast abnormality, 2 stage correction of, second stage, involving surgery on both breasts with a combination of exchange of one or more tissue expanders for one or more implants (which must have at least a 10% volume difference), mastopexy or reduction mammoplasty, if: (a) there is a difference in breast volume, as demonstrated by an appropriate volumetric measurement technique, of at least: (i) 20% in normally shaped breasts; or (ii) 10% in tubular breasts or in breasts with abnormally high inframammary folds; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes. Applicable only once per occasion on which the service is provided (Anaes.) (Assist.)		717.95		Y
45200	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	295.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Single stage local flap, if indicated to repair one defect, simple and small, excluding flap for male pattern baldness and excluding H-flap or double advancement flap not in association with any of items 31256 to 31276 (Anaes.)		221.95	251.55	Y
45201	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2016	1/07/2021	430.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Muscle, myocutaneous or skin flap, where clinically indicated to repair one surgical excision made in the removal of a malignant or non-malignant skin lesion (only in association with items 31000, 31001, 31002, 31003, 31004, 31005, 31358, 31359, 31360, 31363, 31364, 31369, 31370, 31371, 31372 or 31376) may be claimed only once per defect (Anaes.)		323.05	366.1	Y
45202	1/11/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/07/2021	430.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Muscle, myocutaneous or skin flap, where clinically indicated to repair one surgical excision made in the removal of a malignant or non-malignant skin lesion in a patient, if the clinical relevance of the procedure is clearly annotated in the patient's record and either: (a) Item 45201 applies and additional flap repair is required for the same defect; or (b) Item 45201 does not apply and either: (i) the patient has severe pre-existing scarring, severe skin atrophy or sclerodermoid changes; or (ii) the repair is contiguous with a free margin (Anaes.)		323.05	366.1	Y
45203	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Single stage local flap, if indicated to repair one defect, complicated or large, excluding flap for male pattern baldness and excluding H-flap or double advancement flap not in association with any of items 31256 to 31276 (Anaes.) (Assist.)		316.9	359.15	Y
45206	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	399.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	Single stage local flap if indicated to repair one defect, on eyelid, nose, lip, ear, neck, hand, thumb, finger or genitals and excluding H-flap or double advancement flap not in association with any of items 31256 to 31276 (Anaes.)		299.35	339.25	Y
45207	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	399.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2016	H-flap or double advancement flap if indicated to repair one defect, on eyelid, eyebrow or forehead not in association with any of items 31256 to 31276 (Anaes.)		299.35	339.25	Y
45209	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR (cross arm, abdominal or similar), first stage (Anaes.) (Assist.)		369.75	419.05	Y
45212	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	244.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR (cross arm, abdominal or similar), second stage (Anaes.)		183.45	207.95	Y
45215	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1055.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR, cross leg, first stage (Anaes.) (Assist.)		791.35		Y

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45218	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	473.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR, cross leg, second stage (Anaes.) (Assist.)	355	Y
45221	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	272.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR, small (cross finger or similar), first stage (Anaes.)	204.15	231.4 Y
45224	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR, small (cross finger or similar), second stage (Anaes.)	91.8	104 Y
45227	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INDIRECT FLAP OR TUBED PEDICLE, formation of (Anaes.) (Assist.)	347.65	394 Y
45230	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	231.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT OR INDIRECT FLAP OR TUBED PEDICLE, delay of (Anaes.)	173.85	197 Y
45233	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INDIRECT FLAP OR TUBED PEDICLE, preparation of intermediate or final site and attachment to the site (Anaes.) (Assist.)	369.75	419.05 Y
45236	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	INDIRECT FLAP OR TUBED PEDICLE, spreading of pedicle, as a separate procedure (Anaes.)	289.95	Y
45239	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	272.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	DIRECT, INDIRECT OR LOCAL FLAP, revision of, by incision and suture, not being a service to which item 45240 applies (Anaes.)	204.15	231.4 Y
45240	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	272.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	DIRECT, INDIRECT OR LOCAL FLAP, revision of, by liposuction, not being a service to which item 45239, 45497, 45498 or 45499 applies (Anaes.)	204.15	231.4 Y
45400	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	213	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) of a granulating area, small (Anaes.)	159.75	181.05 Y
45403	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	434	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) of a granulating area, extensive (Anaes.) (Assist.)	318	360.4 Y
45406	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving not more than 3 per cent of total body surface (Anaes.) (Assist.)	352.05	398.95 Y
45409	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	626.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 3 per cent or more but less than 6 per cent of total body surface (Anaes.) (Assist.)	469.55	Y
45412	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	860.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 6 per cent or more but less than 9 per cent of total body surface (Anaes.) (Assist.)	645.65	Y
45415	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	938.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 9 per cent or more but less than 12 per cent of total body surface (Anaes.) (Assist.)	704.15	Y
45418	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1017.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 12 per cent or more but less than 15 per cent of total body surface (Anaes.) (Assist.)	762.9	Y
45439	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	295.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to 1 defect, including elective dissection, small (Anaes.)	221.95	251.55 Y
45442	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to 1 defect, including elective dissection, extensive (Anaes.) (Assist.)	457.75	522.4 Y
45445	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	579.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) as inlay graft to 1 defect including elective dissection using a mould (including insertion of, and removal of mould) (Anaes.) (Assist.)	434.4	492.3 Y
45448	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	391.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (split skin) to 1 defect, including elective dissection on eyelid, nose, lip, ear, neck, hand, thumb, finger or genitals, not being a service to which item 45442 or 45445 applies (Anaes.)	293.45	332.6 Y
45451	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FREE GRAFTING (full thickness) to 1 defect, excluding grafts for male pattern baldness (Anaes.) (Assist.)	369.75	419.05 Y
45460	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1304.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 15 percent or more but less than 20 percent of total body surface - one surgeon (Anaes.) (Assist.)	978.1	Y
45461	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	929.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 15 percent or more but less than 20 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	697.1	Y
45462	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	701.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 15 percent or more but less than 20 percent of total body surface - conjoint surgery, co- surgeon (Assist.)	526.05	
45464	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1990.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 20 percent or more but less than 30 percent of total body surface - one surgeon (Anaes.) (Assist.)	1492.95	Y
45465	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	1418.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 20 percent or more but less than 30 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	1063.65	1130.3 Y
45466	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	1069.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 20 percent or more but less than 30 percent of total body surface - conjoint surgery, co-surgeon (Assist.)	802.2	981.7
45468	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1906.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 30 percent or more but less than 40 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	1430.2	Y
45469	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	1438.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 30 percent or more but less than 40 percent of total body surface - conjoint surgery, co-surgeon (Assist.)	1079.05	1250.8
45471	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	2397	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 40 percent or more but less than 50 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	1797.75	2309.1 Y
45472	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	1808.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 40 percent or more but less than 50 percent of total body surface - conjoint surgery, co-surgeon (Assist.)	1356.05	1720.15
45474	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	2885.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 50 percent or more but less than 60 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	2164.25	2797.75 Y
45475	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	2177.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 50 percent or more but less than 60 percent of total body surface - conjoint surgery, co-surgeon (Assist.)	1632.95	2089.35
45477	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	3374.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 60 percent or more but less than 70 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	2530.8	3286.5 Y
45478	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	2546.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 60 percent or more but less than 70 percent of total body surface - conjoint surgery, co-surgeon (Assist.)	1908.9	2457.3
45480	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	4048.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 70 percent or more but less than 80 percent of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	3897.3	3775.15 Y
45481	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	2914.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 70 percent or more but less than 80 percent of total body surface - conjoint surgery, co-surgeon (Assist.)	2185.95	2826.7
45483	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	4401.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 80 percent or more of total body surface - conjoint surgery, principal surgeon (Anaes.) (Assist.)	3301.05	4313.45 Y
45484	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/07/2021	3317.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - involving 80 percent or more of total body surface - conjoint surgery, co-surgeon (Assist.)	2490.6	3232.9
45485	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	549.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - upper eyelid, nose, lip, ear or palm of the hand (Anaes.) (Assist.)	411.85	Y
45486	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - forehead, cheek, anterior aspect of the neck, chin, plantar aspect of the foot, heel or genitalia (Anaes.) (Assist.)	352.05	Y
45487	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/1999	1/07/2021	422.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - whole of toe (Anaes.) (Assist.)	316.9	359.15 Y
45488	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	469.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - the whole of 1 digit of the hand (Anaes.) (Assist.)	352.05	Y
45489	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1999	1/07/2021	704.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - the whole of 2 digits of the hand (Anaes.) (Assist.)	528.2	616.35 Y
45490	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	939.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - the whole of 3 digits of the hand (Anaes.) (Assist.)	704.35	Y
45491	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1173.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - the whole of 4 digits of the hand (Anaes.) (Assist.)	880.35	Y
45492	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1408.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - the whole of 5 digits of the hand (Anaes.) (Assist.)	1056.35	Y
45493	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - portion of digit of hand (Anaes.) (Assist.)	316.9	Y
45494	1/11/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1999	1/07/2021	1705.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	FREE GRAFTING (split skin) to burns, including excision of burnt tissue - whole of face (excluding ears) (Anaes.) (Assist.)	1278.8	1617.15 Y
45496	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	432.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	FLAP, free tissue transfer using microvascular techniques - revision of, by open operation (Anaes.)	324.7	Y
45497	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	338.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	FLAP, free tissue transfer using microvascular techniques, or any autogenous breast reconstruction - complete revision of, by liposuction (Anaes.)	253.6	Y
45498	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	272.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	FLAP, free tissue transfer using microvascular techniques, or any autogenous breast reconstruction - staged revision of, by liposuction - first stage (Anaes.)	204.15	Y
45499	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	202.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	FLAP, free tissue transfer using microvascular techniques, or any autogenous breast reconstruction - staged revision of, by liposuction - second stage (Anaes.)	152.15	Y
45500	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MICROVASCULAR REPAIR using microsurgical techniques, with restoration of continuity of artery or vein of distal extremity or digit (Anaes.) (Assist.)	850.9	Y
45501	1/03/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1846.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/1999	MICROVASCULAR ANASTOMOSIS of artery using microsurgical techniques, for re-implantation of limb or digit (Anaes.) (Assist.)	1384.95	Y
45502	1/07/1993	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1846.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/1999	MICROVASCULAR ANASTOMOSIS of vein using microsurgical techniques, for re-implantation of limb or digit (Anaes.) (Assist.)	1384.95	Y
45503	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	2112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MICRO-ARTERIAL OR MICRO-VENOUS GRAFT using microsurgical techniques (Anaes.) (Assist.)	1584.5	Y
45504	1/03/1999	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1846.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/1999	MICROVASCULAR ANASTOMOSIS of artery using microsurgical techniques, for free transfer of tissue including setting in of free flap (Anaes.) (Assist.)	1384.95	Y

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45505	1/03/1999	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1846.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/1999	MICROVASCULAR ANASTOMOSIS of vein using microsurgical techniques, for free transfer of tissue including setting in of free flap (Anaes.) (Assist.)	1384.95		Y
45506	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	228.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	SCAR, of face or neck, not more than 3 cm in length, revision of, where undertaken in the operating theatre of a hospital, or where performed by a specialist in the practice of his or her specialty (Anaes.)	171.65	194.55	Y
45512	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	307.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	SCAR, of face or neck, more than 3 cm in length, revision of, where undertaken in the operating theatre of a hospital, or where performed by a specialist in the practice of his or her specialty (Anaes.)	230.8	261.55	Y
45515	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	194.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	SCAR, other than on face or neck, not more than 7 cms in length, revision of, as an independent procedure, where undertaken in the operating theatre of a hospital or where performed by a specialist in the practice of his or her specialty (Anaes.)	145.6	165	Y
45518	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	234.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1993	SCAR, other than on face or neck, more than 7 cms in length, revision of, as an independent procedure, where undertaken in the operating theatre of a hospital, or where performed by a specialist in the practice of his or her specialty (Anaes.)	176.15	199.65	Y
45519	1/11/1996	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	446.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1996	EXTENSIVE BURN SCARS OF SKIN (more than 1 percent of body surface area), excision of, for correction of scar contracture (Anaes.) (Assist.)	334.85		Y
45520	1/07/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	936.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Reduction mammaplasty (unilateral) with surgical repositioning of nipple,in the context of breast cancer or developmental abnormality of the breast (Anaes.) (Assist.)	702.7		Y
45522	1/07/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	657.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Reduction mammaplasty (unilateral) without surgical repositioning of the nipple: (a) excluding the treatment of gynaecomastia; and (b) not with insertion of any prosthesis (Anaes.) (Assist.)	493.05		Y
45523	1/11/2018	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1405.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Reduction mammaplasty (bilateral) with surgical repositioning of the nipple: (a) for patients with macromastia and experiencing pain in the neck or shoulder region; and (b) not with insertion of any prosthesis (Anaes.) (Assist.)	1054.1		Y
45524	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Mammaplasty, augmentation (unilateral) in the context of: (a) breast cancer; or (b) developmental abnormality of the breast, if there is a difference in breast volume, as demonstrated by an appropriate volumetric measurement technique, of at least: (i) 20% in normally shaped breasts; or (ii) 10% in tubular breasts or in breasts with abnormally high inframammary folds. Applicable only once per occasion on which the service is provided (Anaes.) (Assist.)	578.8		Y
45527	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	771.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Breast reconstruction (unilateral), following mastectomy, using a permanent prosthesis (Anaes.) (Assist.)	578.8		Y
45528	19/08/1997	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1157.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Mammaplasty, augmentation, bilateral (other than a service to which Item45527 applies), if: (a) reconstructive surgery is indicated because of: (i) developmental malformation of breast tissue (excluding hypomastia); or (ii) disease of or trauma to the breast (other than trauma resulting from previous elective cosmetic surgery); or (iii) amastia secondary to a congenital endocrine disorder; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)	868.05		Y
45530	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1143.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	Breast reconstruction (unilateral), using a musculocutaneous or other large muscle or myocutaneous flap, including repair of secondary tissue defect if required, excluding repair of muscular aponeurotic layer, other than a service associated with a service to which Item 30165, 30168, 30171, 30172, 30176, 30177 or 30179 applies (H) (Anaes.) (Assist.)	858		Y
45533	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1295.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	BREAST RECONSTRUCTION (including breast sharing technique (First stage) including breast reduction, transfer of complete skin and breast tissue flap, split skin graft to pedicle of flap or other similar procedure (Anaes.) (Assist.)	971.65		Y
45534	1/11/2021	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2021	1/01/2022	657.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Autologous fat grafting, unilateral service (harvesting, preparation and injection of adipocytes) if: (a) the autologous fat grafting is for one or more of the following purposes: (i) the correction of defects arising from treatment and prevention of breast cancer in patients with contour defects, greater than or equal to 20% volume asymmetry, post-treatment pain or poor prosthetic coverage; (ii) the preparation of post mastectomy thin or irradiated skin flaps in patients intending to have breast reconstruction; (iii) breast reconstruction in breast cancer patients; (iv) the correction of developmental disorders of the breast; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes Up to a total of 4 services per side (for total treatment of a single breast) (H) (Anaes.)	493.05		Y
45535	1/11/2021	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2021	1/01/2022	1150.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Autologous fat grafting, bilateral service (harvesting, preparation and injection of adipocytes) if: (a) the autologous fat grafting is for one or more of the following purposes: (i) the correction of defects arising from treatment and prevention of breast cancer in patients with contour defects, greater than or equal to 20% volume asymmetry, post-treatment pain or poor prosthetic coverage; (ii) the preparation of post mastectomy thin or irradiated skin flaps in patients intending to have breast reconstruction; (iii) breast reconstruction in breast cancer patients; (iv) the correction of developmental disorders of the breast; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes Up to a total of 4 services (H) (Anaes.)	862.8		Y
45536	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	476.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BREAST RECONSTRUCTION using breast sharing technique (second stage) including division of pedicle, inserting of breast flap, with closure of donor site or other similar procedure (Anaes.) (Assist.)	357.35		Y
45539	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1116.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	BREAST RECONSTRUCTION (unilateral), following mastectomy, using tissue expansion - insertion of tissue expansion unit and all attendances for subsequent expansion injections (Anaes.) (Assist.)	836		Y
45542	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	638.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BREAST RECONSTRUCTION (unilateral), following mastectomy, using tissue expansion - removal of tissue expansion unit and insertion of permanent prosthesis (Anaes.) (Assist.)	478.7		Y
45545	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	647.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	NIPPLE OR AREOLA or both, reconstruction of, by any surgical technique (Anaes.) (Assist.)	485.85	559.9	Y
45546	1/11/1998	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1998	1/07/2021	205.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1998	NIPPLE OR AREOLA or both, intradermal colouration of, following breast reconstruction after mastectomy or for congenital absence of nipple	154.4	175	
45548	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	BREAST PROSTHESIS, removal of, as an independent procedure (Anaes.)	216	244.8	Y
45551	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	461.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Breast prosthesis, removal of, with excision of at least half of the fibrous capsule, not with insertion of any prosthesis. The excised specimen must be sent for histopathology and the volume removed must be documented in the histopathology report (Anaes.) (Assist.)	346.25		Y
45553	1/11/2006	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	594.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Breast prosthesis, removal of and replacement with another prosthesis, following medical complications (for rupture, migration of prosthetic material or symptomatic capsular contracture), if: (a) either: (i) it is demonstrated by intra-operative photographs post-removal that removal alone would cause unacceptable deformity; or (ii) the original implant was inserted in the context of breast cancer or developmental abnormality; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)	446.1		Y
45554	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	727.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Breast prosthesis, removal and replacement with another prosthesis, following medical complications (for rupture, migration of prosthetic material or symptomatic capsular contracture), including excision of at least half of the fibrous capsule or formation of a new pocket, or both, if: (a) either: (i) it is demonstrated by intra-operative photographs post-removal that removal alone would cause unacceptable deformity; or (ii) the original implant was inserted in the context of breast cancer or developmental abnormality; and (b) the excised specimen is sent for histopathology and the volume removed is documented in the histopathology report; and (c) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)	545.85		Y
45556	1/11/2001	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	797.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Breast ptosis, correction of (unilateral), in the context of breast cancer or developmental abnormality, if photographic evidence (including anterior, left lateral and right lateral views) and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes Applicable only once per occasion on which the service is provided (Anaes.) (Assist.)	597.8		Y
45558	1/11/2001	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1195.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Correction of bilateral breast ptosis by mastopexy, if: (a) at least two-thirds of the breast tissue, including the nipple, lies inferior to the inframammary fold where the nipple is located at the most dependent, inferior part of the breast contour; and (b) photographic evidence (including anterior, left lateral and right lateral views), with a marker at the level of the inframammary fold, demonstrating the clinical need for this service, is documented in the patient notes Applicable only once per lifetime (H) (Anaes.) (Assist.)	896.65		Y
45560	1/12/1991	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	492.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HAIR TRANSPLANTATION for the treatment of alopecia of congenital or traumatic origin or due to disease, excluding male pattern baldness, not being a service to which another item in this Group applies (Anaes.)	369.65	418.95	Y
45561	1/05/2007	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/05/2007	1/07/2021	1846.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	MICROVASCULAR ANASTOMOSIS of artery or vein using microsurgical techniques, for supercharging of pedicled flaps (Anaes.) (Assist.)	1384.95		Y
45562	1/03/1999	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/03/1999	1/07/2021	1143.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/1999	FREE TRANSFER OF TISSUE involving raising of tissue on vascular or neurovascular pedicle, including direct repair of secondary cutaneous defect if performed, excluding flap for male pattern baldness (Anaes.) (Assist.)	858	1056.05	Y
45563	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1143.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/1999	NEUROVASCULAR ISLAND FLAP, including direct repair of secondary cutaneous defect if performed, excluding flap for male pattern baldness (Anaes.) (Assist.)	858	1056.05	Y
45564	1/11/1999	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2649.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2016	Free transfer of tissue reconstructive surgery for the repair of major tissue defect due to congenital deformity, surgery or trauma, involving anastomoses of up to 2 vessels using microvascular techniques and including raising of tissue on a vascular or neurovascular pedicle, preparation of recipient vessels, transfer of tissue, inserting of tissue at recipient site and direct repair of secondary cutaneous defect if performed,other than a service associated with a service to which Item 30165, 30168, 30171, 30172, 30176, 30177, 30179, 45501, 45502, 45504, 45505 or 45562 applies-conjoint surgery, principal specialist surgeon (H) (Anaes.) (Assist.)	1987.15		Y
45565	1/11/1999	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1987.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2016	Free transfer of tissue reconstructive surgery for the repair of major tissue defect due to congenital deformity, surgery or trauma, involving anastomoses of up to 2 vessels using microvascular techniques and including raising of tissue on a vascular or neurovascular pedicle, preparation of recipient vessels, transfer of tissue, inserting of tissue at recipient site and direct repair of secondary cutaneous defect if performed, other than a service associated with a service to which Item 30165, 30168, 30171, 30172, 30176, 30177, 30179, 45501, 45502, 45504, 45505 or 45562 applies-conjoint surgery, conjoint specialist surgeon (H) (Assist.)	1490.4		
45566	1/12/1991	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1116.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/1991	TISSUE EXPANSION not being a service to which Item 45539 or 45542 applies - insertion of tissue expansion unit and all attendances for subsequent expansion injections (Anaes.) (Assist.)	836		Y
45568	1/11/2003	ITable]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	461.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	TISSUE EXPANDER, removal of, with complete excision of fibrous capsule (Anaes.) (Assist.)	346.25		Y
45569	1/11/2006	ITable]	3	TB	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	705.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2006	CLOSURE OF ABDOMEN WITH RECONSTRUCTION OF UMBILICUS, with or without lipectomy, being a service associated with Items 45562, 45564, 45565 or 45530 (Anaes.) (Assist.)	528.85		Y

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45570	1/11/2006	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	952.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	CLOSURE OF ABDOMEN, repair of musculoaponeurotic layer, being a service associated with item 45569 (Anaes.) (Assist.)	714.05	864.15	Y
45572	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	303.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	INTRA OPERATIVE TISSUE EXPANSION performed during an operation when combined with a service to which another Item in Group T8 applies including expansion injections and excluding treatment of male pattern baldness (Anaes.)	227.65	258	Y
45575	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	749.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FACIAL NERVE PARALYSIS, free fascia graft for (Anaes.) (Assist.)	562.05	661.5	Y
45578	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	867.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FACIAL NERVE PARALYSIS, muscle transfer for (Anaes.) (Assist.)	650.9		Y
45581	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	FACIAL NERVE PALSY, excision of tissue for (Anaes.)	216	244.8	Y
45584	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	657.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Liposuction (suction assisted lipolysis) to one regional area (one limb or trunk), for treatment of post traumatic pseudolipoma, if photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	493.05		Y
45585	19/06/1997	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	657.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Liposuction (suction assisted lipolysis) to one regional area (one limb or trunk), other than a service associated with a service to which Item31525 applies, if: (a) the liposuction is for: (i) the treatment of Barraquer-Simons syndrome, lymphoedema or macrodystrophia lipomatosa; or (ii) the reduction of a buffalo hump that is secondary to an endocrine disorder or pharmacological treatment of a medical condition; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	493.05		Y
45587	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	926.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Meloplasty for correction of facial asymmetry if: (a) the asymmetry is secondary to trauma (including previous surgery), a congenital condition or a medical condition (such as facial nerve palsy); and (b) the meloplasty is limited to one side of the face (Anaes.) (Assist.)	695.25		Y
45588	19/06/1997	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1390.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Meloplasty (excluding browlifts and chinlift platysmaplasties), bilateral, if: (a) surgery is indicated to correct a functional impairment due to a congenital condition, disease (excluding post-acne scarring) or trauma (other than trauma resulting from previous elective cosmetic surgery); and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)	1042.95		Y
45589	1/11/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2021	1/01/2022	657.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Autologous fat grafting (harvesting, preparation and injection of adipocytes) if: (a) the autologous fat grafting is for either or both of the following purposes: (i) the correction of asymmetry arising from volume and contour defects in craniofacial disorders—up to a total of 4 services if each service is provided at least 3 months after the previous service; (ii) the treatment of burn scar or associated skin graft in the context of scar contracture, contour deformity or neuropathic pain, for patients who have undergone a minimum of 3 months of topical therapies, including silicone and pressure therapy, with an unsatisfactory or minimal level of improvement—up to a total of 4 services per region of the body (upper or lower limbs, trunk, neck or face) if each service provided per region of the body is provided at least 3 months after the previous such service; and (b) both: (i) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes; and (ii) for craniofacial disorders, evidence of diagnosis of the qualifying craniofacial disorder is documented in the patient notes (iii) (Anaes.)	493.05		Y
45590	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	502.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	ORBITAL CAVITY, reconstruction of a walled floor, with or without foreign implant (Anaes.) (Assist.)	377.15		Y
45593	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	590.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	ORBITAL CAVITY, bone or cartilage graft to orbital wall or floor including reduction of prolapsed or entrapped orbital contents (Anaes.) (Assist.)	443		Y
45596	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	936.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MAXILLA, total resection of (Anaes.) (Assist.)	702.7		Y
45597	1/04/1992	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1254.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/04/1992	MAXILLA, total resection of both maxillae (Anaes.) (Assist.)	940.7		Y
45599	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	974.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MANDIBLE, total resection of both sides, including condylectomies where performed (Anaes.) (Assist.)	730.9	886.6	Y
45602	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	727.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MANDIBLE, including lower border, OR MAXILLA, sub-total resection of (Anaes.) (Assist.)	545.85		Y
45605	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	611.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MANDIBLE OR MAXILLA, segmental resection of, for tumours or cysts (Anaes.) (Assist.)	458.55		Y
45608	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	840.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MANDIBLE, hemimandibular reconstruction with bone graft, not being a service associated with a service to which Item 45589 applies (Anaes.) (Assist.)	645.65		Y
45611	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	492.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	MANDIBLE, condylectomy (Anaes.) (Assist.)	369.75		Y
45614	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	611.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	EYELID, WHOLE THICKNESS RECONSTRUCTION OF other than by direct suture only (Anaes.) (Assist.)	458.55	523.5	Y
45617	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	244.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Upper eyelid, reduction of, if: (a) the reduction is for any of the following: (i) skin redundancy that causes a visual field defect (confirmed by an optometrist or ophthalmologist) or intertriginous inflammation of the eyelid; (ii) herniation of orbital fat in exophthalmos; (iii) facial nerve palsy; (iv) post traumatic scarring; (v) the restoration of symmetry of contralateral upper eyelid in respect of one of the conditions mentioned in subparagraphs (i) to (iv); and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	183.45	207.95	Y
45620	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	339.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Lower eyelid, reduction of, if: (a) the reduction is for: (i) herniation of orbital fat in exophthalmos, facial nerve palsy or post-traumatic scarring; or (ii) the restoration of symmetry of the contralateral lower eyelid in respect of one of these conditions; and (b) photographic and/or diagnostic imaging evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	254.45	288.4	Y
45623	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	752.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Ptosis of upper eyelid (unilateral), correction of, by: (a) sutured elevation of the tarsal plate on the eyelid retractors (Muller's or levator muscle or levator aponeurosis); or (b) sutured suspension to the brow/frontalis muscle; Not applicable to a service for repair of mechanical ptosis to which Item6627 applies (Anaes.) (Assist.)	564.25	664.4	Y
45624	1/07/1998	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/07/1998	1/07/2021	975.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Ptosis of upper eyelid, correction of, by: (a) sutured elevation of the tarsal plate on the eyelid retractors (Muller's or levator muscle or levator aponeurosis); or (b) sutured suspension to the brow/frontalis muscle; if a previous ptosis surgery has been performed on that side (Anaes.) (Assist.)	731.55	887.5	Y
45625	1/07/1998	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	A	C	1/11/2005	1/07/2021	195.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1998	PTOSIS of eyelid, correction of eyelid height by revision of levator sutures within one week of primary repair by levator resection or advancement, performed in the operating theatre of a hospital (Anaes.)	146.4		Y
45626	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	338.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Ectropion or entropion, not caused by trachoma, correction of (unilateral) (Anaes.)	254.45	288.4	Y
45627	1/11/2019	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	338.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2019	Ectropion or entropion, caused by trachoma, correction of (unilateral) (Anaes.)	254.45	288.4	Y
45629	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	SYMBLEPHARON, grafting for (Anaes.) (Assist.)	369.75	419.05	Y
45632	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	452.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Rhinoplasty, partial, involving correction of one or both lateral cartilages, one or both alar cartilages or one or both lateral cartilages and alar cartilages, if: (a) the indication for surgery is: (i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or (ii) significant acquired, congenital or developmental deformity; and (b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	399.55	452.8	Y
45635	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	611.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Rhinoplasty, partial, involving correction of bony vault only, if: (a) the indication for surgery is: (i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or (ii) significant acquired, congenital or developmental deformity; and (b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	458.55	523.5	Y
45641	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	1109.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Rhinoplasty, total, including correction of all bony and cartilaginous elements of the external nose, with or without autogenous cartilage or bone graft from a local site (nasal), if: (a) the indication for surgery is: (i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or (ii) significant acquired, congenital or developmental deformity; and (b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	831.9		Y
45644	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1331.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Rhinoplasty, total, including correction of all bony and cartilaginous elements of the external nose involving autogenous bone or cartilage graft obtained from distant donor site, including obtaining of graft, if: (a) the indication for surgery is: (i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or (ii) significant acquired, congenital or developmental deformity; and (b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)	998.45		Y
45645	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	232.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/1994	CHOANAL ATRESIA, repair of by puncture and dilatation (Anaes.)	174.55		Y
45646	1/11/1994	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	936.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/1994	CHOANAL ATRESIA - correction by open operation with bone removal (Anaes.) (Assist.)	702.7	849	Y
45647	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1331.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	FACE, contour restoration of 1 region, using autogenous bone or cartilage graft (not being a service to which Item 45644 applies) (Anaes.) (Assist.)	998.45		Y
45650	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	151.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Rhinoplasty, revision of, if: (a) the indication for surgery is: (i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or (ii) significant acquired, congenital or developmental deformity; and (b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.)	115.35	130.7	Y
45652	1/11/1995	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	C	1/11/1995	1/07/2021	370.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Rhinophyma of a moderate or severe degree, carbon dioxide laser or erbium laser excision - ablation of (Anaes.)	278.1	315.2	Y
45653	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	370.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	RHINOPLASTY, shaving of (Anaes.)	278.1	315.2	Y
45656	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	522.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	COMPOSITE GRAFT (Chondrocutaneous or chondromucosal) to nose, ear or eyelid (Anaes.) (Assist.)	391.95	444.25	Y
45658	1/03/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/03/2021	1/07/2021	542.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Correction of a congenital deformity of the ear if: (a)the congenital deformity is not related to a prominent ear; and (b) the deformity has been clinically diagnosed as a constricted ear, Stahl's ear, or a similar congenital deformity; and (c) photographic evidence demonstrating the clinical need for this service is documented in the patient notes. (Anaes.) (Assist.)	406.8		Y
45659	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	542.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Correction of a congenital deformity of the ear if: (a) the patient is less than 18 years of age; and (b) the deformity is characterised by an absence of the antihelical fold and/or large scapha and/or large concha; and (c) photographic evidence demonstrating the clinical need for this service is documented in the patient notes (Anaes.) (Assist.)	406.8		Y
45660	1/11/2000	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2995.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2000	EXTERNAL EAR, COMPLEX TOTAL RECONSTRUCTION OF, using multiple costal cartilage grafts to form a framework, including the harvesting and sculpturing of the cartilage and its insertion, for congenital absence, microtia or post-traumatic loss of entire or substantial portion of pinna (first stage).- performed by a specialist in the practice of his or her specialty (Anaes.) (Assist.)	2246.55		Y

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45661	1/11/2000	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1331.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	EXTERNAL EAR, COMPLEX TOTAL RECONSTRUCTION OF, elevation of costal cartilage framework using cartilage previously stored in abdominal wall, including the use of local skin and fascia flaps and full thickness skin graft to cover cartilage (second stage) - performed by a specialist in the practice of his or her specialty (Anaes.) (Assist.)	998.45	Y
45662	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	729.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CONGENITAL ATRESIA, reconstruction of external auditory canal (Anaes.) (Assist.)	547.3	Y
45665	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LIP, EYELID OR EAR, FULL THICKNESS WEDGE EXCISION OF, with repair by direct sutures (Anaes.)	254.45	288.4 Y
45668	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	VERMILIONECTOMY, by surgical excision (Anaes.)	254.45	288.4 Y
45669	1/11/1995	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1995	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Vermilionectomy for biopsy-confirmed cellular atypia, using carbon dioxide laser or erbium laser excision - ablation (Anaes.)	254.45	288.4 Y
45671	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	867.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LIP OR EYELID RECONSTRUCTION using full thickness flap (Abbe or similar), first stage (Anaes.) (Assist.)	650.9	779.95 Y
45674	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	252.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LIP OR EYELID RECONSTRUCTION using full thickness flap (Abbe or similar), second stage (Anaes.)	189.3	214.55 Y
45675	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	MACROCHEILIA or macroglossia, operation for (Anaes.) (Assist.)	377.15	Y
45676	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	598.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	MACROSTOMIA, operation for (Anaes.) (Assist.)	448.95	Y
45677	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	563.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, unilateral/primary repair; 1 stage, without anterior palate repair (Anaes.) (Assist.)	422.45	Y
45680	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	704.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, unilateral - primary repair, 1 stage, with anterior palate repair (Anaes.) (Assist.)	528.2	Y
45683	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	782.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, bilateral - primary repair, 1 stage, without anterior palate repair (Anaes.) (Assist.)	586.8	Y
45686	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	923.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, bilateral - primary repair, 1 stage, with anterior palate repair (Anaes.) (Assist.)	692.65	Y
45689	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	272.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, lip adhesion procedure, unilateral or bilateral (Anaes.) (Assist.)	204.3	Y
45692	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, partial revision, including minor flap revision alignment and adjustment, including revision of minor whistle deformity if performed (Anaes.)	234.75	266.05 Y
45695	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	508.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, total revision, including major flap revision, muscle reconstruction and revision of major whistle deformity (Anaes.) (Assist.)	381.45	Y
45698	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	477.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP, primary columella lengthening procedure, bilateral (Anaes.)	358.05	Y
45701	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	860.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP RECONSTRUCTION using full thickness flap (Abbe or similar), first stage (Anaes.) (Assist.)	645.65	Y
45704	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT LIP RECONSTRUCTION using full thickness flap (Abbe or similar), second stage (Anaes.)	234.75	266.05 Y
45707	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	813.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT PALATE, primary repair (Anaes.) (Assist.)	610.2	Y
45710	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	508.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT PALATE, secondary/repair/closure of fistula using local flaps (Anaes.)	381.45	Y
45713	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	579.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT PALATE, secondary/repair/lengthening procedure (Anaes.) (Assist.)	434.4	Y
45714	1/11/1995	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	813.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1995	ORO-NASAL FISTULA, closure/repair of, including services to which Item 45200, 45203 or 45239 applies (Anaes.) (Assist.)	610.2	Y
45716	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	813.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VELOPHARYNGEAL INCOMPETENCE, pharyngeal flap for, or pharyngoplasty for (Anaes.)	610.2	Y
45720	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	1005.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible or maxilla, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	754.5	918.05 Y
45723	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1134.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible or maxilla, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (H) (Anaes.) (Assist.)	850.9	Y
45726	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1282	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible or maxilla, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site (H) (Anaes.) (Assist.)	961.5	Y
45729	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1439.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible or maxilla, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (H) (Anaes.) (Assist.)	1079.85	Y
45731	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1459.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible or maxilla, osteotomies or osteectomies of, involving 3 or more such procedures on the 1 jaw, including transposition of nerves and vessels and bone grafts taken from the same site (H) (Anaes.) (Assist.)	1094.7	Y
45732	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	1641.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible or maxilla, osteotomies or osteectomies of, involving 3 or more such procedures on the 1 jaw, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (H) (Anaes.) (Assist.)	1232.4	Y
45735	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1676.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible and maxilla, osteotomies or osteectomies of, involving 2 such procedures of each jaw, including transposition of nerves and vessels and bone grafts taken from the same site (H) (Anaes.) (Assist.)	1257.3	Y
45738	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1885.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible and maxilla, osteotomies or osteectomies of, involving 2 such procedures of each jaw, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (H) (Anaes.) (Assist.)	1414.35	Y
45741	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1844.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible and maxilla, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of 1 jaw and 2 such procedures of the other jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site (H) (Anaes.) (Assist.)	1383.1	Y
45744	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2073.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Mandible and maxilla, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of 1 jaw and 2 such procedures of the other jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (H) (Anaes.) (Assist.)	1555.1	Y
45747	1/07/1998	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1998	1/07/2021	2011.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	MANDIBLE AND MAXILLA, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of each jaw, including genioplasty (when performed) and transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1508.95	1924 Y
45752	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	2253.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	MANDIBLE AND MAXILLA, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of each jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (H) (Anaes.) (Assist.)	1690.15	Y
45753	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	2326.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1993	MIDFACIAL OSTEOTOMIES - Le Fort II, Modified Le Fort III (Nasomaler), Modified Le Fort III(Malar-Maxillary), Le Fort III involving 3 or more osteotomies of the midface including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1700.15	2178.95 Y
45754	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2717.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MIDFACIAL OSTEOTOMIES - Le Fort II, Modified Le Fort III (Nasomaler), Modified Le Fort III (Malar-Maxillary), Le Fort III involving 3 or more osteotomies of the midface including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	2038.1	Y
45755	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	382.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	TEMPOROMANDIBULAR PARTIAL OR TOTAL MENISCECTOMY (Anaes.) (Assist.)	287	325.3 Y
45758	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	684.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPORO-MANDIBULAR JOINT, arthroplasty (Anaes.) (Assist.)	513.6	Y
45761	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2005	1/07/2021	779	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	GENIOPLASTY, including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	584.25	Y
45767	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	2613.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HYPERTELORISM, correction of, intracranial (Anaes.) (Assist.)	1960.1	2525.55 Y
45770	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2001.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	HYPERTELORISM, correction of, subcranial (Anaes.) (Assist.)	1501.4	Y
45773	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1824.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEACHER COLLINS SYNDROME, PERIORBITAL CORRECTION OF, with rib and iliac bone grafts (Anaes.) (Assist.)	1368.3	1736.5 Y
45776	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1824.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ORBITAL DYSTOPIA (UNILATERAL), CORRECTION OF, with total repositioning of 1 orbit, intracranial (Anaes.) (Assist.)	1368.3	Y
45779	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1341.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ORBITAL DYSTOPIA (UNILATERAL), CORRECTION OF, with total repositioning of 1 orbit, extracranial (Anaes.) (Assist.)	1006.05	Y
45782	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1025.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FRONTOORBITAL ADVANCEMENT, UNILATERAL (Anaes.) (Assist.)	769.2	937.7 Y
45785	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1735.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CRANIAL VAULT RECONSTRUCTION for oxycephaly, brachycephaly, turricephaly or similar condition(bilateral frontoorbital advancement) (Anaes.) (Assist.)	1301.8	Y
45788	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1715.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GLENOID FOSSA, ZYGOMATIC ARCH AND TEMPORAL BONE, RECONSTRUCTION OF, (Obwegeser technique) (Anaes.) (Assist.)	1287	Y
45791	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	926.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ABSENT CONDYLE AND ASCENDING RAMUS in hemifacial microsomia, CONSTRUCTION OF, not including harvesting of graft material (Anaes.) (Assist.)	695.25	Y
45794	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	OSSEO-INTEGRATION PROCEDURE - extra-oral, implantation of titanium fixture, not for implantable bone conduction hearing system device (Anaes.)	393.25	445.7 Y
45797	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	194.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	OSSEO-INTEGRATION PROCEDURE, fixation of transcutaneous abutment, not for implantable bone conduction hearing system device (Anaes.)	145.6	165 Y
45799	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ASPIRATION BIOPSY of 1 or MORE JAW CYSTS as an independent procedure to obtain material for diagnostic purposes and not being a service associated with an operative procedure on the same day (Anaes.)	22.95	26.05 Y
45801	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	132.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOUR, CYST, ULCER OR SCAR, (other than a scar removed during the surgical approach at an operation),in the oral and maxillofacial region, up to 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane, where the removal is by surgical excision and suture, not being a service to which item 45803 applies (Anaes.)	99.1	112.3 Y
45803	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOURS, CYSTS, ULCERS OR SCARS, (other than a scar removed during the surgical approach at an operation), in the oral and maxillofacial region, up to 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane, where the removal is by surgical excision and suture, and the procedure is performed on more than 3 but not more than 10 lesions (Anaes.) (Assist.)	254.45	288.4 Y

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45805	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	179.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOUR, CYST, ULCER OR SCAR, (other than a scar removed during the surgical approach at an operation), in the oral and maxillofacial region, more than 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane (Anaes.)	134.65	152.6	Y
45807	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	256.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOUR, CYST (other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5mm separation between the cyst lining and tooth structure or where a tumour or cyst has been proven by positive histopathology), ULCER OR SCAR (other than a scar removed during the surgical approach at an operation), in the oral and maxillofacial region, removal of, not being a service to which another item in this Subgroup applies, involving muscle, bone, or other deep tissue (Anaes.)	192.4	218.05	Y
45809	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOUR OR DEEP CYST (other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5mm separation between the cyst lining and tooth structure or where a tumour or cyst has been proven by positive histopathology), in the oral and maxillofacial region, removal of, requiring wide excision, not being a service to which another item in this Subgroup applies (Anaes.) (Assist.)	289.95	328.6	Y
45811	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	522.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOUR, in the oral and maxillofacial region, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, without skin or mucosal graft (Anaes.) (Assist.)	391.95	444.25	Y
45813	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TUMOUR, in the oral and maxillofacial region, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, with skin or mucosal graft (Anaes.) (Assist.)	458.55	523.5	Y
45815	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	OPERATION ON MANDIBLE OR MAXILLA (other than alveolar margins) for chronic osteomyelitis - 1 bone or in combination with adjoining bones (Anaes.) (Assist.)	278.1	315.2	Y
45817	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	483.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	OPERATION ON SKULL for OSTEOMYELITIS (Anaes.) (Assist.)	362.55	410.85	Y
45819	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	611.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	OPERATION ON ANY COMBINATION OF ADJOINING BONES IN THE ORAL AND MAXILLOFACIAL REGION, being bones referred to in item 45817 (Anaes.) (Assist.)	458.55	523.45	Y
45821	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	396.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	BONE GROWTH STIMULATOR IN THE ORAL AND MAXILLOFACIAL REGION, insertion of (Anaes.) (Assist.)	297.2	336.85	Y
45823	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	113.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ARCH BARS, 1 or more, which were inserted for dental fixation purposes to the maxilla or mandible, removal of, requiring general anaesthesia where undertaken in the operating theatre of a hospital (Anaes.)	85		Y
45825	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	352.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	MANDIBULAR OR PALATAL EXOSTOSIS, excision of (Anaes.) (Assist.)	264.05	299.25	Y
45827	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	336.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	MYLOHYOID RIDGE, reduction of (Anaes.) (Assist.)	252.4	286.05	Y
45829	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	256.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	MAXILLARY TUBEROSITY, reduction of (Anaes.)	192.55	218.2	Y
45831	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	336.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	PAPILLARY HYPERPLASIA OF THE PALATE, removal of - less than 5 lesions (Anaes.) (Assist.)	252.4	286.05	Y
45833	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	PAPILLARY HYPERPLASIA OF THE PALATE, removal of - 5 to 20 lesions (Anaes.) (Assist.)	316.9	359.15	Y
45835	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	PAPILLARY HYPERPLASIA OF THE PALATE, removal of - more than 20 lesions (Anaes.) (Assist.)	393.25	445.7	Y
45837	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	VESTIBULOPLASTY, submucosal or open, including excision of muscle and skin or mucosal graft when performed - unilateral or bilateral (Anaes.) (Assist.)	457.75	522.4	Y
45839	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	FLOOR OF MOUTH LOWERING (Obwegeser or similar procedure), including excision of muscle and skin or mucosal graft when performed - unilateral (Anaes.) (Assist.)	457.75	522.4	Y
45841	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	492.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ALVEOLAR RIDGE AUGMENTATION with bone or alloplast or both - unilateral (Anaes.) (Assist.)	369.65	418.95	Y
45843	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	302.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ALVEOLAR RIDGE AUGMENTATION - unilateral, insertion of tissue expanding device into maxillary or mandibular alveolar ridge region for (Anaes.) (Assist.)	226.75	257	Y
45845	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	OSSEO-INTEGRATION PROCEDURE - intra-oral implantation of titanium fixture to facilitate restoration of the dentition following resection of part of the maxilla or mandible for benign or malignant tumours (Anaes.)	393.25	445.7	Y
45847	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	194.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	OSSEO-INTEGRATION PROCEDURE - fixation of transmucosal abutment to fixtures placed following resection of part of the maxilla or mandible for benign or malignant tumours (Anaes.)	145.6	165	Y
45849	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	604.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	MAXILLARY SINUS, BONE GRAFT to floor of maxillary sinus following elevation of mucosal lining (sinus lift procedure), (unilateral) (Anaes.) (Assist.)	453.35	516.55	Y
45851	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	148.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, manipulation of, performed in the operating theatre of a hospital, not being a service associated with a service to which another item in this Subgroup applies (Anaes.)	111.6		Y
45853	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	926.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ABSENT CONDYLE and ASCENDING RAMUS in hemifacial microsomia, construction of, not including harvesting of graft material (Anaes.) (Assist.)	695.25	839.05	Y
45855	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	425.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, arthroscopy of, with or without biopsy, not being a service associated with any other arthroscopic procedure of that joint (Anaes.) (Assist.)	319	361.55	Y
45857	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	680.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	TEMPOROMANDIBULAR JOINT, arthroscopy of, removal of loose bodies, debridement, or treatment of adhesions - 1 or more such procedure of that joint, not being a service associated with any other arthroscopic procedure of the temporomandibular joint (Anaes.) (Assist.)	510.2	592.35	Y
45859	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	342.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, arthrotomy of, not being a service to which another item in this Subgroup applies (Anaes.) (Assist.)	257.2	291.5	Y
45861	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	907.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with or without microsurgical techniques (Anaes.) (Assist.)	680.75	819.75	Y
45863	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	1006.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with condylectomy or condylotomy, with or without microsurgical techniques (Anaes.) (Assist.)	754.65	918.25	Y
45865	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	302.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	ARTHROCENTESIS, irrigation of temporomandibular joint after insertion of 2 cannuli into the appropriate joint space(s) (Anaes.) (Assist.)	226.75	257	Y
45867	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	324.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, synovectomy of, not being a service to which another item in this Subgroup applies (Anaes.) (Assist.)	243.75	276.25	Y
45869	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	1216.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with or without meniscus or capsular surgery, including partial or total meniscectomy when performed, with or without microsurgical techniques (Anaes.) (Assist.)	912.3	1368.45	Y
45871	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	1392.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with meniscus, capsular and condylar head surgery, with or without microsurgical techniques (Anaes.) (Assist.)	1044.5	1304.75	Y
45873	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	1568.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, surgery of, involving procedures to which items 45863, 45867, 45869 and 45871 apply and also involving the use of tissue flaps, or cartilage graft, or allograft implants, with or without microsurgical techniques (Anaes.) (Assist.)	1173.75	1477.05	Y
45875	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT, stabilisation of, involving 1 or more of: repair of capsule, repair of ligament or internal fixation, not being a service to which another item in this Subgroup applies (Anaes.) (Assist.)	367.35	416.3	Y
45877	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	TEMPOROMANDIBULAR JOINT, orthodesis of, with synovectomy if performed, not being a service to which another item in this Subgroup applies (Anaes.) (Assist.)	367.35	416.3	Y
45879	1/11/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	324.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2004	TEMPOROMANDIBULAR JOINT OR JOINTS, application of external fixator to, other than for treatment of fractures (Anaes.) (Assist.)	243.75	276.25	Y
45882	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	The treatment of a premalignant lesion of the oral mucosa by a treatment using cryotherapy, diathermy or carbon dioxide laser.	33.6	38.05	
45885	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	461.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Facial, mandibular or lingual artery or vein or artery and vein, ligation of, not being a service to which item 41707 applies (Anaes.) (Assist.)	346.25	392.45	Y
45888	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	430.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FOREIGN BODY, in the oral and maxillofacial region, deep, removal of using interventional imaging techniques (Anaes.) (Assist.)	322.75	365.8	Y
45891	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	626.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SINGLE-STAGE LOCAL FLAP where indicated, repair to 1 defect, using temporalis muscle (Anaes.) (Assist.)	470.2	530	Y
45894	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	213	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FREE GRAFTING, in the oral and maxillofacial region, (mucosa or split skin) of a granulating area (Anaes.)	159.75	181.05	Y
45897	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	1112.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	ALVEOLAR CLEFT (congenital) unilateral, grafting of, including plastic closure of associated oro-nasal fistulae and ridge augmentation (Anaes.) (Assist.)	834.3	1024.5	Y
45900	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	250.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MANDIBLE, fixation by intermaxillary wiring, excluding wiring for obesity	188.2	213.3	
45939	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	465.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	PERIPHERAL BRANCHES OF THE TRIGEMINAL NERVE, cryosurgery of, for pain relief (Anaes.) (Assist.)	348.9	395.45	Y
45945	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	123.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MANDIBLE, treatment of a dislocation of, requiring open reduction (Anaes.)	92.65	105	Y
45975	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	134.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MAXILLA, unilateral or bilateral, treatment of fracture of, not requiring splinting	100.8	114.25	
45978	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	164.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MANDIBLE, treatment of fracture of, not requiring splinting	123.2	139.65	
45981	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	89.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	ZYGOMATIC BONE, treatment of fracture of, not requiring surgical reduction	66.85	75.75	
45984	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	641.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MAXILLA, treatment of a complicated fracture of, involving viscera, blood vessels or nerves requiring open reduction not involving plate(s) (Anaes.) (Assist.)	481.2	553.7	Y
45987	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	641.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MANDIBLE, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction not involving plate(s) (Anaes.) (Assist.)	481.2	553.7	Y
45990	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	876.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MAXILLA, treatment of a complicated fracture of, involving viscera, blood vessels or nerves requiring open reduction involving the use of plate(s) (Anaes.) (Assist.)	657.3	788.5	Y
45993	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	876.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MANDIBLE, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction involving the use of plate(s) (Anaes.) (Assist.)	657.3	788.5	Y
45996	1/11/2007	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MANDIBLE, treatment of a closed fracture of, involving a joint surface (Anaes.)	186.35	211.2	Y
46300	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	422.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrodesis of interphalangeal or metacarpophalangeal joint of hand, including either or both of the following (if performed): (a) joint debridement, (b) synovectomy —one joint (H) (Anaes.) (Assist.)	316.95		Y

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46303	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	547.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrodesis of carpometacarpal joint of hand, including either or both of the following (if performed): (a) joint debridement; (b) synovectomy —one joint (Hi) (Anaes.) (Assist.)	410.9	Y
46308	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	547.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Volar plate or soft tissue interposition arthroplasty of interphalangeal or metacarpophalangeal joint of hand, including either or both of the following (if performed): (a) realignment procedures; (b) tendon transfer —one joint (Anaes.) (Assist.)	410.85	465.65	Y
46309	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	547.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Prosthetic replacement arthroplasty or hemiarthroplasty of interphalangeal or metacarpophalangeal joint of hand, including any of the following (if performed): (a) ligament reconstruction; (b) ligament realignment; (c) synovectomy; (d) tendon transfer —one joint (Hi) (Anaes.) (Assist.)	410.85		Y
46312	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	704.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Prosthetic replacement arthroplasty or hemiarthroplasty of interphalangeal or metacarpophalangeal joint of hand, including any of the following (if performed): (a) ligament reconstruction; (b) ligament realignment; (c) synovectomy; (d) tendon transfer —2 joints of one hand (Hi) (Anaes.) (Assist.)	528.3		Y
46315	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	939.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Prosthetic replacement arthroplasty or hemiarthroplasty of interphalangeal or metacarpophalangeal joint of hand, including any of the following (if performed): (a) ligament reconstruction; (b) ligament realignment; (c) synovectomy; (d) tendon transfer —3 joints of one hand (Hi) (Anaes.) (Assist.)	704.4		Y
46318	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1173.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Prosthetic replacement arthroplasty or hemiarthroplasty of interphalangeal or metacarpophalangeal joint of hand, including any of the following (if performed): (a) ligament reconstruction; (b) ligament realignment; (c) synovectomy; (d) tendon transfer —4 joints of one hand (Hi) (Anaes.) (Assist.)	880.5		Y
46321	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1408.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Prosthetic replacement arthroplasty or hemiarthroplasty of interphalangeal or metacarpophalangeal joint of hand, including any of the following (if performed): (a) ligament reconstruction; (b) ligament realignment; (c) synovectomy; (d) tendon transfer; —5 joints of one hand (Hi) (Anaes.) (Assist.)	1056.6		Y
46322	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	821.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of prosthetic replacement arthroplasty or hemiarthroplasty of interphalangeal or metacarpal joint of hand, including any of the following (if performed): (a) bone grafting; (b) ligament reconstruction; (c) ligament realignment; (d) synovectomy; (e) tendon or ligament reconstruction; (f) tendon transfer; —one joint (Hi) (Anaes.) (Assist.)	616.35		Y
46324	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	958.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Trapezium replacement arthroplasty or prosthetic interpositional replacement of carpometacarpal joint of thumb, including either or both of the following (if performed): (a) ligament and tendon transfers; (b) rebalancing procedures (Hi) (Anaes.) (Assist.)	718.95		Y
46325	1/11/1994	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	958.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excisional arthroplasty of carpometacarpal joint of thumb, with excision of adjacent trapezoid, including either or both of the following (if performed): (a) ligament and tendon transfers; (b) realignment procedures (Hi) (Anaes.) (Assist.)	718.95		Y
46330	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	360.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ligamentous or capsular repair or reconstruction of interphalangeal or metacarpophalangeal joint of hand, including any of the following (if performed): (a) arthrostomy; (b) joint stabilisation; (c) synovectomy; —one joint (Hi) (Anaes.) (Assist.)	270.1		Y
46333	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ligamentous or capsular repair or reconstruction of interphalangeal or metacarpophalangeal joint of hand with graft, using graft or tendon, including any of the following (if performed): (a) arthrotomy; (b) harvest of graft; (c) joint stabilisation; (d) synovectomy; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 apply—one joint (Hi) (Anaes.) (Assist.)	440.2		Y
46335	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	485.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of digital extensor tendons of hand, distal to wrist, for diagnosed inflammatory arthritis, including any of the following (if performed): (a) reconstruction of extensor retinaculum; (b) removal of tendon nodules; (c) tenolysis; (d) tenoplasty; other than a service associated with a service to which item 30023, 30131 or 30330 applies—applicable only once per occasion on which the service is performed (Anaes.) (Assist.)	363.85	412.35	Y
46336	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	273.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of interphalangeal, metacarpophalangeal or carpometacarpal joint of hand, including any of the following (if performed): (a) capsulectomy; (b) debridement; (c) ligament or tendon realignment (or both); other than a service combined with a service to which item 46485 applies—one joint (Anaes.) (Assist.)	205.5	232.9	Y
46339	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	485.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of digital flexor tendons at wrist level, for diagnosed inflammatory arthritis, including either or both of the following (if performed): (a) tenolysis; (b) release of median nerve and carpal tunnel; other than a service associated with a service to which item 30023, 30131 or 30330 applies—applicable only once per occasion on which the service is performed (Hi) (Anaes.) (Assist.)	363.85		Y
46340	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	412.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of wrist flexor or extensor tendons of hand or wrist, for diagnosed inflammatory tenosynovitis, including any of the following (if performed): (a) reconstruction of flexor or extensor retinaculum; (b) removal of tendon nodules; (c) tenolysis; (d) tenoplasty; other than a service associated with a service to which item 30023, 30131 or 30330 applies—one or more compartments (Hi) (Anaes.) (Assist.)	309.3		Y
46341	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	264.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of wrist flexor or extensor tendons of hand or wrist, for non-inflammatory tenosynovitis or post traumatic synovitis, including any of the following (if performed): (a) reconstruction of flexor or extensor retinaculum; (b) removal of tendon nodules; (c) tenolysis; (d) tenoplasty; other than a service associated with a service to which item 30023, 30131 or 30330 applies—one or more compartments (Hi) (Anaes.) (Assist.)	198.35		Y
46342	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	485.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of distal radioulnar or carpometacarpal joint of hand—one or more joints (Hi) (Anaes.) (Assist.)	363.85		Y
46345	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	586.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Resection arthroplasty of distal radioulnar joint of hand, partial or complete, including any of the following (if performed): (a) ligament or tendon reconstructions; (b) joint stabilisation; (c) synovectomy (Hi) (Anaes.) (Assist.)	440.2		Y
46348	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	254.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Flexor tenosynovectomy of hand, distal to lumbrical origin, including any of the following (if performed): (a) removal of intratendinous nodules; (b) tenolysis; (c) tenoplasty; other than a service associated with a service to which item 30023 or 46363 applies—one ray (Hi) (Anaes.) (Assist.)	190.8		Y
46351	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	379.0	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Flexor tenosynovectomy of hand, distal to lumbrical origin, including any of the following (if performed): (a) removal of intratendinous nodules; (b) tenolysis; (c) tenoplasty; other than a service associated with a service to which item 30023 or 46363 applies—2 rays of one hand (Hi) (Anaes.) (Assist.)	284.7		Y
46354	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	506.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Flexor tenosynovectomy of hand, distal to lumbrical origin, including any of the following (if performed): (a) removal of intratendinous nodules; (b) tenolysis; (c) tenoplasty; other than a service associated with a service to which item 30023 or 46363 applies—3 rays of one hand (Hi) (Anaes.) (Assist.)	381.5		Y
46357	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	633.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Flexor tenosynovectomy of hand, distal to lumbrical origin, including any of the following (if performed): (a) removal of intratendinous nodules; (b) tenolysis; (c) tenoplasty; other than a service associated with a service to which item 30023 or 46363 applies—4 rays of one hand (Hi) (Anaes.) (Assist.)	475.45		Y
46360	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	763.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Flexor tenosynovectomy of hand, distal to lumbrical origin, including any of the following (if performed): (a) removal of intratendinous nodules; (b) tenolysis; (c) tenoplasty; other than a service associated with a service to which item 30023 or 46363 applies—5 rays of one hand (Hi) (Anaes.) (Assist.)	572.35		Y
46363	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	219.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Trigger finger release, for stenosing tenosynovitis, including either or both of the following (if performed): (a) synovectomy; (b) synovial biopsy; —one ray (Anaes.) (Assist.)	164.35	186.25	Y
46364	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	485.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Digital sympathectomy of hand, using microsurgical techniques, other than a service associated with a service to which item 30023 or 46363 applies—one digit or palmer arch (or both) or radial or ulnar artery (or both) (Anaes.) (Assist.)	363.85	412.35	Y
46365	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	273.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of rheumatoid nodules of hand —one lesion (Anaes.) (Assist.)	205.5	232.9	Y
46367	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	413.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	De Quervain's release, including any of the following (if performed): (a) synovectomy of extensor pollicis brevis; (b) synovectomy of abductor pollicis longus tendons; (c) retinaculum reconstruction; other than a service associated with a service to which item 46339 applies (Anaes.) (Assist.)	310.3	351.65	Y
46370	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	133.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Percutaneous fasciotomy for Dupuytren's contracture, by needle or chemical method, including either or both of the following (if performed): (a) immediate or delayed manipulation; (b) local or regional nerve block; —one ray (Anaes.) (Assist.)	99.85	113.15	Y
46372	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	445.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for Dupuytren's contracture, including dissection of nerves (if performed)—one ray (Hi) (Anaes.) (Assist.)	333.95		Y
46375	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	528.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for Dupuytren's contracture, including dissection of nerves (if performed)—2 rays (Hi) (Anaes.) (Assist.)	396.2		Y
46378	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	704.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for Dupuytren's contracture, including dissection of nerves (if performed)—3 rays (Hi) (Anaes.) (Assist.)	528.3		Y
46379	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	887.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for Dupuytren's contracture, including dissection of nerves (if performed)—4 rays (Hi) (Anaes.) (Assist.)	665.55		Y
46380	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1118.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for Dupuytren's contracture, including dissection of nerves (if performed)—5 rays (Hi) (Anaes.) (Assist.)	838.55		Y
46381	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	313	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Release of interphalangeal joint of hand, by open procedure, when performed in conjunction with an operation for Dupuytren's contracture—one joint (Hi) (Anaes.) (Assist.)	234.75		Y
46384	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	313	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Z-plasty or similar local flap procedure, when performed in conjunction with an operation for Dupuytren's contracture, including raising, transfer in-setting and suturing of both components (flaps)—one Z-plasty or local flap procedure (Hi) (Anaes.) (Assist.)	234.75		Y
46387	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	646.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for recurrence of Dupuytren's contracture, including either or both of the following (if performed): (a) dissection of nerves; (b) neurolysis; other than a service associated with a service to which item 30023 applies—one ray (Hi) (Anaes.) (Assist.)	484.35		Y
46390	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	861.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for recurrence of Dupuytren's contracture, including either or both of the following (if performed): (a) dissection of nerves; (b) neurolysis; other than a service associated with a service to which item 30023 applies—2 rays (Hi) (Anaes.) (Assist.)	645.8		Y
46393	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	997.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for recurrence of Dupuytren's contracture, including either or both of the following (if performed): (a) dissection of nerves; (b) neurolysis; other than a service associated with a service to which item 30023 applies—3 rays (Hi) (Anaes.) (Assist.)	748.4		Y
46394	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1243.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for recurrence of Dupuytren's contracture, including either or both of the following (if performed): (a) dissection of nerves; (b) neurolysis; other than a service associated with a service to which item 30023 applies—4 rays (Hi) (Anaes.) (Assist.)	932.6		Y

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46395	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1549.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fasciectomy for recurrence of Dupuytren's contracture, including either or both of the following (if performed): (a) dissection of nerves; (b) neurolysis; other than a service associated with a service to which Item 30023 applies—5 rays (H) (Anaes.) (Assist.)	1162.2		Y
46399	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	538.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Osteotomy of phalanx or metacarpal of hand, with internal fixation—one bone (H) (Anaes.) (Assist.)	404.1		Y
46401	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	432.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Operative treatment of non-union of phalanx or metacarpal of hand, including internal fixation (if performed) (Anaes.) (Assist.)	324.35	367.6	Y
46408	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	720	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of tendon of hand or wrist, by tendon graft, including either or both of the following (if performed): (a) harvest of graft; (b) tenolysis; other than a service associated with a service to which Item 30023 applies (H) (Anaes.) (Assist.)	540		Y
46411	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	422.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of complete flexor tendon pulley of hand or wrist, with graft, including harvest of graft (if performed)—one pulley (H) (Anaes.) (Assist.)	316.95		Y
46414	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	547.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Insertion of artificial tendon prosthesis in preparation for grafting of tendon of hand or wrist, including tenolysis (if performed), other than a service associated with a service to which Item 30023 applies (Anaes.) (Assist.)	410.8	465.55	Y
46417	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	508.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Transfer of tendon of hand or wrist, for restoration of hand or digit motion, including harvest of donor motor unit (if performed)—one transfer (H) (Anaes.) (Assist.)	381.5		Y
46420	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	212.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Primary repair of extensor tendon of hand or wrist—one tendon (Anaes.) (Assist.)	159.65	180.95	Y
46423	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	340.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Delayed repair of extensor tendon of hand or wrist, including tenolysis (if performed), other than a service associated with a service to which Item 30023 applies (Anaes.) (Assist.)	255.35	289.4	Y
46426	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	352.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Primary repair of flexor tendon of hand or wrist, proximal to A1 pulley, other than a service to repair a tendon of a digit if 2 tendons of the same digit have been repaired during the same procedure—one tendon (H) (Anaes.) (Assist.)	264.1		Y
46432	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Primary repair of flexor tendon of hand or wrist, distal to A1 pulley, other than a service to repair a tendon of a digit if 2 tendons of the same digit have been repaired during the same procedure—one tendon (H) (Anaes.) (Assist.)	440.35		Y
46434	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	505.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Delayed repair of flexor tendon of hand or wrist, including tenolysis (if performed), other than a service associated with a service to which Item 30023 applies (Anaes.) (Assist.)	379.35	429.95	Y
46438	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	140.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Closed pin fixation of mallet finger (Anaes.)	105.7	119.8	Y
46441	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	340.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Open reduction of mallet finger, including any of the following (if performed): (a) joint release; (b) pin fixation; (c) tenolysis (Anaes.) (Assist.)	255.35	289.4	Y
46442	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	292.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	MALLET FINGER with intra articular fracture involving more than one third of base of terminal phalanx - open reduction (Anaes.) (Assist.)	219.2		Y
46444	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	508.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of Boutonniere or swan neck deformity of hand, including either or both of the following (if performed): (a) tendon graft harvest; (b) tendon transfer —one joint (H) (Anaes.) (Assist.)	381.5		Y
46450	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	234.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tenolysis of extensor tendon of hand or wrist, following tendon injury or graft, other than a service: (a) for acute, traumatic injury; or (b) associated with a service to which Item 30023 applies —one ray (H) (Anaes.)	176.15		Y
46453	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tenolysis of flexor tendon of hand or wrist, following tendon injury, repair or graft, other than a service: (a) for acute, traumatic injury; or (b) associated with a service to which Item 30023 applies (H) (Anaes.) (Assist.)	293.55		Y
46456	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	101.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Percutaneous tenotomy of digit of hand (Anaes.)	76.35	86.5	Y
46464	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	234.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of a supernumerary complete digit of hand (H) (Anaes.) (Assist.)	176.15		Y
46465	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	234.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of digit of hand, distal to metacarpal head, including any of the following (if performed): (a) excision of neuroma; (b) resection of bone; (c) skin cover with local flaps —one ray (H) (Anaes.) (Assist.)	176.15		Y
46468	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	410.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of digit of hand, distal to metacarpal head, including any of the following (if performed): (a) excision of neuroma; (b) resection of bone; (c) skin cover with local flaps —2 rays (H) (Anaes.) (Assist.)	308.15		Y
46471	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	586.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of digit of hand, distal to metacarpal head, including any of the following (if performed): (a) excision of neuroma; (b) resection of bone; (c) skin cover with local flaps —3 rays (H) (Anaes.) (Assist.)	440.2		Y
46474	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	763.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of digit of hand, distal to metacarpal head, including any of the following (if performed): (a) excision of neuroma; (b) resection of bone; (c) skin cover with local flaps —4 rays (H) (Anaes.) (Assist.)	572.35		Y
46477	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	939.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of digit of hand, distal to metacarpal head, including any of the following (if performed): (a) excision of neuroma; (b) resection of bone; (c) skin cover with local flaps —5 rays (H) (Anaes.) (Assist.)	704.4		Y
46480	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	391.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of ray of hand, proximal to metacarpal head, including any of the following (if performed): (a) excision of neuroma; (b) recontouring; (c) resection of bone; (d) skin cover with local flaps —one ray (H) (Anaes.) (Assist.)	293.55		Y
46483	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	313	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of amputation stump of hand to provide adequate cover, including any of the following (if performed): (a) bone shortening; (b) excision of nail bed remnants; (c) excision of neuroma (H) (Anaes.) (Assist.)	234.75		Y
46486	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	234.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Accurate reconstruction of acute nail bed laceration using magnification (H) (Anaes.)	176.15		Y
46489	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	273.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Secondary reconstruction of nail bed deformity using magnification, including removal of nail (if performed), other than a service associated with a service to which Item 46513 or 45451 applies (H) (Anaes.) (Assist.)	205.5		Y
46492	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	375.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Surgical correction of contracture of joint of hand, flexor or extensor tendon, involving tissues deeper than skin and subcutaneous tissue—one joint (H) (Anaes.) (Assist.)	281.8		Y
46493	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	343.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Resection of boss of metacarpal base of hand, including either or both of the following (if performed): (a) excision of ganglion; (b) synovectomy (Anaes.) (Assist.)	257.2	291.5	Y
46495	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	211.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complete excision of one or more ganglia or mucous cysts of interphalangeal, metacarpophalangeal or carpometacarpal joint of hand, including any of the following (if performed): (a) arthrotomy; (b) osteophyte resections (c) synovectomy other than a service associated with a service to which Item30107 or 46236 applies—one joint (H) (Anaes.) (Assist.)	158.55		Y
46498	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	228.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Excision of ganglion of flexor tendon sheath of hand, including any of the following (if performed): (a) flexor tenosynovectomy; (b) sheath excision; (c) skin closure by any method other than a service associated with a service to which Item 30107 or 46263 applies (Anaes.) (Assist.)	171.65	194.55	Y
46500	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	273.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Excision of ganglion of dorsal wrist joint of hand, including any of the following (if performed): (a) arthrotomy; (b) capsular or ligament repair (or both); (c) synovectomy other than a service associated with a service to which Item 30107 applies (Anaes.) (Assist.)	205.5	232.9	Y
46501	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	382.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Excision of ganglion of volar wrist joint of hand, including any of the following (if performed): (a) arthrotomy; (b) capsular or ligament repair (or both); (c) synovectomy; other than a service associated with a service to which Item 30107 or 46325 applies (Anaes.) (Assist.)	256.9	291.15	Y
46502	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	410.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of recurrent ganglion of dorsal wrist joint of hand, including any of the following (if performed): (a) arthrotomy; (b) capsular or ligament repair (or both); (c) synovectomy (Anaes.) (Assist.)	308.2	349.3	Y
46503	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	393.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Excision of recurrent ganglion of volar wrist joint of hand, including any of the following (if performed): (a) arthrotomy; (b) capsular or ligament repair (or both); (c) synovectomy; other than a service associated with a service to which Item 30107 applies (Anaes.) (Assist.)	295.3	334.65	Y
46504	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1150.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Neurovascular island flap, heterodigital, for pulp re-innervation and soft tissue cover (Anaes.) (Assist.)	862.8	1062.45	Y
46507	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1560.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Transposition or transfer of digit or ray on vascular pedicle of hand, including any of the following (if performed): (a) nerve transfer; (b) skin closure, by any means; (c) rebalancing procedures (H) (Anaes.) (Assist.)	1170.6		Y
46510	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	365.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Surgical reduction of enlarged elements resulting from macrodactyly, including any of the following (if performed): (a) nerve transfer; (b) skin closure, by any means; (c) rebalancing procedures —one digit (H) (Anaes.) (Assist.)	273.9		Y
46513	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	58.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of nail of finger or thumb—one nail (Anaes.)	44.1	49.95	Y
46519	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	146.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Drainage of midpalmar, thenar or hypothenar spaces or dorsum of hand, excluding aftercare (Anaes.) (Assist.)	110.25	124.95	Y
46522	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	438.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Open operation and drainage of infection for flexor tendon sheath of finger or thumb, including either or both of the following (if performed): (a) synovectomy; (b) tenolysis; other than a service associated with a service to which Item 30023 applies—one digit (H) (Anaes.) (Assist.)	328.7		Y
46525	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	58.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Incision for pulp space infection of hand: (a) other than a service: (i) to which another item in this Group applies; or (ii) associated with a service to which Item30023 applies; and (b) excluding aftercare (H) (Anaes.)	44.1		Y
46528	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wedge resection for ingrowing nail of finger or thumb: (a) including each of the following: (i) excision and partial ablation of germinal matrix; (ii) removal of segment of nail; (iii) removal of ungual fold; and (b) including phenolisation (if performed) (Anaes.)	132.3	149.9	Y
46531	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1994	1/07/2021	88.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Partial resection of ingrowing nail of finger or thumb,including phenolisation (Anaes.)	66.45	75.35	Y
46534	1/11/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complete ablation of nail germinal matrix (H) (Anaes.) (Assist.)	183.8		Y
47000	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of mandible, by closed reduction (Anaes.)	55.2	62.55	Y
47003	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	88.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of clavicle, by closed reduction (Anaes.)	66.2	75.05	Y
47007	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	367.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of acromioclavicular or sternoclavicular joint dislocation (acute or chronic), by open, mini-open or arthroscopic technique, including either or both of the following (if performed): (a) ligament augmentation; (b) tendon transfers (Anaes.) (Assist.)	275.55	312.25	Y

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47009	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of shoulder, requiring general anaesthesia, other than a service to which Item47012 applies (Anaes.) 132.3 149.9 Y
47012	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	352.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of shoulder, requiring general anaesthesia, by open reduction (Hi) (Anaes.) (Assist.) 264.45 Y
47015	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	88.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of shoulder, not requiring general anaesthesia 66.2 75.05
47018	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	205.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of elbow, by closed reduction (Anaes.) 154.2 174.8 Y
47021	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	274.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of elbow, by open reduction (Hi) (Anaes.) (Assist.) 205.7 Y
47024	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	205.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of distal or proximal radioulnar joint, by closed reduction, other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of treating fracture or dislocation in the same region (Anaes.) 154.2 174.8 Y
47027	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	676.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of distal or proximal radioulnar joint, by open reduction, including either or both of the following (if performed): (a) styloid fracture; (b) triangular fibrocartilage complex repair; other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of treating fracture or dislocation in the same region (Anaes.) (Assist.) 507.05 588.15 Y
47030	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	205.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of carpus, carpus on radius and ulna or carpometacarpal joint, by closed reduction (Anaes.) 154.2 174.8 Y
47033	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	676.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of carpus, carpus on radius and ulna or carpometacarpal joint, by open reduction, including ligament repair (if performed) (Anaes.) (Assist.) 507.05 588.15 Y
47042	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of interphalangeal or metacarpophalangeal joint, by closed reduction (Anaes.) 88.05 99.8 Y
47045	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	438.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of interphalangeal or metacarpophalangeal joint, by open reduction, including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) ligament repair; (d) volar plate repair (Anaes.) (Assist.) 328.95 372.8 Y
47047	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	337.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of prosthetic hip, by closed reduction (Anaes.) (Assist.) 253.5 287.3 Y
47049	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of prosthetic hip, by open reduction (Anaes.) (Assist.) 337.9 382.95 Y
47052	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	439.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of native hip, by closed reduction (Anaes.) (Assist.) 329.55 373.45 Y
47053	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	585.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of native hip, by open reduction, with internal fixation (if performed) (Anaes.) (Assist.) 439.25 497.85 Y
47054	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	337.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of knee, by closed reduction, including application of external fixator (if performed) (Anaes.) (Assist.) 253.5 287.3 Y
47057	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	132.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of patella, by closed reduction (Anaes.) 99.15 112.4 Y
47060	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of patella, by open reduction (Anaes.) (Assist.) 132.3 149.9 Y
47063	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	264.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of ankle or tarsus, by closed reduction (Anaes.) (Assist.) 198.35 224.8 Y
47066	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	352.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of dislocation of ankle or tarsus, by open reduction, including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) removal of loose fragments or intervening soft tissue; (d) washout of joint (Hi) (Anaes.) (Assist.) 264.45 Y
47069	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	7/08/2021	Treatment of dislocation of toe, byclosed reduction—one toe (Anaes.) 55.2 62.55 Y
47301	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2016	1/07/2021	90.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of middle or proximal phalanx, by closed reduction, requiring anaesthesia—one bone (Anaes.) 67.75 76.8 Y
47304	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	102.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of metacarpal, by closed reduction, requiring anaesthesia—onebone (Hi) (Anaes.) 77.2 Y
47307	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	208.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of phalanx or metacarpal, by closed reduction, including percutaneous K-wire fixation (if performed)—one bone (Hi) (Anaes.) (Assist.) 156.1 Y
47310	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	343.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of phalanx or metacarpal, by open reduction, with internal fixation (Hi) (Anaes.) (Assist.) 257.55 Y
47313	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	332.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of phalanx or metacarpal, by closed reduction, including: (a) percutaneous K-wire fixation; and (b) external or dynamic fixation (if performed) (Hi) (Anaes.) (Assist.) 249.75 Y
47316	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	660.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of phalanx or metacarpal, by open reduction with fixation, other than a service provided on the same occasion as a service to which Item47319 applies (Hi) (Anaes.) (Assist.) 495.6 Y
47319	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	676.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of proximal end of middle phalanx, by open reduction, with fixation, other than a service provided on the same occasion as a service to which Item47316 applies (Hi) (Anaes.) (Assist.) 507.3 Y
47348	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	97.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of carpus (excluding scaphoid), by cast immobilisation, other than a service associated with a service to which Item47351 applies (Anaes.) 73.35 83.15 Y
47351	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of carpus (excluding scaphoid), by open reduction, with internal fixation (Anaes.) (Assist.) 183.8 208.3 Y
47354	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of carpal scaphoid, by cast immobilisation, other than a service associated with a service to which Item47357 applies (Anaes.) 132.3 149.9 Y
47357	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of carpal scaphoid, by open reduction, with internal or percutaneous fixation (Anaes.) (Assist.) 293.85 333.05 Y
47361	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2016	1/07/2021	137.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of distal end of radius or ulna (or both), by cast immobilisation, other than a service associated with a service to which Item47362, 47364, 47367, 47370 or 47373 applies 102.9 116.6
47362	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2016	1/07/2021	205.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of distal end of radius or ulna (or both), by closed reduction, requiring general or major regional anaesthesia, but excluding local infiltration, other than a service associated with a service to which Item47361, 47364, 47367, 47370 or 47373 applies (Anaes.) 154.2 174.8 Y
47364	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	291.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of distal end of radius or ulna (not involving joint surface), by open reduction with fixation, other than a service associated with a service to which Item47361 or 47362 applies (Hi) (Anaes.) (Assist.) 218.55 Y
47367	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	232.0	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of distal end of radius, by closed reduction with percutaneous fixation, other than a service associated with a service to which Item47361 or 47362 applies (Hi) (Anaes.) (Assist.) 174.55 Y
47370	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	422.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of distal end of radius, by open reduction with fixation, other than a service associated with a service to which Item47361 or 47362 applies (Hi) (Anaes.) (Assist.) 316.85 Y
47373	1/05/2016	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	301.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of distal end of ulna, by open reduction with fixation, other than a service associated with a service to which Item47361 or 47362 applies (Hi) (Anaes.) (Assist.) 226.35 Y
47381	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	264.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of shaft of radius or ulna, by closed reduction (Hi) (Anaes.) 198.35 Y
47384	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	352.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of shaft of radius or ulna, by open reduction with internal fixation (Hi) (Anaes.) (Assist.) 264.45 Y
47385	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	303.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of: (a) fracture of shaft of radius or ulna; and (b) dislocation of distal radio-ulnar joint or proximal radio-humeral joint (Galeazzi or Monteggia injury); by closed reduction (Hi) (Anaes.) (Assist.) 227.7 Y
47386	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of: (a) fracture of shaft of radius or ulna; and (b) dislocation of distal radio-ulnar joint or proximal radio-humeral joint (Galeazzi or Monteggia injury); by open reduction, with internal fixation, including reduction of dislocation (if performed) (Hi) (Anaes.) (Assist.) 367.35 Y
47387	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of distal or shaft of radius or ulna (or both), by cast immobilisation, other than a service to which Item47390 or 47393 applies (Anaes.) (Assist.) 213 241.4 Y
47390	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	426.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of shafts of radius and ulna, by closed reduction (Hi) (Anaes.) 319.65 Y
47393	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	568.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of shafts of radius and ulna, by open reduction, with internal fixation (Hi) (Anaes.) (Assist.) 426.1 Y
47396	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	195.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of olecranon, by closed reduction (Anaes.) 146.85 166.45 Y
47399	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of olecranon, by open reduction (Hi) (Anaes.) (Assist.) 293.85 Y
47402	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	293.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of olecranon, with excision of olecranon fragment and reimplantation of tendon (Anaes.) (Assist.) 220.35 249.7 Y
47405	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	195.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of head or neck of radius, by closed reduction (Anaes.) 146.85 166.45 Y
47408	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of head or neck of radius, by open reduction, including internal fixation and excision (if performed) (Hi) (Anaes.) (Assist.) 293.85 Y
47411	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of tuberosity of humerus, other than a service to which Item47417 applies (Anaes.) 88.05 99.8 Y
47414	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	235.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of tuberosity of humerus, by open reduction (Anaes.) 176.4 199.9 Y
47417	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	274.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of tuberosity of humerus and associated dislocation of shoulder, by closed reduction (Anaes.) (Assist.) 205.7 233.15 Y
47420	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	538.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of tuberosity of humerus and associated dislocation of shoulder, by open reduction (Hi) (Anaes.) (Assist.) 404.1 Y
47423	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	225.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, proximal, treatment of fracture of, other than a service to which Item47426, 47429 or 47432 applies (Anaes.) 168.95 191.5 Y
47426	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/07/2021	1/07/2021	337.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, proximal, treatment of fracture of, by closed reduction (Hi) (Anaes.) 253.5 287.3 Y
47429	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, proximal, treatment of fracture of, by open reduction (Hi) (Anaes.) (Assist.) 337.9 Y

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47632	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	563.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/07/2021	Humerus, proximal, treatment of intra-articular fracture of, by open reduction (H) (Anaes.) (Assist.)	422.4	Y
47635	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	431.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, proximal, treatment of fracture of, and associated dislocation of shoulder, by closed reduction (Anaes.) (Assist.)	323.3	366.4 Y
47638	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	685.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, proximal, treatment of fracture of, and associated dislocation of shoulder, by open reduction (H) (Anaes.) (Assist.)	514.4	Y
47641	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	857.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, proximal, treatment of intra-articular fracture of, and associated dislocation of shoulder, by open reduction (H) (Anaes.) (Assist.)	642.9	Y
47644	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	235.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, shaft of, treatment of fracture of, other than a service to which Item47447 or 47450 applies (Anaes.)	176.4	199.9 Y
47647	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	352.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, shaft of, treatment of fracture of, by closed reduction (H) (Anaes.)	264.45	Y
47650	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	470.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Humerus, shaft of, treatment of fracture of, by internal or external fixation (H) (Anaes.) (Assist.)	352.75	Y
47651	1/11/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	566.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, shaft of, treatment of fracture of, by intramedullary fixation (H) (Anaes.) (Assist.)	425.15	Y
47653	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	274.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, distal (supracondylar or condylar), treatment of fracture of, other than a service to which Item47456 or 47459 applies (Anaes.) (Assist.)	205.7	233.15 Y
47656	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	411.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, distal (supracondylar or condylar), treatment of fracture of, by closed reduction (H) (Anaes.) (Assist.)	308.7	Y
47659	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	548.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Humerus, distal (supracondylar or condylar), treatment of fracture of, by open reduction (H) (Anaes.) (Assist.)	411.5	Y
47662	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Clavicle, treatment of fracture of, other than a service to which Item47465 applies (Anaes.)	88.05	99.8 Y
47665	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	538.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Clavicle, treatment of fracture of, by open reduction (Anaes.) (Assist.)	404.1	458 Y
47666	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Sternum, treatment of fracture of, other than a service to which Item47467 applies (Anaes.)	88.05	99.8 Y
47667	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	235.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Sternum, treatment of fracture of, by open reduction (H) (Anaes.)	176.4	Y
47668	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SCAPULA, neck or glenoid region of, treatment of fracture of, by open reduction (Anaes.) (Assist.)	337.9	382.95 Y
47671	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	BIBS (one or more), treatment of fracture of - each attendance	33.6	38.05
47674	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	195.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	PELVIC RING, treatment of fracture of, not involving disruption of pelvic ring or acetabulum	146.85	166.45
47677	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1994	PELVIC RING, treatment of fracture of, with disruption of pelvic ring or acetabulum	183.8	208.3
47680	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PELVIC RING, treatment of fracture of, requiring traction (H) (Anaes.) (Assist.)	367.35	Y
47683	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	PELVIC RING, treatment of fracture of, requiring control by external fixation (H) (Anaes.) (Assist.)	440.85	Y
47686	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of anterior pelvic ring or sacroiliac joint disruption (or both), by open reduction, with internal fixation, (H) (Anaes.) (Assist.)	734.7	Y
47689	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1469.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of posterior pelvic ring or sacroiliac joint disruption (or both), by open reduction, with internal fixation (H) (Anaes.) (Assist.)	1102.05	Y
47691	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1616.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Combined anterior and posterior pelvic ring disruption, including sacroiliac joint disruption, treatment of fracture by open reduction and internal fixation of both anterior and posterior ring segments (H) (Anaes.) (Assist.)	1212.25	Y
47695	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of acetabulum and associated dislocation of hip, including the application and management of traction (if performed), excluding aftercare (Anaes.) (Assist.)	367.35	416.3 Y
47698	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	734.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of isolated posterior wall fracture of acetabulumand associated dislocation of hip, by open reduction, with internal fixation, including the application and management of traction (if performed) (H) (Anaes.) (Assist.)	551	Y
47501	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of anterior or posterior column fracture of acetabulum, by open reduction, with internal fixation, including any of the following (if performed): (a) capsular stabilisation; (b) capsulotomy; (c) osteotomy (H) (Anaes.) (Assist.)	734.7	Y
47511	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1469.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of combined column T-Type, transverse, anterior column or posterior hemitransverse fractures of acetabulum, by open reduction, with internal fixation, performed through single or dual approach (including fixation of the posterior wall fracture), including any of the following (if performed): (a) capsular stabilisation; (b) capsulotomy; (c) osteotomy (H) (Anaes.) (Assist.)	1102.05	Y
47514	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	857.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of posterior wall fracture of acetabulum and associated femoral head fracture, by open reduction, with internal fixation (H) (Anaes.) (Assist.)	642.9	Y
47516	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FEMUR, treatment of fracture of, by closed reduction or traction (Anaes.) (Assist.)	337.9	382.95 Y
47519	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	901.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	FEMUR, treatment of trochanteric or subcapital fracture of, by internal fixation (H) (Anaes.) (Assist.)	676	Y
47528	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	FEMUR, treatment of fracture of, by internal fixation or external fixation (H) (Anaes.) (Assist.)	587.85	Y
47531	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	990.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	FEMUR, treatment of fracture of shaft, by intramedullary fixation and cross fixation (H) (Anaes.) (Assist.)	749.4	Y
47534	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1126.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Femur, condylar region of, treatment of intra-articular (T-shaped condylar) fracture of, requiring internal fixation, with or without internal fixation of one or more osteochondral fragments (H) (Anaes.) (Assist.)	844.95	Y
47537	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Femur, condylar region of, treatment of fracture of, requiring internal fixation of one or more osteochondral fragments, other than a service associated with a service to which Item47534 applies (Anaes.) (Assist.)	337.9	382.95 Y
47540	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	228.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hip spica or shoulder spica, application of, as an independent procedure (Anaes.)	168.95	191.5 Y
47543	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	235.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, plateau of, treatment of medial or lateral fracture of, other than a service to which Item47546 or 47549 applies (Anaes.)	176.4	199.9 Y
47546	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	352.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, plateau of, treatment of medial or lateral fracture of, by closed reduction (Anaes.)	264.45	299.7 Y
47549	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	560.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of medial or lateral fracture of plateau of tibia, by open reduction, with internal fixation, including any of the following (if performed): (a) arthroscopy; (b) arthrotomy; (c) meniscal repair (H) (Anaes.) (Assist.)	420.05	Y
47552	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, plateau of, treatment of both medial and lateral fractures of, other than a service to which Item47555 or 47558 applies (Anaes.) (Assist.)	293.85	323.05 Y
47555	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, plateau of, treatment of both medial and lateral fractures of, by closed reduction (H) (Anaes.)	440.85	Y
47558	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1038.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of medial and lateral fractures of tibia, by open reduction, with internal fixation, including any of the following (if performed): (a) arthroscopy; (b) arthrotomy; (c) meniscal repair (H) (Anaes.) (Assist.)	778.8	Y
47559	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	795.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of medial or lateral (or both) fracture of plateau of tibia, with application of a bridging external fixator to the plateau (Anaes.) (Assist.)	596.45	707.35 Y
47561	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of shaft of tibia, by cast immobilisation, other than a service to which Item47570 or 47573 applies (Anaes.)	213	241.4 Y
47565	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	741.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, shaft of, treatment of fracture of, by internal fixation or external fixation (H) (Anaes.) (Assist.)	555.95	Y
47566	1/05/1994	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	944.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, shaft of, treatment of fracture of, by intramedullary fixation and cross fixation (H) (Anaes.) (Assist.)	708.7	Y
47568	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	426.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Closed reduction of proximal tibia, distal tibia or shaft of tibia, with or without treatment of fibular fracture (Anaes.) (Assist.)	319.65	362.25 Y
47570	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	568.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, shaft of, treatment of fracture of, by open reduction, with or without treatment of fibular fracture (Anaes.) (Assist.)	426.1	482.9 Y
47573	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	710.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of proximal or distal intra-articular fracture of shaft of tibia, by open reduction, with or without treatment of fibular fracture, including any of the following (if performed): (a) arthroscopy; (b) arthrotomy; (c) capsule repair; (d) removal of intervening soft tissue; (e) removal of loose fragments; (f) washout of joint; other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of treating a medial malleolus fracturewof the distal tibia (H) (Anaes.) (Assist.)	532.65	Y
47579	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	166.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of patella, other than a service to which item 47582 or 47585 applies (Anaes.)	124.95	141.6 Y
47582	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	440.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of patella, with internal fixation, including bone grafting (if performed), other than a service associated with a service to which item 47579 or 47585 applies (H) (Anaes.) (Assist.)	330.75	Y
47585	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	455.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of proximal or distal fracture of patella, by open reduction, with internal fixation, including any of the following (if performed): (a) arthrotomy; (b) excision of patellar pole, with reattachment of tendon; (c) removal of loose fragments; (d) repair of quadriceps or patellar tendon (or both); (e) stabilisation of patello-femoral joint (H) (Anaes.) (Assist.)	341.9	Y
47588	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee joint, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar or tibial articular surfaces and requiring repair or reconstruction of one or more ligaments (H) (Anaes.) (Assist.)	1028.45	Y
47591	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1660.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee joint, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar and tibial articular surfaces and requiring repair or reconstruction of one or more ligaments (H) (Anaes.) (Assist.)	1249.15	Y
47592	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	339.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair or reconstruction (or both) of acute traumatic chondral injury to the distal femoral or proximal tibial articular surfaces of the knee, when chondral or osteochondral implants or transfers are utilised (H) (Anaes.) (Assist.)	254.4	Y

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47593	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	830.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair or reconstruction (or both) of acute traumatic chondral injury to the distal femoral and proximal tibial articular surfaces of the knee, using chondral or osteochondral implants or transfers (H) (Anaes.)(Assist.)	622.75	Y
47595	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	167.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of ankle joint, hindfoot, midfoot, metatarsals or toes, by non-surgical management—one leg (Anaes.)	125.7	142.5 Y
47597	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	337.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of ankle joint, by closed reduction (Anaes.)(Assist.)	253.5	287.3 Y
47600	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of ankle joint: (a) by internal fixation of the malleolus, fibula or diastasis; and (b) including any of the following (if performed): (i) arthrotomy; (ii) capsule repair; (iii) removal of loose fragments or intervening soft tissue; (iv) washout of joint (H) (Anaes.)(Assist.)	440.85	Y
47603	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	741.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of ankle joint: (a) by internal fixation of 2 or more of the malleolus, fibula, diastasis and medial tissue interposition; and (b) including any of the following (if performed): (i) arthrotomy; (ii) capsule repair; (iii) removal of loose fragments or intervening soft tissue; (iv) washout of joint (H) (Anaes.)(Assist.)	555.95	Y
47612	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	426.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of hindfoot, by closed reduction, with or without dislocation—one foot (Anaes.)(Assist.)	319.65	362.25 Y
47615	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of hindfoot, by open reduction, with or without dislocation, including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) removal of loose fragments or intervening soft tissue; (d) washout of joint —one foot (Anaes.) (Assist.)	367.35	416.3 Y
47618	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	612.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of hindfoot, by open reduction, with or without dislocation,including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) removal of loose fragments or intervening soft tissue; (d) washout of joint —one foot(H) (Anaes.) (Assist.)	459.2	Y
47621	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	426.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of intra-articular fracture of midfoot, by closed reduction, with or without dislocation—one foot (Anaes.) (Assist.)	319.65	362.25 Y
47624	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of tarso-metatarsal, by open reduction, with or without dislocation, including any of the following (if performed): (a) arthrotomy; (b) capsule or ligament repair; (c) removal of loose fragments or intervening soft tissue; (d) washout of joint —one joint (H) (Anaes.) (Assist.)	440.85	Y
47630	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	352.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of cuneiform, by open reduction, with or without dislocation, including any of the following (if performed): (a) arthrotomy; (b) capsule or ligament repair; (c) removal of loose fragments or intervening soft tissue; (d) washout of joint —one bone (Anaes.) (Assist.)	264.45	299.7 Y
47637	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	199.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fractures of metatarsal, by closed reduction—one or more metatarsals of one foot (Anaes.)(Assist.)	149.7	169.7 Y
47639	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	235.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of metatarsal, by open reduction, including removal of loose fragments or intervening soft tissue (if performed)—one metatarsal (Anaes.) (Assist.)	176.4	199.9 Y
47648	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	313.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of metatarsal, by open reduction, including removal of loose fragments or intervening soft tissue (if performed)—2 metatarsals of one foot (H) (Anaes.) (Assist.)	234.95	Y
47657	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of metatarsal, by open reduction, including removal of loose fragments or intervening soft tissue (if performed)—3 or more metatarsals of one foot (H) (Anaes.) (Assist.)	367.35	Y
47663	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	146.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture of phalanx of toe, by closed reduction—one toe (Anaes.)	110.25	124.95 Y
47666	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture or dislocation of phalanx of great toe, by open reduction, including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) removal of loose fragments; (d) removal of intervening soft tissue; (e) washout of joint — one great toe (Anaes.)	183.8	208.3 Y
47672	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture or dislocation of phalanx of toe, by open reduction, including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) removal of loose fragments; (d) removal of intervening soft tissue; (e) washout of joint —one toe (other than great toe) of one foot (Anaes.)	88.05	99.8 Y
47678	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of fracture or dislocation of phalanx of toe, by open reduction, including any of the following (if performed): (a) arthrotomy; (b) capsule repair; (c) removal of loose fragments; (d) removal of intervening soft tissue; (e) washout of joint —2 or more toes (other than great toe) of one foot (Anaes.)	132.3	149.9 Y
47735	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Nasal bones, treatment of fracture of, other than a service to which item47738 or 47741 applies—each attendance	33.6	38.1
47738	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Nasal bones, treatment of fracture of, by reduction (Anaes.)	183.8	208.3 Y
47741	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	499.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Nasal bones, treatment of fracture of, by open reduction involving osteotomies (H) (Anaes.) (Assist.)	374.85	Y
47753	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	423.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Maxilla, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation (H) (Anaes.) (Assist.)	317.35	Y
47756	1/02/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	423.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Mandible, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation (H) (Anaes.) (Assist.)	317.35	Y
47762	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Zygomatic bone, treatment of fracture of, requiring surgical reduction by a temporal, intra-oral or other approach (Anaes.)	186.35	211.2 Y
47765	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/07/2021	408	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation at 1 site (H) (Anaes.)(Assist.)	306	Y
47768	1/01/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	499.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 2 sites (H) (Anaes.) (Assist.)	374.85	Y
47771	1/01/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	574.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 3 sites (H) (Anaes.) (Assist.)	430.65	Y
47774	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	453.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Maxilla, treatment of fracture of, requiring open operation (H) (Anaes.) (Assist.)	340	Y
47777	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	453.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Mandible, treatment of fracture of, requiring open reduction (H) (Anaes.) (Assist.)	340	Y
47780	1/01/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	549.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Maxilla, treatment of fracture of, requiring open reduction and internal fixation not involving plate(H) (Anaes.)(Assist.)	442	Y
47783	1/04/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	589.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Mandible, treatment of fracture of, requiring open reduction and internal fixation not involving plate (Anaes.)(Assist.)	442	501.4 Y
47786	1/03/1992	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	749.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Maxilla, treatment of fracture of, requiring open reduction and internal fixation involving plate(H) (Anaes.)(Assist.)	560.9	Y
47789	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	747.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Mandible, treatment of fracture of, requiring open reduction and internal fixation involving plate(H) (Anaes.)(Assist.)	560.9	Y
47900	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Injection into, or aspiration of, unicameral bone cyst (Anaes.)	132.3	149.9 Y
47903	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Epicondylitis, open operation for (Anaes.)	183.8	208.3 Y
47904	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	38.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Digital nail of toe, removal of, not being a service to which item 47906 applies (Anaes.)	44.1	49.95 Y
47906	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1992	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Digital nail of toe, removal of, in the operating theatre of a hospital(H) (Anaes.)	88.05	Y
47915	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wedge resection for ingrowing nail of toe: (a) including each of the following: (i) removal of segment of nail; (ii) removal of ungual fold; (iii) excision and partial ablation of germinal matrix and portion of nail bed; and (b) including phenolisation (if performed) (Anaes.)(Assist.)	132.3	149.9 Y
47916	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	88.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Partial resection for ingrowing nail of toe, including phenolisation (Anaes.)	66.45	75.35 Y
47918	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complete ablation of nail germinal matrix: (a) including each of the following: (i) removal of segment of nail; (ii) removal of ungual fold; (iii) excision and ablation of germinal matrix and portion of nail bed; and (b) including phenolisation (if performed) (Anaes.)(Assist.)	183.8	208.3 Y
47921	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Orthopaedic pin or wire, insertion of, as an independent procedure (Anaes.)	88.05	99.8 Y
47924	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	39.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of one or more buried wires, pins or screws (inserted for internal fixation purposes), with incision, other than a service associated with a service to which item47927 or 47929 applies—one bone (Anaes.)	29.4	33.3 Y
47927	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	146.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of one or more buried wires, pins or screws (inserted for internal fixation purposes)—one bone (H) (Anaes.)	110.25	Y
47929	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of fixation elements (including plate, rod or nail and associated wires, pins, screws or external fixation), other than a service associated with a service to which item 47924 or 47927 applies—one bone (H) (Anaes.) (Assist.)	293.85	Y
47953	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of distal biceps brachii tendon, by any method, performed as an independent procedure (Anaes.)(Assist.)	337.9	382.95 Y
47954	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/07/2021	Repair of traumatic tear or rupture of tendon, other than a service associated with: (a) a service to which item39330 applies; or (b) a service to which another item in the Schedule applies if the service described in the other item is for the purpose of repairing peripheral nerve items in the same region (Anaes.)(Assist.)	293.85	323.05 Y
47955	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	678.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of gluteal or rectus femoris tendon, by open or arthroscopic means, when performed as an independent procedure, including either or both of the following (if performed): (a) bursectomy; (b) preparation of greater trochanter; other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the hip (H) (Anaes.)(Assist.)	508.55	Y
47956	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1017.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of proximal hamstring tendon, performed as an independent procedure, other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the hip (H) (Anaes.)(Assist.)	762.8	Y
47960	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	137.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TENOTOMY, SUBCUTANEOUS, not being a service to which another item in this Group applies (Anaes.)	102.9	116.6 Y

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47964	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	225.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Iliopsoas tenotomy, by open or arthroscopic means, when performed as an independent procedure, other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of performing a procedure on the hip (H) (Anaes.) (Assist.)	168.95		Y
47967	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	450.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Restoration of shoulder function by major muscle tendon transfer, including associated dissection of neurovascular pedicle, excluding micro-anastomosis and biceps tenodesis—one transfer (H) (Anaes.) (Assist.)	337.9		Y
47975	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	384.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Forearm or calf, decompression fasciotomy of, for acute compartment syndrome, requiring excision of muscle and deep tissue(H) (Anaes.) (Assist.)	288.15		Y
47978	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	233.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Forearm or calf, decompression fasciotomy of, for chronic compartment syndrome, requiring excision of muscle and deep tissue(H) (Anaes.)	175		Y
47981	1/07/1993	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	156.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Forearm, calf or interosseous muscle space of hand, decompression fasciotomy of, other than a service to which another item in this Group applies (Anaes.)	117.5	133.3	Y
47982	1/05/1997	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	379.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Forage (Drill decompression), of neck or head of femur, or both (H) (Anaes.) (Assist.)	284.8		Y
47983	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	901.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Stabilisation of slipped capital femoral epiphysis, by internal fixation (H) (Anaes.) (Assist.)	676		Y
47984	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	901.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Open subcapital realignment of slipped capital femoral epiphysis, other than a service associated with a service to which item 48427 applies (H) (Anaes.) (Assist.)	676		Y
48245	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	325.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Harvesting and insertion of bone graft (autograft) via separate incisions and at separate surgical fields (H) (Anaes.) (Assist.)	244.1		Y
48248	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	504	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Harvesting and insertion of bone graft (autograft) via separate incisions, including internal fixation of the graft or fusion fixation (or both) (H) (Anaes.) (Assist.)	378		Y
48251	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	414.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Harvesting and insertion of osteochondral graft (autograft) via separate incisions at the same joint or joint complex (H) (Anaes.) (Assist.)	311.1		Y
48254	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	950.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Harvesting and insertion of pedicled bone flap (autograft), including internal fixation of the bone flap (if performed), other than a service associated with a service to which item 45562, 45504 or 45505 applies (H) (Anaes.) (Assist.)	712.7		Y
48257	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	414.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Preparation and insertion of metallic, cortical or other graft substitute (allograft), where substitute is structural cortico-cancellous bone or structural bone (or both), including internal fixation (if performed) (H) (Anaes.) (Assist.)	311.1		Y
48400	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	342.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of phalanx or metatarsal of foot, for correction of deformity, excision of accessory bone or sesamoid bone, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	257.2		Y
48403	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	538.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of phalanx or metatarsal of foot (or both) of foot, for correction of deformity, with internal fixation, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	404.1		Y
48406	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	342.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of femur, tibia, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus, for correction of deformity, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	257.2		Y
48409	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	538.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of femur, tibia, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus, for correction of deformity, with internal fixation, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	404.1		Y
48412	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	656.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of humerus, without internal fixation (H) (Anaes.) (Assist.)	492.15		Y
48415	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	832.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of humerus, with internal fixation (H) (Anaes.) (Assist.)	624.5		Y
48419	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	656.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of distal tibia, for correction of deformity, without internal or external fixation, including any of the following (if performed): (a) excision of surrounding osteophytes; (b) release of joint; (c) removal of bone; (d) synovectomy; —one bone (H) (Anaes.) (Assist.)	492.15		Y
48420	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	832.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of distal tibia, for correction of deformity, with internal or external fixation by any method, including any of the following (if performed): (a) excision of surrounding osteophytes; (b) release of joint; (c) removal of bone; (d) synovectomy; —one bone (H) (Anaes.) (Assist.)	624.5		Y
48421	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	956.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of proximal tibia, to alter lower limb alignment or rotation (or both), with internal or external fixation (or both) (H) (Anaes.) (Assist.)	717.25		Y
48422	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	950.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of distal femur, to alter lower limb alignment or rotation (or both), with internal or external fixation (or both) (H) (Anaes.) (Assist.)	712.7		Y
48423	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	783.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of pelvis, in a patient aged 18 years or over, including any of the following (if performed): (a) associated intra-articular procedures; (b) bone grafting; (c) internal fixation (H) (Anaes.) (Assist.)	587.85		Y
48424	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of pelvis, in a patient aged less than 18 years, with application of hip spica, including internal fixation (if performed), other than a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	587.85		Y
48426	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	950.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of femur, in a patient aged 18 years or over, including either or both of the following (if performed): (a) bone grafting; (b) internal fixation (H) (Anaes.) (Assist.)	712.7		Y
48427	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	950.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Osteotomy of femur, in a patient aged less than 18 years, including internal fixation (if performed), other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	712.7		Y
48430	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	279.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excision of one or more osteophytes of the foot or ankle, or simple removal of bunion, including any of the following (if performed): (a) capsulotomy; (b) excision of surrounding osteophytes; (c) release of ligaments; (d) removal of one or more associated bursae or ganglia; (e) removal of bone; (f) synovectomy; —each incision (H) (Anaes.) (Assist.)	209.4		Y
48433	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1111.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of non-union or malunion, with preservation of the joint, for ankle or hindfoot fracture, with internal or external fixation by any method, including any of the following (if performed): (a) arthrotomy; (b) debridement; (c) excision of surrounding osteophytes; (d) osteotomy; (e) release of joint; (f) removal of bone; (g) removal of hardware; (h) synovectomy; —one bone (H) (Anaes.) (Assist.)	833.95		Y
48435	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	587.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of non-union or malunion, with preservation of the joint, for midfoot or forefoot fracture, with internal or external fixation by any method, including any of the following (if performed): (a) arthrotomy; (b) debridement; (c) excision of surrounding osteophytes; (d) osteotomy; (e) release of joint; (f) removal of bone; (g) removal of hardware; (h) synovectomy; —one bone (H) (Anaes.) (Assist.)	440.85		Y
48507	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	381.02	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Epiphysiodesis of a long bone, in a patient less than 18 years of age (H) (Anaes.) (Assist.)	285.8		Y
48509	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	342.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Hemiepiphysiodesis, partial growth plate arrest using internal fixation, in a patient less than 18 years of age (H) (Anaes.) (Assist.)	257.2		Y
48512	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	930.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Epiphysiolysis, release of focal growth plate closure, in a patient less than 18 years of age (H) (Anaes.) (Assist.)	698		Y
48900	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/12/1991	1/07/2021	293.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, excision of coraco-acromial ligament or removal of calcium deposit from cuff or both (Anaes.) (Assist.)	220.35	249.7	Y
48903	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, decompression of subacromial space by acromioplasty, excision of coraco-acromial ligament and distal clavicle, or any combination (H) (Anaes.) (Assist.)	440.85		Y
48906	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, repair of rotator cuff, including excision of coraco-acromial ligament or removal of calcium deposit from cuff, or both—other than a service associated with a service to which item48900 applies (H) (Anaes.) (Assist.)	440.85		Y
48909	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, repair of rotator cuff, including decompression of subacromial space by acromioplasty, excision of coraco-acromial ligament and distal clavicle, or any combination, other than a service associated with a service to which item48903 applies (H) (Anaes.) (Assist.)	587.85		Y
48915	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, hemi-arthroplasty of (H) (Anaes.) (Assist.)	587.85		Y
48918	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1567.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Anatomic or reverse total shoulder replacement, including any of the following (if performed): (a) associated rotator cuff repair; (b) biceps tenodesis; (c) tuberosity osteotomy; other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose ofperforming a procedure on the shoulder region by open or arthroscopic means (H) (Anaes.) (Assist.)	1175.65		Y
48921	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1616.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, total replacement arthroplasty, revision of (H) (Anaes.) (Assist.)	1212.25		Y
48924	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1861.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of total shoulder replacement, including either or both of the following (if performed): (a) bone graft to humerus; (b) bone graft to scapula (H) (Anaes.) (Assist.)	1396		Y
48927	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	381.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder prosthesis, removal of (H) (Anaes.) (Assist.)	286.45		Y
48930	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1126.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Shoulder, arthrodesis of, with synovectomy if performed (H) (Anaes.) (Assist.)	844.95		Y
48942	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1469.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis of shoulder, with bone grafting or internal fixation, including either or both of the following (if performed): (a) removal of prosthesis; (b) synovectomy; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1102.05		Y
48945	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	SHOULDER, diagnostic arthroscopy of (including biopsy) - not being a service associated with any other arthroscopic procedure of the shoulder region (H) (Anaes.) (Assist.)	213		Y
48948	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	636.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	SHOULDER, arthroscopic surgery of, involving any 1 or more of: removal of loose bodies; decompression of calcium deposit; debridement of labrum, synovium or rotator cuff; or chondroplasty - not being a service associated with any other arthroscopic procedure of the shoulder region(H) (Anaes.) (Assist.)	477.6		Y
48951	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	930.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	SHOULDER, arthroscopic division of coraco-acromial ligament including acromioplasty - not being a service associated with any other arthroscopic procedure of the shoulder region(H) (Anaes.) (Assist.)	698		Y

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48954	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of shoulder, performed as an independent procedure, including release of contracture (if performed), other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the shoulder region by arthroscopic means (H) (Anaes.) (Assist.)	734.7	Y
48958	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1126.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Joint stabilisation procedure for multi-directional instability of shoulder, anterior or posterior repair, by open or arthroscopic means, including labral repair or reattachment (if performed), excluding bone grafting and removal of hardware, other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the shoulder region by arthroscopic means (H) (Anaes.) (Assist.)	844.95	Y
48960	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	SHOULDER, reconstruction or repair of, including repair of rotator cuff by arthroscopic, arthroscopic assisted or mini open means; arthroscopic acromioplasty; or resection of acromioclavicular joint by separate approach when performed - not being a service associated with any other procedure of the shoulder region(H) (Anaes.) (Assist.)	734.7	Y
48972	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tenodesis of biceps, by open or arthroscopic means, performed as an independent procedure (H) (Anaes.) (Assist.)	337.9	Y
48980	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	832.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of heterotopic ossification, myositis ossificans or post-traumatic ossification in the shoulder girdle (H) (Anaes.) (Assist.)	624.5	Y
48983	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	610.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of heterotopic ossification, myositis ossificans or post-traumatic ossification in the elbow (H) (Anaes.) (Assist.)	458	Y
48986	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	832.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of heterotopic ossification, myositis ossificans or post-traumatic ossification in the forearm (H) (Anaes.) (Assist.)	624.5	Y
49100	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	342.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	ELBOW, arthrotomy of, involving 1 or more of lavage, removal of loose body or division of contracture(H) (Anaes.) (Assist.)	257.2	Y
49104	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	551	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of one or more ligaments of the elbow, for acute instability—within 6 weeks after the time of injury (H) (Anaes.) (Assist.)	413.25	Y
49105	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	808.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of one or more ligaments of the elbow, for chronic instability, including harvesting of tendon graft—6 weeks or more after the time of injury (H) (Anaes.) (Assist.)	606.15	Y
49106	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	ELBOW, arthrodesis of, with synovectomy if performed (Anaes.) (Assist.)	734.7	891.7 Y
49109	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	734.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	ELBOW, total synovectomy of(H) (Anaes.) (Assist.)	551	Y
49112	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	734.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Radial head replacement of elbow, other than a service associated with a service to which item 49115 applies (H) (Anaes.) (Assist.)	551	Y
49115	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1175.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total or hemi humeral arthroplasty of elbow, excluding isolated radial head replacement and ligament stabilisation procedures, other than a service associated with a service to which item 49112 applies (H) (Anaes.) (Assist.)	881.55	Y
49116	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1551.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	ELBOW, total replacement arthroplasty of, including procedure, including removal of prosthesis(H) (Anaes.) (Assist.)	1163.7	Y
49117	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1861.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total replacement arthroplasty of elbow, including bone grafting and removal of prosthesis (H) (Anaes.) (Assist.)	1396.4	Y
49118	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	ELBOW, diagnostic arthroscopy of, including biopsy and lavage, not being a service associated with any other arthroscopic procedure of the elbow(H) (Anaes.) (Assist.)	213	Y
49121	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Surgery of the elbow, by arthroscopic means, including any of the following (if performed): (a) chondroplasty; (b) drilling of defect; (c) osteoplasty; (d) removal of loose bodies; (e) release of contracture or adhesions; (f) treatment of epicondylitis; other than a service associated witha service to which another item in this Schedule applies if the service described in the other item is for the purpose of an arthroscopic procedure of the elbow (H) (Anaes.) (Assist.)	477.6	Y
49124	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of olecranon bursa, including bony prominence, other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of an arthroscopic procedure of the elbow (Anaes.) (Assist.)	289.95	328.6 Y
49200	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	852.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2022	Wrist, arthrodesis of, with synovectomy if performed, with or without internal fixation of the radiocarpal joint (H) (Anaes.) (Assist.)	639.15	Y
49203	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	807.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Limited fusion of wrist, with or without bone graft, including each of the following: (a) ligament or tendon transfers; (b) partial or total excision of one or more carpal bones; (c) rebalancing procedures; (d) synovectomy (H) (Anaes.) (Assist.)	605.4	Y
49206	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	587.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Proximal row carpectomy of wrist, including either or both of the following (if performed): (a) styloidectomy; (b) synovectomy (H) (Anaes.) (Assist.)	440.85	Y
49209	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Prosthetic replacement of wrist or distal radioulnar joint, including either or both of the following (if performed): (a) ligament realignment; (b) tendon realignment (H) (Anaes.) (Assist.)	587.85	Y
49210	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1034.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total replacement arthroplasty of wrist or distal radioulnar joint, including any of the following (if performed): (a) ligament rebalancing; (b) removal of prosthesis; (c) tendon rebalancing (H) (Anaes.) (Assist.)	775.95	Y
49212	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrotomy of wrist or distal radioulnar joint, for infection, including any of the following (if performed): (a) joint debridement; (b) removal of loose bodies; (c) synovectomy (H) (Anaes.) (Assist.)	183.8	Y
49213	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	876.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Sauve-Kapandji procedure of distal radioulnar joint, including any of the following (if performed): a) radioulnar fusion; b) osteotomy; c) soft tissue reconstruction (Anaes.) (Assist.)	657.5	788.75 Y
49215	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	676.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of single or multiple ligaments or capsules of wrist, by open procedure, including any of the following (if performed): (a) arthrotomy; (b) ligament harvesting and grafting; (c) synovectomy; (d) tendon harvesting and grafting; (e) insertion of synthetic ligament substitute (H) (Anaes.) (Assist.)	507.05	Y
49218	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wrist, diagnostic arthroscopy of, including radiocarpal or midcarpal joints, or both (including biopsy)—other than a service associated with another arthroscopic procedure of the wrist joint(H) (Anaes.) (Assist.)	213	Y
49219	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Diagnosis of carpometacarpal of thumb or joint of digit, by arthroscopic means, including biopsy (if performed) (H) (Anaes.) (Assist.)	213	Y
49220	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of carpometacarpal of thumb or joint of digit, by arthroscopic means—one joint (H) (Anaes.) (Assist.)	477.6	Y
49221	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of wrist, by arthroscopic means, including any of the following (if performed): (a) drilling of defect; (b) removal of loose bodies; (c) release of adhesions; (d) synovectomy; (e) debridement; (f) resection of dorsal or volar ganglia; other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of performing an arthroscopic procedure of the wrist joint (H) (Anaes.) (Assist.)	477.6	Y
49224	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	734.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Osteoplasty of wrist, by arthroscopic means, including either or both of the following (if performed): (a) excision of the distal ulna; (b) total synovectomy; other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing an arthroscopic procedure of the wrist joint—2 or more distinct areas (H) (Anaes.) (Assist.)	551	Y
49227	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	734.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of wrist by one of the following: (a) pinning of osteochondral fragment, by arthroscopic means; (b) stabilisation procedure for ligamentous disruption; (c) partial wrist fusion or carpectomy, by arthroscopic means; (d) fracture management; other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of performing an arthroscopic procedure of the wrist joint (H) (Anaes.) (Assist.)	551	Y
49230	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	958.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total, hemi or interpositional prosthetic replacement of carpal bone of wrist, for trauma or emergency, including all of the following: (a) ligament and tendon rebalancing procedures; (b) limited wrist fusions; (c) limited bone grafting (H) (Anaes.) (Assist.)	718.95	Y
49233	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	403.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excisional arthroplasty of single (or part of) carpal bone of wrist, when transfers of ligaments or tendons, or rebalancing procedures, are not required, including all of the following: (a) radial styloidectomy; (b) ulnar styloidectomy; (c) proximal hamate; (d) partial scaphoid; other than a service associated with a service to which another item in this Schedule applies if the service describedin the other item is for the purpose of performing a distal radial ulnar joint reconstruction, a proximal row carpectomy or another wrist procedure—applicable once for a single operation (H) (Anaes.) (Assist.)	302.7	Y
49236	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	608.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of soft tissue of distal radioulnar joint, by open procedure, with or without ligament or tendon grafting, including either or both of the following (if performed): (a) graft harvest; (b) triangular fibrocartilage complex repair or reconstruction (H) (Anaes.) (Assist.)	456.35	Y
49239	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	302.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of pisiform or hook of hamate, including release of ulnar nerve (if performed) (H) (Anaes.) (Assist.)	227.05	Y
49300	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Sacro-iliac joint—arthrodesis of(H) (Anaes.) (Assist.)	406.8	Y
49303	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	568.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrotomy of hip, by open procedure, including any of the following (if performed): (a) lavage; (b) drainage; (c) biopsy (H) (Anaes.) (Assist.)	426.1	Y
49306	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1126.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hip, arthrodesis of, with synovectomy if performed(H) (Anaes.) (Assist.)	844.95	Y
49309	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrectomy or excision arthroplasty (Girdlestone) of hip, other than a service performed: (a) for the purpose of implant removal; or (b) as stage 1 of a 2-stage procedure (H) (Anaes.) (Assist.)	587.85	Y
49315	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	881.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hip, arthroplasty of, unipolar or bipolar(H) (Anaes.) (Assist.)	661.25	Y
49318	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total arthroplasty of hip, including minor bone grafting (if performed), other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1028.45	Y
49319	1/11/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2406.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral total arthroplasty of hip, including minor bone grafting (if performed), other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1806.9	Y

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49321	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1665.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total arthroplasty of hip, with internal fixation, including either or both of the following (if performed): (a) structural bone graft; (b) insertion of synthetic substitutes or metal augments; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1249.15	Y
49360	1/05/1984	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	357.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Diagnostic arthroscopy of hip, other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing a procedure of the hip joint by arthroscopic means (H) (Anaes.) (Assist.)	268.45	Y
49363	1/05/1984	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	431	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of hip, by arthroscopic means, with synovial biopsy, including any procedures to treat bone or soft tissue in the same area (if performed), other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing: (a) a procedure of the hip joint by arthroscopic means; or (b) surgery for femoroacetabular impingement (H) (Anaes.) (Assist.)	323.25	Y
49366	1/05/1984	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of hip, by arthroscopic means, including any procedures to treat bone or soft tissue in the same area (if performed), other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing: (a) a procedure of the hip joint by arthroscopic means; or (b) surgery for femoroacetabular impingement (H) (Anaes.) (Assist.)	477.6	Y
49372	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	959.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with exchange of head or liner (or both) (H) (Anaes.) (Assist.)	719.85	Y
49374	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1782.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with exchange of head and acetabular shell or cup, including minor bone grafting (if performed) (H) (Anaes.) (Assist.)	1336.95	Y
49376	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2193.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with exchange of head and acetabular shell or cup, including major bone grafting (if performed) (H) (Anaes.) (Assist.)	1645.5	Y
49378	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1919.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with revision of femoral component (if there is no requirement for femoral osteotomy), including minor bone grafting (if performed) (H) (Anaes.) (Assist.)	1439.7	Y
49380	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2331.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with revision of femoral and acetabular components (if femoral osteotomy is not required), including minor bone grafting (if performed) (H) (Anaes.) (Assist.)	1748.3	Y
49382	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	3016.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with revision of femoral and acetabular components (if femoral osteotomy is not required), including major bone grafting (H) (Anaes.) (Assist.)	2262.5	Y
49384	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	3565.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, for pelvic discontinuity, with revision of acetabular component (H) (Anaes.) (Assist.)	2673.85	Y
49386	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2468.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, with revision of femoral component with femoral osteotomy, including minor bone grafting (if performed) (H) (Anaes.) (Assist.)	1851.15	Y
49388	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2879.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, including: (a) revision of both of the following: (i) femoral component with femoral osteotomy; (ii) acetabular component; and (b) minor bone grafting (if performed) (H) (Anaes.) (Assist.)	2159.7	Y
49390	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	3428	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, including: (a) revision of both of the following: (i) femoral component with femoral osteotomy; (ii) acetabular component; and (b) major bone grafting (H) (Anaes.) (Assist.)	2571	Y
49392	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	4799.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, including: (a) either: (i) revision of femoral component with femoral osteotomy; or (ii) proximal femoral replacement; and (b) revision of acetabular component for pelvic discontinuity (H) (Anaes.) (Assist.)	3599.4	Y
49394	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	4113.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, including: (a) replacement of proximal femur; and (b) revision of the acetabular component; and (c) bone grafting (if performed) (H) (Anaes.) (Assist.)	3085.2	Y
49396	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2742.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, including: (a) removal of prosthesis as stage 1 of a 2-stage revision arthroplasty or as a definitive stage procedure; and (b) insertion of temporary prosthesis (if performed) (H) (Anaes.) (Assist.)	2056.8	Y
49398	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2056.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision arthroplasty of hip, including: (a) revision of femoral component for periprosthetic fracture; and (b) internal fixation; and (c) bone grafting (if performed) (H) (Anaes.) (Assist.)	1542.65	Y
49500	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee, arthrotomy of, involving one or more of capsular release, biopsy or lavage, or removal of loose body or foreign body(H) (Anaes.) (Assist.)	293.85	Y
49503	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	509.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrotomy of knee, including one of the following: (a) meniscal surgery; (b) repair of collateral or cruciate ligament; (c) patellectomy; (d) single transfer of ligament or tendon; (e) repair or replacement of chondral or osteochondral surface (excluding prosthetic replacement); other than a service associated with a service to which another item in this Group applies (H) (Anaes.) (Assist.)	382.05	Y
49506	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	764.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrotomy of knee, including 2 or more of the following: (a) meniscal surgery; (b) repair of collateral or cruciate ligament; (c) patellectomy; (d) single transfer of ligament or tendon; (e) repair or replacement of chondral or osteochondral surface (excluding prosthetic replacement); other than a service associated with a service to which another item in this Group applies (H) (Anaes.) (Assist.)	573.15	Y
49509	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total synovectomy of knee, by open procedure, other than a service performed in association with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of performing an arthroplasty (H) (Anaes.) (Assist.)	587.85	Y
49512	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Primary or revision arthrodesis of knee, including arthrodesis (H) (Anaes.) (Assist.)	1028.45	Y
49515	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	881.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of cemented or uncemented knee prosthesis, performed as the first stage of a 2-stage procedure; including: (a) removal of associated cement; and (b) insertion of spacer (if required) (H) (Anaes.) (Assist.)	661.25	Y
49516	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2196.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral unicompartmental arthroplasty of femur and proximal tibia of knee (H) (Anaes.) (Assist.)	1647.5	Y
49517	1/07/1993	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1255.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unicompartmental arthroplasty of femur and proximal tibia of knee (H) (Anaes.) (Assist.)	941.45	Y
49518	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total replacement arthroplasty of knee, including either or both of the following (if performed): (a) revision of patello-femoral joint replacement to total knee replacement; (b) patellar resurfacing; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1028.45	Y
49519	1/11/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2408.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral total replacement arthroplasty of knee, including patellar resurfacing, other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1806.9	Y
49521	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1665.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complex primary arthroplasty of knee, with revision of components to femur or tibia, including either or both of the following (if performed): (a) ligament reconstruction; (b) patellar resurfacing; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1249.15	Y
49524	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1959.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complex primary arthroplasty of knee, with revision of components to femur and tibia, including either or both of the following (if performed): (a) ligament reconstruction; (b) patellar resurfacing; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1469.5	Y
49525	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1665.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of uni-compartmental arthroplasty of the knee, with femoral or tibial components (or both) with uni-compartmental implants, other than a service associated with a service to which: (a) item 48245, 48248, 48251, 48254 or 48257 applies; or (b) another item in this Group applies if the service described in the other item is for the purpose of performing surgery on a knee (H) (Anaes.) (Assist.)	1249.15	Y
49527	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Minor revision of total or partial replacement of knee, including either or both of the following: (a) exchange of polyethylene component (including uni); (b) insertion of patellar component; other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1028.45	Y
49530	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2057.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total or partial replacement of knee, with exchange of femoral or tibial component: (a) excluding revision of unicompartmental with unicompartmental implants; and (b) including patellar resurfacing (if performed); other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1543.05	Y
49533	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2645.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total or partial replacement of knee, with exchange of femoral and tibial components, excluding revision of unicompartmental with unicompartmental implants, including patellar resurfacing (if performed); other than a service associated with a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1884.2	Y
49534	1/11/1996	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	756.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Replacement of patella and trochlea of patello-femoral joint of knee, performed as a primary procedure (H) (Anaes.) (Assist.)	567.6	Y
49536	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Either: (a) repair of cruciate ligaments of knee; or (b) repair or reconstruction of collateral ligaments of knee; by open or arthroscopic means, including either or both of the following (if performed): (c) graft harvest; (d) intracruciate knee surgery; other than a service associated with a service to which another item of this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the knee by arthroscopic means (H) (Anaes.) (Assist.)	734.7	Y
49542	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of anterior or posterior cruciate ligament of knee, by open or arthroscopic means, including any of the following (if performed): (a) graft harvest; (b) donor site repair; (c) meniscal repair; (d) collateral ligament repair; (e) extra-articular tenodesis; (f) any other associated intra-articular surgery; other than a service associated with a service to which another item of this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the knee by arthroscopic means (H) (Anaes.) (Assist.)	1028.45	Y
49544	1/07/2021	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1596.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of 2 or more cruciate or collateral ligaments of knee, by open or arthroscopic means, including any of the following (if performed): (a) ligament repair; (b) graft harvest donor site repair; (c) meniscal repair; (d) any other associated intra-articular surgery; other than a service associated with a service to which another item of this Schedule applies if the service described in the other item is for the purpose of performing a procedure on the knee by arthroscopic means (H) (Anaes.) (Assist.)	1197.35	Y
49548	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee, revision of patello-femoral stabilisation(H) (Anaes.) (Assist.)	734.7	Y
49551	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1371.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee, revision of procedures to which item 49536 or 49542 applies (H) (Anaes.) (Assist.)	1028.45	Y
49554	1/12/1991	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1959.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total replacement of knee, by anatomic specific allograft of tibia or femur, other than a service to which item 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1469.5	Y

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49564	1/01/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	956.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of patellofemoral joint of knee, by combined open and arthroscopic means, including either or both of the following (if performed): (a) medial soft tissue reconstruction and tendon transfer; (b) tibial tuberosity transfer with bone graft and internal fixation; other than a service associated a service to which another item of this Schedule applies if the service describedin the other item is for the purpose of performing a procedure on the knee by arthroscopic means (H) (Anaes.) (Assist.)	717.25	Y
49565	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1372.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of patellofemoral joint of knee, by combined open and arthroscopic means, including: (a) both of the following: (i) medial soft tissue reconstruction; (ii) tibial tuberosity transfer; and (b) any of the following (if performed): (i) bone graft; (ii) internal fixation; (iii) trochleoplasty; other than a service associated a service to which another item of this Schedule applies if the service describedin the other item is for the purpose of performing a procedure on the knee by arthroscopic means (H) (Anaes.) (Assist.)	1029.45	Y
49569	1/05/1984	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee, mobilisation for post-traumatic stiffness, by multiple muscle or tendon release (quadriceppelasty)(H) (Anaes.) (Assist.)	587.85	Y
49570	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Diagnosis of knee, by arthroscopic means, when the pre-procedure diagnosis is undetermined, including either or both of the following (if performed): (a) biopsy; (b) lavage (H) (Anaes.) (Assist.)	213	Y
49572	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	691.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Partial meniscectomy of knee, by arthroscopic means, for atraumatic meniscus tear, other than a service to which another item of this Schedule applies if the service described in the other item is for the purpose of treating osteoarthritis (H) (Anaes.) (Assist.)	518.4	Y
49574	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	691.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of loose bodies of knee, by arthroscopic means—one or more bodies (H) (Anaes.) (Assist.)	518.4	Y
49576	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	691.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Repair of chondral lesion of knee, by arthroscopic means, including either or both of the following (if performed): (a) microfracture; (b) microdrilling; other than a service performed in combination with a service to which another item of this Schedule applies if the servicedescribedin the other item is for the purpose of performing chondral or osteochondral grafts (H) (Anaes.) (Assist.)	518.4	Y
49578	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	691.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Release of soft tissue, lateral release or osteoplasty of knee, by arthroscopic means, other than a service performed in combination with a service to which another item of this Schedule applies if the service describedin the other item is for the purpose of stabilising the patellofemoral joint of the knee (H) (Anaes.) (Assist.)	518.4	Y
49580	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	691.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Partial meniscectomy of knee, by arthroscopic means, for traumatic meniscus tear (H) (Anaes.) (Assist.)	518.4	Y
49582	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	807.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Meniscal repair of knee, by arthroscopic means (H) (Anaes.) (Assist.)	605.3	Y
49584	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	807.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Chondral, osteochondral or meniscal graft of knee, by arthroscopic means (H) (Anaes.) (Assist.)	605.3	Y
49586	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	807.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of knee, by arthroscopic means, for neoplasia or inflammatory arthropathy, other than a service to which another item of this Schedule applies if the service describedin the other item is for the purpose of treating uncomplicated rheumatoid arthritis (Anaes.) (Assist.)	605.3	719.15	Y
49590	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of ganglion, cyst or bursa, or lipoma, by open or arthroscopic means, performed as an independent procedure other than a service associated with a service to which another item in this Group applies (Anaes.) (Assist.)	289.95	328.6	Y
49703	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Surgery of ankle joint, by arthroscopic means, including any of the following (if performed): (a) cartilage treatment; (b) removal of loose bodies; (c) synovectomy; (d) excision of joint osteophytes; other than a service associated with a service to which another item in this Group applies if the service described in the other item is for the purpose of performing a procedure on the ankle by arthroscopic means (H) (Anaes.) (Assist.)	477.6	Y
49706	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	342.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrotomy of joint of ankle, for infection, including removal of loose bodies and joint debridement, including release of joint contracture (if performed) (H) (Anaes.) (Assist.)	257.2	Y
49709	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	734.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of ligament of ankle or subtalar joint (or both), including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) joint debridement; —one ligament complex, each incision (H) (Anaes.) (Assist.)	551	Y
49712	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrodesis of ankle, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint (H) (Anaes.) (Assist.)	734.7	Y
49715	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1175.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total replacement of ankle, with prosthetic replacement of ankle joint, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint (H) (Anaes.) (Assist.)	881.55	Y
49716	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1551.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total ankle replacement: (a) including either: (i) exchange of tibial or talar components (or both) and plastic inserts; or (ii) removal of tibial or talar components (or both) and plastic inserts; and (b) including any of the following (if performed): (i) insertion of cement spacer for infection; (ii) capsulotomy; (iii) joint release; (iv) neurolysis; (v) debridement of cysts; (vi) synovectomy; (vii) joint debridement other than a service associated with a service to which 30023 applies. (H) (Anaes.) (Assist.)	1163.7	Y
49717	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1861.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of total ankle replacement: (a) including either: (i) exchange of tibial and talar components; or (ii) removal of tibial and talar components and conversion to ankle arthrodesis; and (b) including both of the following: (iii) internal or external fixation, by any means; (iv) major bone grafting; and (c) including any of the following (if performed): (i) capsulotomy; (ii) joint release; (iii) neurolysis; (iv) debridement and extensive grafting of cysts; (v) synovectomy; (vi) joint debridement; other than a service associated with a service to which Item 30023, 48245, 48248, 48251, 48254 or 48257 applies (H) (Anaes.) (Assist.)	1396.4	Y
49718	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Primary repair of major tendon of ankle, by any method, including either or both of the following (if performed): (a) synovial biopsy; (b) synovectomy —one tendon (H) (Anaes.) (Assist.)	293.85	Y
49724	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	685.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of major tendon of ankle, by any method, including any of the following (if performed): (a) synovial biopsy; (b) synovectomy; (c) adjacent tendon transfer; (d) turn down flaps; other than a service associated with a service to which item 49718 applies (H) (Anaes.) (Assist.)	514.4	Y
49727	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	293.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lengthening of major tendon of ankle, including either or both of the following (if performed): (a) synovial biopsy; (b) synovectomy (H) (Anaes.) (Assist.)	220.35	Y
49728	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	587.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lengthening of Achilles' tendon, by any method, with gastro-soleus lengthening for the correction of equinus deformity, including either or both of the following (if performed): (a) synovial biopsy; (b) synovectomy; other than a service associated with a service to which item 49727 applies (H) (Anaes.) (Assist.)	440.7	Y
49730	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	7/08/2021	Surgery of joint of hindfoot (other than ankle) or first metatarsophalangeal joint, by arthroscopic means, including any of the following (if performed): (a) cartilage treatment; (b) removal of loose bodies; (c) synovectomy; (d) excision of joint osteophytes; other than a service associated with a service to which anotheritem of this Schedule applies if the service describedin the other item is for the purpose of performing a procedure on the ankle by arthroscopic means—one joint (H) (Anaes.) (Assist.)	477.6	Y
49732	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Endoscopy of large tendons of foot, including any of the following (if performed): (a) debridement of tendon and sheath; (b) removal of loose bodies; (c) synovectomy; (d) excision of tendon impingement; other than a service associated with a service to which item 49718 or 49724 applies (H) (Anaes.) (Assist.)	477.6	Y
49734	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	342.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrotomy of hindfoot, midfoot or metatarsophalangeal joint, for infection, including: (a) removal of loose bodies; and (b) either or both of the following: (i) joint debridement; (ii) release of joint contracture; —each incision (H) (Anaes.) (Assist.)	257.2	Y
49736	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	685.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Transfer of major tendon of foot and ankle, including: (a) split or whole transfer to contralateral side of foot; and (b) passage of posterior or anterior tendon to, or through, interosseous membrane; and (c) any of the following (if performed): (i) synovial biopsy; (ii) synovectomy; (iii) tendon lengthening; (iv) inserting of tendon (H) (Anaes.) (Assist.)	514.4	Y
49738	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of ligament of talonavicular or metatarsophalangeal joint, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement (H) (Anaes.) (Assist.)	367.35	Y
49740	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1469.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of arthrodesis of ankle, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint; (e) removal of hardware; (f) neurolysis; (g) osteotomy of non-union or malunion; other than a service associated with a service to which 30023 applies (H) (Anaes.) (Assist.)	1102.15	Y
49742	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1387.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrodesis of extended ankle and hindfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint (H) (Anaes.) (Assist.)	1040.4	Y
49744	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2080.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of arthrodesis of extended ankle and hindfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint; (e) removal of hardware; (f) neurolysis; (g) osteotomy of non-union or malunion; other than a service associated with a service to which 30023 applies (H) (Anaes.) (Assist.)	1560.65	Y
49760	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	367.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthroereisis of subtalar joint, including any of the following (if performed): (a) capsulotomy; (b) synovectomy; (c) joint debridement (H) (Anaes.) (Assist.)	275.55	Y
49761	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	538.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsal, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —one metatarsal (H) (Anaes.) (Assist.)	404.1	Y
49762	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	597.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —2 metatarsals (H) (Anaes.) (Assist.)	448.45	Y
49763	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	657	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —3 metatarsals (H) (Anaes.) (Assist.)	492.75	Y
49764	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	716.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —4 metatarsals (H) (Anaes.) (Assist.)	537.15	Y

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49765	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	775.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —5 metatarsals (H) (Anaes.) (Assist.)	581.4	Y
49766	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	834.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —6 metatarsals (H) (Anaes.) (Assist.)	625.8	Y
49767	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	893.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —7 metatarsals (H) (Anaes.) (Assist.)	670.15	Y
49768	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	952.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Stabilisation of metatarsophalangeal joint at metatarsals, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) osteotomy, with or without fixation; (e) local tendon transfer; (f) local tendon lengthening or release; (g) ligament repair; (h) joint debridement; —8 metatarsals (H) (Anaes.) (Assist.)	714.45	Y
49769	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	942.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Unilateral correction of hallux valgus or varus deformity, by osteotomy of first metatarsal and proximal phalanx of first toe, with internal fixation of both bones, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	707.15	Y
49770	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1567.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral correction of hallux valgus or varus deformity, by osteotomy of first metatarsal and proximal phalanx of first toe, with internal fixation of both bones, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	1175.4	Y
49771	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	386.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Synovectomy of major tendon of ankle, for extensive synovitis by any method, including any of the following (if performed): (a) tenolysis; (b) debridement of ligament or tendon (or both); (c) release of ligament or tendon (or both); (d) excision of tubercule or osteophyte; (e) reconstruction of tendon retinaculum; (f) neurolysis; other than a service associated with a service to which Item30023 applies—each incision (H) (Anaes.) (Assist.)	289.95	Y
49772	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	341.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excision of rheumatoid nodules or gouty tophi, excluding aftercare, including any of the following (if performed): (a) capsulotomy; (b) debridement of ligament or tendon (or both); (c) release of ligament or tendon (or both); (d) excision of tubercle or osteophyte; —each incision (H) (Anaes.) (Assist.)	255.9	Y
49773	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	422.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of excision of intermetatarsal or digital neuroma, including any of the following (if performed): (a) release of tissue; (b) excision of bursae; (c) neurolysis; other than a service associated with a service to which Item30023 applies—one web space (H) (Anaes.) (Assist.)	317.15	Y
49774	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	288	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Release of tarsal tunnel, including any of the following (if performed): (a) release of ligaments; (b) synovectomy; (c) neurolysis; other than a service associated with a service to which Item30023 applies—one foot (H) (Anaes.) (Assist.)	216	Y
49775	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	388.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of release of tarsal tunnel, including any of the following (if performed): (a) release of ligaments; (b) synovectomy; (c) neurolysis; other than a service associated with a service to which Item30023 applies—one foot (H) (Anaes.) (Assist.)	291.65	Y
49776	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1223	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Revision of arthrodesis of joint of hindfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint; (e) removal of hardware; (f) neurolysis; (g) osteotomy of talus—talar malunion; other than a service associated with a service to which Item30023 applies—may only be claimed once per joint (H) (Anaes.) (Assist.)	917.25	Y
49777	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	724.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis of joint of midfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint; —one joint (H) (Anaes.) (Assist.)	543.15	Y
49778	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1086.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis of joints of midfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joints; —2 joints (H) (Anaes.) (Assist.)	814.7	Y
49779	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1267.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis of joints of midfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joints; —3 joints (H) (Anaes.) (Assist.)	950.45	Y
49780	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1448.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis of joints of midfoot, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joints; —4 joints (H) (Anaes.) (Assist.)	1086.25	Y
49781	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1086.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of arthrodesis of joint of midfoot, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint; (e) removal of hardware; (f) osteotomy of non-union or malunion; —one joint (H) (Anaes.) (Assist.)	814.7	Y
49782	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	588.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of total ankle replacement, including: (a) bone grafting of perioperative cysts to the tibia or talus (or both); and (b) retention of implants; and (c) any of the following (if performed): (i) capsulotomy; (ii) joint release; (iii) neurolysis; (iv) debridement and grafting of cysts; (v) synovectomy; (vi) joint debridement; other than a service associated with a service to which Item30023 applies (H) (Anaes.) (Assist.)	441.3	Y
49783	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	789	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joints, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —3 joints (H) (Anaes.) (Assist.)	591.75	Y
49784	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	901.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joints, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —4 joints (H) (Anaes.) (Assist.)	676.2	Y
49785	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1014.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joints, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —5 joints (H) (Anaes.) (Assist.)	760.7	Y
49786	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1126.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joints, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —6 joints (H) (Anaes.) (Assist.)	845.2	Y
49787	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1239.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joints, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —7 joints (H) (Anaes.) (Assist.)	929.65	Y
49788	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1352.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joints, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —8 joints (H) (Anaes.) (Assist.)	1014.15	Y
49789	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1163.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral arthrodesis of first metatarsophalangeal joint, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint (H) (Anaes.) (Assist.)	872.3	Y
49790	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1010.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Revision of arthrodesis of first metatarsophalangeal joint, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of exostosis at joint; (e) removal of hardware; (f) osteotomy of non-union or malunion (H) (Anaes.) (Assist.)	757.65	Y
49791	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	458	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis of hallux interphalangeal or lesser metatarsophalangeal joint, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joint (H) (Anaes.) (Assist.)	343.5	Y
49792	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	514.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —one or 2 toes (H) (Anaes.) (Assist.)	385.85	Y
49793	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	600.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —3 toes (H) (Anaes.) (Assist.)	450.15	Y
49794	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	685.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —4 toes (H) (Anaes.) (Assist.)	514.45	Y
49795	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	771.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —5 toes (H) (Anaes.) (Assist.)	578.75	Y
49796	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	857.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —6 toes (H) (Anaes.) (Assist.)	643.05	Y
49797	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	943.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —7 toes (H) (Anaes.) (Assist.)	707.35	Y
49798	1/07/2021	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1028.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal joint (or both) of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) joint release; (d) synovectomy; (e) removal of osteophytes at joints; —8 toes (H) (Anaes.) (Assist.)	771.65	Y
49800	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	1/12/1991	1/07/2021	137.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Primary repair of flexor or extensor tendon of foot, including either or both of the following (if performed): (a) synovial biopsy; (b) synovectomy; —one toe (Anaes.) (Assist.)	102.9	116.6	Y
49803	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	1/12/1991	1/07/2021	176.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Secondary repair of flexor or extensor tendon of foot, including either or both of the following (if performed): (a) synovial biopsy; (b) synovectomy; —one toe (Anaes.) (Assist.)	132.3	149.9	Y
49806	1/12/1991	ITable	3	TB	ITable	ITable	S	N	ITable	N	N	N	N	N	N	C	1/12/1991	1/07/2021	137.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Subcutaneous tenotomy of foot, by small percutaneous incisions—one or more tendons (Anaes.)	102.9	116.6	Y

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49809	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	225.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Open tenotomy or lengthening of foot, by open incision, with or without tenoplasty, including either or both of the following (if performed): (a) synovial biopsy; (b) synovectomy; —one too (Anaes.) (Assist.)	168.95	191.5	Y
49812	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Advancement of tendon or ligament transfer of foot, including: (a) side to side transfer, harvesting and transfer for ligament or minor foot tendon reconstruction; and (b) either or both of the following (if performed): (i) synovial biopsy; (ii) synovectomy; —one major tendon or tow (H) (Anaes.) (Assist.)	337.9		Y
49814	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	1028.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Reconstruction of major tendon of ankle, by any method, including: (a) osteotomy of hindfoot, with internal fixation; and (b) lengthening of major tendon of ankle; and (c) any of the following (if performed): (i) synovial biopsy; (ii) synovectomy; (iii) adjacent tendon transfer; (iv) turn-down flaps; other than a service associated with a service to which item 49718 applies (H) (Anaes.) (Assist.)	771.55		Y
49815	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1426.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Triple arthrodesis of hindfoot joints, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joints (H) (Anaes.) (Assist.)	1070.15		Y
49818	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	284	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Release of plantar fascia, including excision of calcaneal spur (if performed) (H) (Anaes.) (Assist.)	213		Y
49821	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joint, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement —one joint (H) (Anaes.) (Assist.)	337.9		Y
49824	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	788.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excisional or interpositional arthroplasty of metatarsophalangeal or tarsometatarsal joint, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) local tendon transfer; (e) joint debridement; —2 joints (H) (Anaes.) (Assist.)	591.55		Y
49827	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral correction of hallux valgus or varus deformity of the foot, by local tendon transfer, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	367.35		Y
49830	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	857.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral correction of hallux valgus or varus deformity of the foot, by local tendon transfer, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	642.9		Y
49833	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	538.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Unilateral correction of hallux valgus or varus deformity of the foot, by osteotomy of first metatarsal, without internal fixation, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	404.1		Y
49836	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	930.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Bilateral correction of hallux valgus or varus deformity of the foot by osteotomy of first metatarsal, without internal fixation, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	698		Y
49837	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	671.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Unilateral correction of hallux valgus or varus deformity of the foot, by osteotomy of first metatarsal, with internal fixation, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	505.1		Y
49838	1/05/2000	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1163.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Bilateral correction of hallux valgus or varus deformity of the foot by osteotomy of first metatarsal, with internal fixation, including any of the following (if performed): (a) exostectomy; (b) removal of bursae; (c) synovectomy; (d) capsule repair; (e) capsule or tendon release or transfer (H) (Anaes.) (Assist.)	872.3		Y
49839	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	538.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Total replacement of first metatarsophalangeal joint, with replacement of both joint surfaces, including any of the following (if performed): (a) capsulotomy; (b) synovectomy; (c) joint debridement (H) (Anaes.) (Assist.)	404.1		Y
49845	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	671.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral arthrodesis of first metatarsophalangeal joint, by open or arthroscopic means, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joints (H) (Anaes.) (Assist.)	505.1		Y
49851	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	450.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrodesis, osteotomy or interpositional arthroplasty of proximal or distal (or both) joints of lesser toe, including any of the following (if performed): (a) internal fixation, by any method; (b) capsulotomy; (c) tendon lengthening; (d) joint release; (e) synovectomy; (f) removal of osteophytes at joints; —one too (H) (Anaes.) (Assist.)	337.9		Y
49854	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	391.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Radical plantar fasciotomy or fasciectomy, with extensive incision into foot and excision of fascia, including excision of calcaneal spur (if performed), other than a service associated with a service to which 49818 applies (H) (Anaes.) (Assist.)	293.85		Y
49857	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	362.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hemi joint replacement of first or lesser metatarsophalangeal joint, including any of the following (if performed): (a) capsulotomy; (b) synovectomy; (c) joint debridement (H) (Anaes.) (Assist.)	271.85		Y
49860	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	338.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy of metatarsophalangeal joints, including any of the following (if performed): (a) capsulotomy; (b) debridement; (c) release of ligament or tendon (or both); —one or more joints on one foot (H) (Anaes.) (Assist.)	253.85		Y
49866	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	313.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of intermetatarsal or digital neuroma, including any of the following (if performed): (a) release of metatarsal or digital ligament; (b) excision of bursae; (c) neurolysis; other than a service associated with a service to which item30023 applies—one web space (H) (Anaes.) (Assist.)	234.95		Y
49878	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	58.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Talipes equinovarus, calcaneo valgus or metatarsus varus, treatment by cast, splint or manipulation—each attendance (Anaes.)	44.1	49.95	Y
49881	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	228.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complete excision of one or more ganglia or bursae: (a) including excision of bony prominence or mucinous cyst of interphalangeal or metatarsophalangeal joint and surrounding tissues; and (b) including any of the following (if performed): (i) arthrotomy; (ii) synovectomy; (iii) osteophyte resections; (iv) neurolysis; (v) skin closure, by any method; other than a service associated with a service to which item30023 applies—each incision (H) (Anaes.) (Assist.)	171.65		Y
49884	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Complete excision of one or more ganglia or bursae: (a) including excision of bony prominence or mucinous cyst of ankle, hindfoot or midfoot joint and surrounding tissues; and (b) including any of the following (if performed): (i) arthrotomy; (ii) synovectomy; (iii) osteophyte resections; (iv) neurolysis; (v) capsular or ligament repair; (vi) skin closure, by any method; other than a service associated with a service to which item30023 applies—each incision (H) (Anaes.) (Assist.)	289.95		Y
49887	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	308	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of complete excision of one or more ganglia or bursae: (a) including excision of bony prominence or mucinous cyst of interphalangeal or metatarsophalangeal joint and surrounding tissues; and (b) including any of the following (if performed): (i) arthrotomy; (ii) synovectomy; (iii) osteophyte resections; (iv) neurolysis; (v) skin closure, by any method; other than a service associated with a service to which item30023 or 49881 applies—each incision (H) (Anaes.) (Assist.)	231.75		Y
49890	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	521.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of complete excision of one or more ganglia or bursae: (a) including excision of bony prominence or mucinous cyst of ankle, hindfoot or midfoot joint and surrounding tissues; and (b) including any of the following (if performed): (i) arthrotomy; (ii) synovectomy; (iii) osteophyte resections; (iv) neurolysis; (v) capsular or ligament repair; (vi) skin closure, by any method; other than a service associated with a service to which item30023 or 49884 applies—each incision (H) (Anaes.) (Assist.)	391.35		Y
50107	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	490.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Stabilisation of joint of hip, by open means, including any of the following (if performed): (a) repair of capsule; (b) labrum; (c) capsulorraphy; (d) repair of ligament; (e) internal fixation; other than a service associated with a service to which another item in this Group applies (H) (Anaes.) (Assist.)	367.35		Y
50112	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	375.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Cicatrical flexion or extension contraction of joint, correction of, involving tissues deeper than skin and subcutaneous tissue, other than a service to which another item in this Group applies (H) (Anaes.) (Assist.)	281.8		Y
50115	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	148.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Manipulation of one or more joints, excluding spine, other than a service associated with a service to which another item in this Group applies (H) (Anaes.)	111.6		Y
50118	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	815.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arthrodesis of joint of hindfoot, by any method, with internal or external fixation by any method, including any of the following (if performed): (a) capsulotomy; (b) joint release; (c) synovectomy; (d) removal of osteophytes at joints; —one joint (H) (Anaes.) (Assist.)	611.5		Y
50130	1/07/1993	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	324.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Joint or joints, application of external fixator to, other than for treatment of fractures (H) (Anaes.) (Assist.)	243.75		Y
50200	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	195.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Core needle biopsy of aggressive or potentially malignant bone or soft tissue tumour, excluding aftercare (Anaes.)	146.85	166.45	Y
50201	1/11/2004	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	342.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Incisional biopsy of aggressive or potentially malignant bone or soft tissue tumour, excluding aftercare (Anaes.) (Assist.)	257.1	291.4	Y
50203	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	431.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intralesional or marginal excision of bone or soft tissue tumour (Anaes.) (Assist.)	323.3	366.4	Y
50206	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intralesional or marginal excision of bone tumour, with at least one of the following: (a) autograft; (b) allograft; (c) cementation (H) (Anaes.) (Assist.)	477.6		Y
50209	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intralesional or marginal excision of bone tumour, with at least 2 of the following: (a) autograft; (b) allograft; (c) cementation (H) (Anaes.) (Assist.)	587.85		Y
50212	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1714.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wide excision of malignant or aggressive bone or soft tissue tumour (or both), affecting a limb, trunk or scapula (H) (Anaes.) (Assist.)	1285.75		Y
50215	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2155.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wide excision of malignant or aggressive bone or soft tissue tumour (or both), with intercalary reconstruction of bone by prosthesis, allograft or autograft (H) (Anaes.) (Assist.)	1616.35		Y
50218	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2840.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wide excision of malignant or aggressive bone or soft tissue tumour (or both), with reconstruction, replacement or arthrodesis of adjacent joint, by prosthesis, allograft or autograft (H) (Anaes.) (Assist.)	2130.75		Y
50221	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2644.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Wide excision of malignant or aggressive bone or soft tissue tumour (or both) of pelvis, sacrum or spine, without reconstruction (H) (Anaes.) (Assist.)	1983.65		Y
50224	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	2938.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Wide excision of malignant or aggressive bone or soft tissue tumour (or both) of pelvis, sacrum or spine, with reconstruction of bone defect, or one or more joints, by any technique (Anaes.) (Assist.)	2204.1	2850.9	Y
50233	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2253.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of malignant or aggressive bone or soft tissue tumour (or both) by hindquarter or forequarter amputation (H) (Anaes.) (Assist.)	1689.85		Y

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S0236	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1763.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of malignant or aggressive bone or soft tissue tumour (or both), by hip disarticulation, shoulder disarticulation or amputation through the proximal one third of the femur (H) (Anaes.) (Assist.)	1322.5		Y
S0239	1/12/1991	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1175.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of malignant or aggressive bone or soft tissue tumour (or both), by amputation, other than a service associated with a service to which Item S0233 or S0236 applies (H) (Anaes.) (Assist.)	881.55		Y
S0242	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	881.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of endoprosthetic replacement, if Item S0218 or S0224, or an item that describes a service substantially similar to either of those items, applied to the initial procedure: (a) including any of the following: (i) rebushing; (ii) patella resurfacing; (iii) polyethylene exchange or similar; and (b) excluding removal of prosthetic from bone (H) (Anaes.) (Assist.)	661.25		Y
S0245	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2645.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of reconstructive procedure, if Item S0215, S0218 or S0224, or an item that describes a service substantially similar to any of those items, applied to the initial procedure, by any technique or combination of techniques (H) (Anaes.) (Assist.)	1983.8		Y
S0300	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1204.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Gradual correction of joint deformity, with application of external fixator (H) (Anaes.) (Assist.)	903.45		Y
S0303	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1646.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Limb lengthening, by gradual distraction, with application of external fixator or intra-medullary device (H) (Anaes.) (Assist.)	1233.5		Y
S0306	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	2567.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bipolar limb lengthening: (a) with application of external fixator or intra-medullary device; and (b) by any of the following: (i) gradual distraction; (ii) bone transport; (iii) fixator extension, to correct for an adjacent joint deformity (H) (Anaes.) (Assist.)	1925.95		Y
S0309	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	317.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Ring fixator or similar device, adjustment of, with or without insertion or removal of fixation pins, performed under general anaesthesia, other than a service to which Item50303 or S0306 applies (H) (Anaes.) (Assist.)	238.1		Y
S0310	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/2021	1/07/2021	45.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Major adjustment of ring fixator or similar device, other than a service associated with a service to which Item S0303, S0306, or S0309 applies	34.05	38.6	
S0312	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	782.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Synovectomy or debridement, and microfracture, of ankle joint for osteochondral large defect greater than 1.5cm2, by arthroscopic or open means, including any of the following (if performed): (a) capsulotomy; (b) debridement or release of ligament; (c) debridement or release of tendon; other than a service associated with a service to which any of the following apply: (d) Item49702; (e) another item in this Schedule if the service described in the other item is for the purpose of performing an arthroscopic procedure of the ankle (H) (Anaes.) (Assist.)	587.05		Y
S0321	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	966.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Release of soft tissue of talipes equinovarus, by open means (H) (Anaes.) (Assist.)	724.85		Y
S0324	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1377.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Revision of release of soft tissue of talipes equinovarus, by open means (H) (Anaes.) (Assist.)	1033.4		Y
S0330	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	237.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Post-operative manipulation, and change of plaster, of vertical, congenital talipes equinovarus or talus, other than a service to which Item50323 or S0324 applies (H) (Anaes.)	178.5		Y
S0333	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	641.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Excision of tarsal coalition, with interposition of muscle, fat graft or similar graft, including any of the following (if performed): (a) capsulotomy; (b) capsulectomy; (c) excision of osteophytes; —one coalition (H) (Anaes.) (Assist.)	481.35		Y
S0335	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	641.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of vertical congenital talus, by percutaneous or open stabilisation of talonavicular joint and Achilles' tenotomy (H) (Anaes.) (Assist.)	481.35		Y
S0336	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	959.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Talus, vertical, congenital, combined anterior and posterior reconstruction (H) (Anaes.) (Assist.)	719.55		Y
S0339	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	614.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibialis anterior or tibialis posterior tendon transfer (split or whole) (H) (Anaes.) (Assist.)	460.8		Y
S0345	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	360.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Hyperextension deformity of toe, release incorporating Y-V plasty of skin, lengthening of extensor tendons and release of capsule contracture (H) (Anaes.) (Assist.)	270.55		Y
S0348	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	237.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Knee, deformity of, post-operative manipulation and change of plaster, performed under general anaesthesia (H) (Anaes.)	178.5		Y
S0351	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	1661.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of developmental dislocation of hip, by open reduction, including application of hip spica (H) (Anaes.) (Assist.)	1246.5		Y
S0352	1/05/2001	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/05/2001	1/07/2021	58.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of developmental dysplasia of hip, including supervision of initial application of splint, harness or cast, other than a service to which another item in this Group applies (Anaes.)	44.1	69.95	Y
S0354	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1363.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Resection and fixation of congenital pseudarthrosis of tibia (Anaes.) (Assist.)	1022.4	1275.3	Y
S0357	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	584.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Transfer of tendon of rectus femoris or medial or lateral hamstring (H) (Anaes.) (Assist.)	438.25		Y
S0360	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	678.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Combined medial and lateral hamstring tendon transfer (H) (Anaes.) (Assist.)	508.55		Y
S0369	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2004	1/07/2021	678.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral posterior release of knee contracture, with multiple tendon lengthening or tenotomies, including release of joint capsule (if performed), other than a service associated with a service to which another item of this Schedule applies if the service descriedin the other item is for the purpose of knee replacement (H) (Anaes.) (Assist.)	508.55		Y
S0372	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1190.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral posterior release of knee contracture, with multiple tendon lengthening or tenotomies, including release of joint capsule (if performed), other than a service associated with a service to which another item of this Schedule applies if the service described in the other item is for the purpose of knee replacement (H) (Anaes.) (Assist.)	892.65		Y
S0375	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	519.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral medial release of hip contracture, with lengthening or division of the adductors and psoas, including division of obturator nerve (if performed) (H) (Anaes.) (Assist.)	389.5		Y
S0378	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	908.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral medial release of hip contracture, with lengthening or division of adductors and psoas, including division of obturator nerve (if performed) (H) (Anaes.) (Assist.)	681.65		Y
S0381	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	678.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral anterior release of hip contracture, with lengthening or division of hip flexors and psoas, including division of joint capsule (if performed) (H) (Anaes.) (Assist.)	508.55		Y
S0384	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1190.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral anterior release of hip contracture, with lengthening or division of hip flexors and psoas, including division of joint capsule (if performed) (H) (Anaes.) (Assist.)	892.65		Y
S0390	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/05/2016	1/07/2021	237.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Application of cast under general anaesthesia, for patient with perthes, cerebral palsy, or other neuromuscular conditions, affecting hips or knees (H) (Anaes.)	178.5		Y
S0393	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	879.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Acetabular shelf procedure, other than a service associated with a service to which another item of this Schedule applies if the service in the other item is for the purpose of performing arthroplasty on the hip (H) (Anaes.) (Assist.)	659.95		Y
S0394	1/07/1998	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	2889.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Multiple peri-acetabular osteotomy, including internal fixation (if performed) (H) (Anaes.) (Assist.)	2167.45		Y
S0395	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/07/2021	1/07/2021	950.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Osteotomy and distillation of greater trochanter, with internal fixation (H) (Anaes.) (Assist.)	712.7		Y
S0396	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	483.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Amputation of congenital abnormalities or duplication of digits of the hand or foot, including any of the following (if performed): (a) splitting of phalanx or phalanges; (b) ligament reconstruction; (c) joint reconstruction (H) (Anaes.) (Assist.)	362.55		Y
S0399	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	959.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Forearm, radial aplasia or dysplasia (radial club hand), centralisation or radialisation of (H) (Anaes.) (Assist.)	719.55		Y
S0611	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1363.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lower limb deficiency, treatment of congenital deficiency of the femur by resection of the distal femur and proximal tibia followed by knee fusion (Anaes.) (Assist.)	1022.4	1275.3	Y
S0614	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1818.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lower limb deficiency, treatment of congenital deficiency of the femur by resection of the distal femur and proximal tibia followed by knee fusion and rotationplasty (Anaes.) (Assist.)	1379.45	1751.35	Y
S0617	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1363.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Lower limb deficiency, treatment of congenital deficiency of the tibia by reconstruction of the knee, involving transfer of fibula or tibia, and repair of quadriceps mechanism (Anaes.) (Assist.)	1022.4	1275.3	Y
S0620	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	1125.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Patella, congenital dislocation of, reconstruction of the quadriceps (H) (Anaes.) (Assist.)	843.9		Y
S0623	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	1038.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Tibia, fibula or both, congenital deficiency of, transfer of the fibula to tibia, with internal fixation (Anaes.) (Assist.)	779	950.75	Y
S0626	1/07/1995	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2004	1/07/2021	483.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Removal of one or more lesions from bone, for osteochondroma occurring solitary or in association with hereditary multiple exostoses, with histological examination—one approach (H) (Anaes.) (Assist.)	362.55		Y
S0628	1/07/2021	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/07/2021	1/07/2021	807.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Percutaneous drilling of osteochondritis dessicans or other osteochondral lesion, for a patient: (a) with open growth plates; or (b) less than 18 years of age (H) (Anaes.) (Assist.)	605.3		Y
S0650	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1276.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral single event multilevel surgery, for a patient less than 18 years of age with hemiplegic cerebral palsy, comprising 3 or more of the following: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; (b) correction of muscle imbalance by transfer of a tendon or tendons; (c) correction of femoral torsion by rotational osteotomy of the femur; (d) correction of tibial torsion by rotational osteotomy of the tibia; (e) correction of joint instability by varus derotation osteotomy of the femur, subtalar arthrodesis with synovectomy if performed, or os calcis lengthening; conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (H) (Anaes.) (Assist.)	957.5		Y
S0651	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1276.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, comprising 3 or more of the following: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; (b) correction of muscle imbalance by transfer of a tendon or tendons; (c) correction of femoral torsion by rotational osteotomy of the femur; (d) correction of tibial torsion by rotational osteotomy of the tibia; (e) correction of joint instability by varus derotation osteotomy of the femur, subtalar arthrodesis with synovectomy if performed, or os calcis lengthening; conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (H) (Anaes.) (Assist.)	957.5		Y
S0655	1/11/2006	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1445.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, that comprises: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (H) (Anaes.) (Assist.)	1084.3		Y

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50456	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1445.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, that comprises: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (H) (Anaes.) (Assist.)	1084.3	Y
50460	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2158.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, that comprises bilateral soft tissue surgery and bilateral femoral osteotomies, with: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of torsional abnormality of the femur by rotational osteotomy and internal fixation; conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (H) (Anaes.) (Assist.)	1618.9	Y
50461	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2158.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, that comprises bilateral soft tissue surgery and bilateral femoral osteotomies, with: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of torsional abnormality of the femur by rotational osteotomy and internal fixation; conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (H) (Anaes.) (Assist.)	1618.9	Y
50465	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3040.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, that comprises bilateral soft tissue surgery, bilateral femoral osteotomies and bilateral tibial osteotomies, with: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of abnormal torsion of the femur by rotational osteotomy with internal fixation; and (d) correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation; conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (H) (Anaes.) (Assist.)	2280.15	Y
50466	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3040.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, that comprises bilateral soft tissue surgery, bilateral femoral osteotomies and bilateral tibial osteotomies, with: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of abnormal torsion of the femur by rotational osteotomy with internal fixation; and (d) correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation; conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (H) (Anaes.) (Assist.)	2280.15	Y
50670	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3855.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with cerebral palsy, that comprises bilateral soft tissue surgery, bilateral femoral osteotomies, bilateral tibial osteotomies and bilateral foot stabilisation, with: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of abnormal torsion of the femur by rotational osteotomy with internal fixation; and (d) correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation; and (e) correction of bilateral pes valgus by os calcis lengthening or subtalar fusion; conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (H) (Anaes.) (Assist.)	2891.8	Y
50671	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3855.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Bilateral single event multilevel surgery, for a patient less than 18 years of age with cerebral palsy, that comprises bilateral soft tissue surgery, bilateral femoral osteotomies, bilateral tibial osteotomies and bilateral foot stabilisation, with: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of abnormal torsion of the femur by rotational osteotomy with internal fixation; and (d) correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation; and (e) correction of bilateral pes valgus by os calcis lengthening or subtalar fusion; conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (H) (Anaes.) (Assist.)	2891.8	Y
50675	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	4469.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, for the correction of crouch gait, including: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of flexion deformity at the knee by extension osteotomy of the distal femur including internal fixation; and (d) correction of patella alta and quadriceps insufficiency by patella tendon shortening or reconstruction; and (e) correction of tibial torsion by rotational osteotomy of the tibia with internal fixation; and (f) correction of foot instability by os calcis lengthening or subtalar fusion; conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (H) (Anaes.) (Assist.)	3336.85	Y
50676	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	4469.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	15/07/2021	Single event multilevel surgery, for a patient less than 18 years of age with diplegic cerebral palsy, for the correction of crouch gait including: (a) lengthening of a contracted muscle tendon unit or units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening; and (b) correction of muscle imbalance by transfer of a tendon or tendons; and (c) correction of flexion deformity at the knee by extension osteotomy of the distal femur including internal fixation; and (d) correction of patella alta and quadriceps insufficiency by patella tendon shortening or reconstruction; and (e) correction of tibial torsion by rotational osteotomy of the tibia with internal fixation; and (f) correction of foot instability by os calcis lengthening or subtalar fusion; conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (H) (Anaes.) (Assist.)	3336.85	Y
50508	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	411.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of distal end of radius or ulna (or both), by closed reduction, for a patient with open growth plates (Anaes.)	308.4	349.55 Y
50512	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	548.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of distal end of radius or ulna (or both), by open or closed reduction, with internal fixation, for a patient with open growth plates (H) (Anaes.) (Assist.)	411.55	Y
50524	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	425.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Radius or ulna, shaft of, with open growth plate, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint (Galeazzi or Monteggia injury), by closed reduction (H) (Anaes.) (Assist.)	318.85	Y
50528	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	685.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Radius or ulna, shaft of, with open growth plate, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint (Galeazzi or Monteggia injury), by reduction with or without internal fixation by open or percutaneous means (H) (Anaes.) (Assist.)	514.3	Y
50532	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	596.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of shafts of radius or ulna (or both), by closed reduction, for a patient with open growth plate (H) (Anaes.)	447.45	Y
50536	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	795.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of shafts of radius or ulna (or both), by open or closed reduction, with internal fixation, for a patient with open growth plate (H) (Anaes.) (Assist.)	596.55	Y
50540	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	548.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Olecranon, with open growth plate, treatment of fracture of, by open reduction (H) (Anaes.) (Assist.)	411.55	Y
50544	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	226.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Radius, with open growth plate, treatment of fracture of head or neck of, by closed reduction of (Anaes.)	205.7	233.15 Y
50548	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	548.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Radius, with open growth plate, treatment of fracture of head or neck of, by reduction with or without internal fixation by open or percutaneous means (H) (Anaes.) (Assist.)	411.55	Y
50552	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	472.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Humerus, proximal, with open growth plate, treatment of fracture of, by closed reduction (H) (Anaes.)	354.9	Y
50556	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	630.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of proximal humerus, by open or closed reduction, with internal fixation, for a patient with open growth plate (H) (Anaes.) (Assist.)	473.1	Y
50560	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	493.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Humerus, shaft of, with open growth plate, treatment of fracture of, by closed reduction (H) (Anaes.)	370.25	Y
50564	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	658.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of shaft of humerus, by open or closed reduction, with internal or external fixation, for a patient with open growth plate (H) (Anaes.) (Assist.)	493.7	Y
50568	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	576.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Humerus, with open growth plate, supracondylar or condylar, treatment of fracture of, by closed reduction (H) (Anaes.)	432.05	Y
50572	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	768	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Humerus, with open growth plate, supracondylar or condylar, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means (H) (Anaes.) (Assist.)	576	Y
50576	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2006	1/07/2021	630.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of femur, by closed reduction or traction, including application of hip spica (if performed), for a patient with open growth plate (Anaes.) (Assist.)	473.1	542.9 Y
50580	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	658.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Tibia, with open growth plate, plateau or condyles, medial or lateral, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means (H) (Anaes.) (Assist.)	493.7	Y
50584	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	630.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Tibia, distal, with open growth plate, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means (H) (Anaes.) (Assist.)	473.1	Y
50588	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	822.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Tibia and fibula, with open growth plates, treatment of fracture of, by internal fixation (H) (Anaes.) (Assist.)	617.1	Y
50592	1/07/2021	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	998.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of shaft of femur, by open or closed reduction, with internal or external fixation, for a patient with open growth plate (H) (Anaes.) (Assist.)	749.4	Y
50596	1/07/2021	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/07/2021	1/07/2021	312.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Treatment of fracture of shaft of tibia, by open or closed reduction, including casting, for a patient with open growth plate (H) (Anaes.) (Assist.)	234.3	Y
50600	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/05/2016	1/07/2021	452.3	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Scoliosis or kyphosis, in a child, manipulation of deformity and application of a localiser cast, under general anaesthesia, in a hospital (H) (Anaes.) (Assist.)	339.25	Y
50604	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	1919.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Scoliosis or kyphosis, in a child or adolescent, spinal fusion for (without instrumentation) (H) (Anaes.) (Assist.)	1439.85	Y
50608	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2565.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Scoliosis or kyphosis, in a child or adolescent, treatment by segmental instrumentation and fusion of the spine, other than a service to which any of items S1011 to S1171 apply (H) (Anaes.) (Assist.)	2674.4	Y
50612	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	5072.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Scoliosis or kyphosis, in a child or adolescent, with spinal deformity, treatment by segmental instrumentation, utilising separate anterior and posterior approaches, other than a service to which any of items S1011 to S1171 apply (H) (Anaes.) (Assist.)	3804.05	Y
50616	1/11/2006	ITable	3	T8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	644.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Scoliosis, in a child or adolescent, re-exploration for adjustment or removal of segmental instrumentation used for correction of spine deformity (H) (Anaes.) (Assist.)	483.35	Y

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S0620	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3565.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Scoliosis, in a child or adolescent, revision of failed scoliosis surgery, involving more than one of osteotomy, fusion, removal of instrumentation or instrumentation, other than a service to which any of Items S1011 to S1171 apply (H) (Anaes.)(Assist.)	2674.4	Y
S0624	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3565.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Scoliosis, in a child or adolescent, anterior correction of, with fusion and segmental fixation (Dwyer, Zielke or similar) - not more than 4 levels (H) (Anaes.) (Assist.)	2674.4	Y
S0628	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	4404.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Scoliosis, in a child or adolescent, anterior correction of, with fusion and segmental fixation (Dwyer, Zielke or similar)—more than 4 levels (H) (Anaes.)(Assist.)	3303.6	Y
S0632	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	3702.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Scoliosis or kyphosis, in a child or adolescent, requiring segmental instrumentation and fusion of the spine down to and including the pelvis or sacrum, other than a service to which any of Items S1011 to S1171 apply (H) (Anaes.) (Assist.)	2777.2	Y
S0636	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	4114.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Scoliosis, in a child or adolescent, requiring anterior decompression of the spinal cord with vertebral resection and instrumentation in the presence of spinal cord involvement, other than a service to which any of Items S1011 to S1171 apply (H) (Anaes.)(Assist.)	3085.75	Y
S0640	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2274.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Scoliosis, in a child or adolescent, congenital, resection and fusion of abnormal vertebra via an anterior or posterior approach, other than a service to which any of Items S1011 to S1171 apply (H) (Anaes.) (Assist.)	1705.8	Y
S0644	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	2194.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Spine, bone graft to, for a child or adolescent, associated with surgery for correction of scoliosis or kyphosis or both (H) (Anaes.) (Assist.)	1645.8	Y
S0654	1/11/2006	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2006	1/07/2021	516.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Treatment of hip dysplasia or dislocation, for a patient under the age of 18 years, by examination or closed reduction (or both), with or without arthrography of the hip under anaesthesia, and with application or reapplication of a hip spica (H) (Anaes.) (Assist.)	387.6	Y
S0950	1/05/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	A	1/05/2004	1/07/2021	850.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unresectable primary malignant tumour of the liver, destruction of, by percutaneous ablation (including any associated imaging services), other than a service associated with a service to which Item30419 or S0952 applies (Anaes.)	637.65	762.3	Y
S0952	1/05/2004	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	A	1/05/2004	1/07/2021	850.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Unresectable primary malignant tumour of the liver, destruction of, by open or laparoscopic ablation (including any associated imaging services), if a multi-disciplinary team has assessed that percutaneous ablation cannot be performed or is not practical because of one or more of the following clinical circumstances:(a) percutaneous access cannot be achieved;(b) vital organs or tissues are at risk of damage from the percutaneousablationprocedure;(c) resection of one part of the liver is possible, however there is at least one primary liver tumour in an unresectable portion of the liver that is suitable for ablation;other than a service associated with a service to which Item30419 or S0950 applies (Anaes.)	637.65	762.3	Y
S1011	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1491.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Direct spinal decompression or exposure (via a partial or a total laminectomy or a partial vertebrectomy), or a posterior spinal release, one motion segment, not being a service associated with a service to which Item S1012, S1013, S1014 or S1015 applies (H) (Anaes.) (Assist.)	1120.35	Y
S1012	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1991.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Direct spinal decompression or exposure (via a partial or a total laminectomy or a partial vertebrectomy), or a posterior spinal release, 2 motion segments, not being a service associated with a service to which Item S1011, S1013, S1014 or S1015 applies (H) (Anaes.) (Assist.)	1493.5	Y
S1013	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2489.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Direct spinal decompression or exposure (via a partial or a total laminectomy or a partial vertebrectomy), or a posterior spinal release, 3 motion segments, not being a service associated with a service to which Item S1011, S1012, S1014 or S1015 applies (H) (Anaes.) (Assist.)	1866.9	Y
S1014	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2987.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Direct spinal decompression or exposure (via a partial or a total laminectomy or a partial vertebrectomy), or a posterior spinal release, 4 motion segments, not being a service associated with a service to which Item S1011, S1012, S1013 or S1015 applies (H) (Anaes.) (Assist.)	2240.3	Y
S1015	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	3484.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Direct spinal decompression or exposure (via a partial or a total laminectomy or a partial vertebrectomy), or a posterior spinal release, more than 4 motion segments, not being a service associated with a service to which Item S1011, S1012, S1013 or S1014 applies (H) (Anaes.) (Assist.)	2613.7	Y
S1020	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	796.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Simple fixation of part of one vertebra (not motion segment) including pars interarticularis, spinous process or pedicle, or simple interspinous wiring between 2 adjacent vertebral levels, not being a service associated with (a) interspinous dynamic stabilisation devices; or (b) a service to which Item S1021, S1022, S1023, S1024, S1025 or S1026 applies (Anaes.) (Assist.)	597.35	Y
S1021	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1331.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including subliminar tapes or wires, one motion segment, not being a service associated with a service to which Item S1020, S1022, S1023, S1024, S1025 or S1026 applies (Anaes.) (Assist.)	999.9	Y
S1022	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1658.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including subliminar tapes or wires, 2 motion segments, not being a service associated with a service to which Item S1020, S1021, S1023, S1024, S1025 or S1026 applies (Anaes.) (Assist.)	1243.75	Y
S1023	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1973.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including subliminar tapes or wires, 3 or 4 motion segments, not being a service associated with a service to which Item S1020, S1021, S1022, S1024, S1025 or S1026 applies (Anaes.) (Assist.)	1480.1	Y
S1024	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2278.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including subliminar tapes or wires, 5 or 6 motion segments, not being a service associated with a service to which Item S1020, S1021, S1022, S1023, S1025 or S1026 applies (Anaes.) (Assist.)	1708.75	Y
S1025	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2662.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including subliminar tapes or wires, 7 to 12 motion segments, not being a service associated with a service to which Item S1020, S1021, S1022, S1023, S1024 or S1026 applies (Anaes.) (Assist.)	1997.2	Y
S1026	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2915.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including subliminar tapes or wires, more than 12 motion segments, not being a service associated with a service to which Item S1020, S1021, S1022, S1023, S1024 or S1025 applies (Anaes.) (Assist.)	2186.6	Y
S1031	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	979.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, posterior and/or posterolateral bone graft to, one motion segment, not being a service associated with a service to which Item S1032, S1033, S1034, S1035 or S1036 applies (Anaes.) (Assist.)	734.7	Y
S1032	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1175.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, posterior and/or posterolateral bone graft to, 2 motion segments, not being a service associated with a service to which Item S1031, S1033, S1034, S1035 or S1036 applies (Anaes.) (Assist.)	881.7	Y
S1033	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1371.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, posterior and/or posterolateral bone graft to, 3 motion segments, not being a service associated with a service to which Item S1031, S1032, S1034, S1035 or S1036 applies (Anaes.) (Assist.)	1028.65	Y
S1034	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1469.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, posterior and/or posterolateral bone graft to, 4 to 7 motion segments, not being a service associated with a service to which Item S1031, S1032, S1033, S1035 or S1036 applies (Anaes.) (Assist.)	1102.05	Y
S1035	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1567.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, posterior and/or posterolateral bone graft to, 8 to 11 motion segments, not being a service associated with a service to which Item S1031, S1032, S1033, S1034 or S1036 applies (Anaes.) (Assist.)	1175.55	Y
S1036	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1660.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, posterior and/or posterolateral bone graft to, 12 or more motion segments, not being a service associated with a service to which Item S1031, S1032, S1033, S1034 or S1035 applies (Anaes.) (Assist.)	1249.05	Y
S1041	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1126.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), one motion segment, not being a service associated with a service to which Item S1042, S1043, S1044 or S1045 applies (Anaes.) (Assist.)	844.95	Y
S1042	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1577.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 2 motion segments, not being a service associated with a service to which Item S1041, S1043, S1044 or S1045 applies (Anaes.) (Assist.)	1182.9	Y
S1043	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1971.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 3 motion segments, not being a service associated with a service to which Item S1041, S1042, S1044 or S1045 applies (Anaes.) (Assist.)	1478.7	Y
S1044	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2140.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 4 motion segments, not being a service associated with a service to which Item S1041, S1042, S1043 or S1045 applies (Anaes.) (Assist.)	1605.4	Y
S1045	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2253.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 5 or more motion segments, not being a service associated with a service to which Item S1041, S1042, S1043 or S1044 applies (Anaes.) (Assist.)	1689.9	Y
S1051	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1924.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Pedicle subtraction osteotomy, one vertebra, not being a service associated with a service to which Item S1052, S1053, S1054, S1055, S1056, S1057, S1058 or S1059 applies (Anaes.) (Assist.)	1443.75	Y
S1052	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2341.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Pedicle subtraction osteotomy, 2 vertebrae, not being a service associated with a service to which Item S1051, S1053, S1054, S1055, S1056, S1057, S1058 or S1059 applies (Anaes.) (Assist.)	1755.9	Y
S1053	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2663.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Vertebral column resection osteotomy performed through single posterior approach, one vertebra, not being a service associated with a service to which Item S1051, S1052, S1054, S1055, S1056, S1057, S1058 or S1059 applies (Anaes.) (Assist.)	1997.8	Y
S1054	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1420.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Vertebral body, piecemeal or subtotal excision of (where piecemeal or subtotal excision is defined as removal of more than 50% of the vertebral body), one vertebra, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which Item S1051, S1052, S1053, S1055, S1056, S1057, S1058 or S1059 applies (Anaes.) (Assist.)	1065.25	Y
S1055	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2130.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Vertebral body, piecemeal or subtotal excision of (where piecemeal or subtotal excision is defined as removal of more than 50% of the vertebral body), 2 vertebrae, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which Item S1051, S1052, S1053, S1054, S1056, S1057, S1058 or S1059 applies (Anaes.) (Assist.)	1597.85	Y
S1056	1/11/2018	[Table]	3	TB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2485.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Vertebral body, piecemeal or subtotal excision of (where piecemeal or subtotal excision is defined as removal of more than 50% of the vertebral body), 3 or more vertebrae, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which Item S1051, S1052, S1053, S1054, S1055, S1057, S1058 or S1059 applies (Anaes.) (Assist.)	1864.15	Y

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51057	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2497.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Vertebral body, en bloc excision of (complete spondylectomy), one vertebra, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which Item51051, 51052, 51053, 51054, 51055, 51056, 51058 or 51059 applies (Anaes.) (Assist.)	1872.95	Y
51058	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2809.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Vertebral body, en bloc excision of (complete spondylectomy), 2 vertebrae, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which Item51051, 51052, 51053, 51054, 51055, 51056, 51057 or 51059 applies (Anaes.) (Assist.)	2107.45	Y
51059	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	3433.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Vertebral body, en bloc excision of (complete spondylectomy), 3 or more vertebrae, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which Item51051, 51052, 51053, 51054, 51055, 51056, 51057 or 51058 applies (Anaes.) (Assist.)	2575.35	Y
51061	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2949.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Spinal fusion, anterior and posterior, including spinal instrumentation at one motion segment, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which Item 51062, 51063, 51064, 51065 or 51066 applies (Anaes.) (Assist.)	2212.15	Y
51062	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	3823.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Spinal fusion, anterior and posterior, including spinal instrumentation at 2 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which Item 51061, 51063, 51064, 51065 or 51066 applies (Anaes.) (Assist.)	2867.45	Y
51063	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	4630.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Spinal fusion, anterior and posterior, including spinal instrumentation at 3 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which Item 51061, 51062, 51064, 51065 or 51066 applies (Anaes.) (Assist.)	3473	Y
51064	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	5153.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Spinal fusion, anterior and posterior, including spinal instrumentation at 4 to 7 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which Item 51061, 51062, 51063, 51065 or 51066 applies (Anaes.) (Assist.)	3865.2	Y
51065	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	5699.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Spinal fusion, anterior and posterior, including spinal instrumentation at 8 to 11 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which Item 51061, 51062, 51063, 51064 or 51066 applies (Anaes.) (Assist.)	4274.85	Y
51066	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	6001.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2019	Spinal fusion, anterior and posterior, including spinal instrumentation at 12 or more motion segments, posterior and/or posterolateral bone graft, and anterior column fusion not being a service associated with a service to which Item 51061, 51062, 51063, 51064 or 51065 applies (Anaes.) (Assist.)	4500.95	Y
51071	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2601.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Removal of intradural lesion, or primary extradural tumour or lesion, where the pathology is confirmed by histology - not including removal of arachnoid or pantafacet cyst and not being a service associated with a service to which Item 51072 or 51073 applies (H) (Anaes.) (Assist.)	1951	Y
51072	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2705.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Craniocervical junction lesion, intradural extramedullary, not being a service associated with a service to which Item 51071 or 51073 applies (Anaes.) (Assist.)	2029.05	Y
51073	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	3433.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Removal of intramedullary tumour or arteriovenous malformation, not being a service associated with a service to which Item 51071 or 51072 applies (Anaes.) (Assist.)	2575.35	Y
51102	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1231.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Thoracoplasty, reconstruction with thoracic scoliosis correction—3 or more ribs (Anaes.) (Assist.)	923.55	Y
51103	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2164.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Osteoplastic fusion (Anaes.) (Assist.)	1623.05	Y
51110	1/11/2018	ITable]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	783.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Spine, treatment of fracture, dislocation or fracture dislocation, with immobilisation by calipers or halo, not including application of skull tongs or calipers as part of operative positioning (Anaes.)	587.85	695.9	Y
51111	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	332.1	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Skull calipers or halo, insertion of, as an independent procedure (Anaes.)	249.85	Y
51112	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	225.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Plaster jacket, application of, as an independent procedure (Anaes.)	168.95	191.5	Y
51113	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	249.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Halo, application of, in addition to spinal fusion for scoliosis, or other conditions (Anaes.)	187.35	Y
51114	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	440.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Halo thoracic orthosis—application of both halo and thoracic jacket (Anaes.)	330.75	Y
51115	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	440.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Halo femoral traction, as an independent procedure (Anaes.)	330.75	374.85	Y
51120	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	245.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Bone graft, harvesting of autogenous graft, via separate incision or via subcutaneous approach, in conjunction with spinal fusion, other than for the purposes of bone graft obtained from the cervical, thoracic, lumbar or sacral spine (Anaes.)	183.8	Y
51130	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1866.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Lumbar artificial intervertebral total disc replacement, at one motion segment only, including removal of disc and marginal osteophytes: (a) for a patient who: (i) has not had prior spinal fusion surgery at the same lumbar level; and (ii) does not have vertebral osteoporosis; and (iii) has failed conservative therapy; and (b) not being a service associated with a service to which Item51011, 51012, 51013, 51014 or 51015 applies (Anaes.) (Assist.)	1399.8	Y
51131	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1126.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Cervical artificial intervertebral total disc replacement, at one motion segment only, including removal of disc and marginal osteophytes, for a patient who: (a) has not had prior spinal surgery at the same cervical level; and (b) is skeletally mature; and (c) has symptomatic degenerative disc disease with radiculopathy; and (d) does not have vertebral osteoporosis; and (e) has failed conservative therapy (Anaes.) (Assist.)	844.95	Y
51140	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	460.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Previous spinal fusion, re-exploration for, involving adjustment or removal of instrumentation up to 3 motion segments, not being a service associated with a service to which Item 51141 applies (Anaes.) (Assist.)	345.3	Y
51141	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	851.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Previous spinal fusion, re-exploration for, involving adjustment or removal of instrumentation more than 3 motion segments, not being a service associated with a service to which Item 51140 applies (Anaes.) (Assist.)	638.8	Y
51145	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	460.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Wound debridement or excision for post operative infection or haematoma following spinal surgery (Anaes.) (Assist.)	345.3	Y
51150	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	463.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Coccyx, excision of (Anaes.) (Assist.)	347.65	Y
51160	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1196.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Anterior exposure of thoracic or lumbar spine, one motion segment, not being a service to which Item 51165 applies (Anaes.) (Assist.)	897.45	Y
51165	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	1508.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Anterior exposure of thoracic or lumbar spine, more than one motion segment, not being a service to which Item 51160 applies (Anaes.) (Assist.)	1131.6	Y
51170	1/11/2018	ITable]	3	T8	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	2273.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2018	Syringomyelia or hydromyelia, craniotomy for, with or without duraplasty, intradural dissection, plugging of sinus or local cerebrospinal fluid shunt (Anaes.) (Assist.)	1704.9	Y
51171	1/11/2018	[Table]	3	T8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/11/2018	1/07/2021	954.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2018	Syringomyelia or hydromyelia, treatment by direct cerebrospinal fluid shunt (for example, syringoubarachnoid shunt, syringopleural shunt or syringoperitoneal shunt) (Anaes.) (Assist.)	715.95	Y
51300	1/12/1991	ITable]	3	T9	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	89.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Assistance at any operation identified by the word "Assist." for which the fee does not exceed $580.95 or at a series or combination of operations identified by the word "Assist." where the fee for the series or combination of operations identified by the word "Assist." does not exceed $580.95	67.35	76.35	
51303	1/12/1991	ITable]	3	T9	ITable]	ITable]	S	D	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	89.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Assistance at any operation identified by the word "Assist." for which the fee exceeds $580.95 or at a series of operations identified by the word "Assist." for which the aggregate fee exceeds $580.95	1/11/1998 one fifth of the established fee for the operation or combination of operations		
51306	1/12/1991	ITable]	3	T9	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	A	1/12/1991	1/07/2021	129.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Assistance at a birth involving Caesarean section		97.3	110.25	
51309	1/12/1991	ITable]	3	T9	ITable]	ITable]	S	D	ITable]	N	N	N	N	N	N	N	C	1/12/1991			ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Assistance at a series or combination of operations that include "(Assist.)" and assistance at a birth involving Caesarean section	one fifth of the established fee for the operation or combination of operations (the fee for Item 16520 1/11/1998 twice the Schedule fee for the Caesarean section component in the calculation of the established fee)			
51312	1/07/1995	ITable]	3	T9	ITable]	ITable]	S	D	ITable]	N	N	N	N	N	N	N	C	1/07/1995			ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2017	Assistance at any interventional obstetric procedure covered by Items 16606, 16609, 16612, 16615 and 16627	1/11/1998 one fifth of the established fee for the procedure or combination of procedures			
51315	1/05/1997	[Table]	3	T9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	283.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Assistance at cataract and intraocular lens surgery covered by Item 42688, 42701, 42702, 42704 or 42707, when performed in association with services covered by Item 42511 to 42549, 42653, 42656, 42725, 42746, 42749, 42752, 42776 or 42779		212.6	240.95	
51318	1/05/1997	ITable]	3	T9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	187.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	Assistance at cataract and intraocular lens surgery where patient has: -total loss of vision, including no potential for central vision, in the fellow eye; or -previous significant surgical complication in the fellow eye; or -pseudo exfoliation, subluxed lens, iridodonesis, phacodonesis, retinal detachment, corneal scarring, pre-existing uveitis, bound down missed pupil, nanophthalmos, sphenophakia, Marfan's syndrome, homocystelenuia or previous blunt trauma causing intraocular damage		140.3	159	
91850	13/03/2020	ITable]	3	T4	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	28.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Antenatal telehealth service provided by a midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner, to a maximum of 30 services per pregnancy, if: (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and (b) the service is provided at, or from, a practice location in a regional, rural or remote area; and (c) the service is not performed in conjunction with another antenatal attendance item in Group T4 for the same patient on the same day by the same practitioner.			24.1	
91851	13/03/2020	ITable]	3	T4	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	74.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Postnatal telehealth attendance by an obstetrician or general practitioner (other than a service to which any other item applies) if: (a) is between 4 and 8 weeks after the birth; and (b) lasts at least 20 minutes in duration; and (c) includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and (d) is for a pregnancy in relation to which a service to which Item82140 applies is not provided. Applicable once for a pregnancy			63.45	
91852	13/03/2020	ITable]	3	T4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	55.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Postnatal telehealth attendance (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which any other item applies) if: (a) the attendance is rendered by: (i) a midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or (ii) an obstetrician; or (iii) a general practitioner; and (b) is between 1 week and 4 weeks after the birth; and (c) lasts at least 20 minutes; and (d) is for a patient who was privately admitted for the birth; and (e) is for a pregnancy in relation to which a service to which Item82130, 82135 or 82140 applies is not provided. Applicable once for a pregnancy			47.25	
91853	13/03/2020	ITable]	3	T4	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	49.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/04/2020	Antenatal telehealth attendance.			41.7	

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91855	13/03/2020	[Table]	3	T4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	28.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Antenatal phone service provided by a midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner, to a maximum of 10 services per pregnancy, if: (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and (b) the service is provided at, or from, a practice location in a regional, rural or remote area; and (c) the service is not performed in conjunction with another antenatal attendance item in Group T4 for the same patient on the same day by the same practitioner.		24.1
91856	13/03/2020	[Table]	3	T4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	74.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Postnatal phone attendance by an obstetrician or general practitioner (other than a service to which any other item applies) if: (a) is between 4 and 8 weeks after the birth; and (b) lasts at least 20 minutes in duration; and (c) includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and (d) is for a pregnancy in relation to which a service to which item8214A applies is not provided. Applicable once for a pregnancy		63.45
91857	13/03/2020	[Table]	3	T4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	55.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Postnatal phone attendance other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which any other item applies if: (a) the attendance is rendered by: (i) a midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or (ii) an obstetrician; or (iii) a general practitioner; and (b) is between 1 week and 4 weeks after the birth; and (c) lasts at least 20 minutes; and (d) is for a patient who was privately admitted for the birth; and (e) is for a pregnancy in relation to which a service to which item8214B, 82135 or 82140 applies is not provided. Applicable once for a pregnancy		47.25
91858	13/03/2020	[Table]	3	T4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	13/03/2020	1/07/2021	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Antenatal phone attendance.		41.7
51700	1/12/1991	[Table]	4	Q1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	APPROVED DENTAL PRACTITIONER, REFERRED CONSULTATION - SURGERY, HOSPITAL OR RESIDENTIAL AGED CARE FACILITY Professional attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner, at consulting rooms, hospital or residential aged care facility where the patient is referred to him or her	66.75	75.65
51703	1/12/1991	[Table]	4	Q1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/12/1991	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Professional attendance by an approved dental practitioner, each attendance subsequent to the first in a single course of treatment at consulting rooms, hospital or residential aged care facility where the patient is referred to him or her	33.6	38.05
51800	1/12/1991	[Table]	4	Q2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	89.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Assistance by an approved dental practitioner in the practice of oral and maxillofacial surgery at any operationidentified by the word "Assist."for which the fee does not exceed$580.95 or at a series or combination of operations identified by the word "Assist. " where the fee for the series or combination of operations identified by the word "Assist. " does not exceed $580.95	67.35	76.35
51803	1/12/1991	[Table]	4	Q2	[Table]	[Table]	S	D	[Table]	N	N	N	N	N	N	N	C	1/12/1991			[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Assistance by an approved dental practitioner in the practice of oral and maxillofacial surgery at any operation specified in an item that includes "Assist.[for which the fee exceeds $580.95 or at a series or combination of operations specified in items that include "Assist[if the aggregate fee exceeds $580.95	1/11/1998 one fifth of the established fee for the operation or combination of operations	
51900	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	WOUND OF SOFT TISSUE, deep or extensively contaminated, debridement of, under general anaesthesia or regional or field nerve block including suturing of that wound when performed (Anaes.) (Assist.)	254.45	288.4 Y
51902	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	76.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	WOUNDS, DRESSING OF, under general anaesthesia, with or without removal of sutures, not being a service associated with a service to which another item in Groups Q3 to Q9 applies (Anaes.)	57.75	65.45 Y
51904	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	473.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	LIPECTOMY - wedge excision of skin or fat - 1 EXCISION (Anaes.) (Assist.)	355	402.35 Y
51906	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	719.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	LIPECTOMY - wedge excision of skin or fat - 2 OR MORE EXCISIONS (Anaes.) (Assist.)	539.85	631.85 Y
52000	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	85.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF RECENT WOUND OF, on face or neck, small (NOT MORE THAN 7 CM LONG), superficial (Anaes.)	64.35	72.95 Y
52003	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF RECENT WOUND OF, on face or neck, small (NOT MORE THAN 7 CM LONG), involving deeper tissue (Anaes.)	91.8	104 Y
52006	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF RECENT WOUND OF, on face or neck, large (MORE THAN 7 CM LONG), superficial (Anaes.)	91.8	104 Y
52009	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	193.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF RECENT WOUND OF, on face or neck, large (MORE THAN 7 CM LONG), involving deeper tissue (Anaes.)	144.85	164.15 Y
52010	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	264.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	FULL THICKNESS LACERATION OF EAR, EYELID, NOSE OR LIP, repair of, with accurate opposition of each layer of tissue (Anaes.) (Assist.)	198.2	224.65 Y
52012	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	24.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SUPERFICIAL FOREIGN BODY,removal of, as an independent procedure (Anaes.)	18.35	20.8 Y
52015	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	114.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SUBCUTANEOUS FOREIGN BODY,removal of, requiring incision and suture, as an independent procedure (Anaes.)	85.75	97.2 Y
52018	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	288	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FOREIGN BODY IN MUSCLE, TENDON OR OTHER DEEP TISSUE,removal of, as an independent procedure (Anaes.) (Assist.)	216	244.8 Y
52021	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ASPIRATION BIOPSY OF 1 or MORE JAW CYSTS as an independent procedure to obtain material for diagnostic purposes and not being a service associated with an operative procedure on the same day (Anaes.)	22.95	26.05 Y
52024	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	54.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BIOPSY OF SKIN OR MUCOUS MEMBRANE, as an independent procedure (Anaes.)	40.8	46.2 Y
52025	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	191.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	LYMPH NODE OF NECK, biopsy of (Anaes.)	143.55	162.65 Y
52027	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2009	BIOPSY OF LYMPH NODE, MUSCLE OR OTHER DEEP TISSUE OR ORGAN, as an independent procedure and not being a service to which item 52025 applies (Anaes.)	116.9	132.5 Y
52030	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	93.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SINUS, excision of, involving superficial tissue only (Anaes.)	70.25	79.65 Y
52033	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	191.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SINUS, excision of, involving muscle and deep tissue (Anaes.)	143.55	162.65 Y
52034	1/05/1997	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	PREMALIGNANT LESIONS of the oral mucous, treatment by cryotherapy, diathermy or carbon dioxide laser	33.6	38.05
52035	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	495.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	ENDOSCOPIC LASER THERAPY for neoplasia and benign vascular lesions of the oral cavity (Anaes.)	371.55	421.05 Y
52036	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	88.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOUR, CYST, ULCER OR SCAR, (other than a scar removed during the surgical approach at an operation), up to 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane, where the removal is by surgical excision and suture, not being a service to which item 52039 applies (Anaes.)	99.1	112.3 Y
52039	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOURS, CYSTS, ULCERS OR SCARS, (other than a scar removed during the surgical approach at an operation), up to 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane, where the removal is by surgical excision and suture, and the procedure is performed on more than 3 but not more than 10 lesions (Anaes.) (Assist.)	254.45	288.4 Y
52042	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	179.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOUR, CYST, ULCER OR SCAR, (other than a scar removed during the surgical approach at an operation), more than 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane (Anaes.)	134.65	152.6 Y
52045	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	256.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOUR, CYST (other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5mm separation between the cyst lining and tooth structure or where a tumour or cyst has been proven by positive histopathology), ULCER OR SCAR (other than a scar removed during the surgical approach at an operation), removal of, not being a service to which another item in Groups Q3 to Q9 applies, involving muscle, bone, or other deep tissue (Anaes.)	192.4	218.05 Y
52048	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	386.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOUR OR DEEP CYST (other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5mm separation between the cyst lining and tooth structure or where a tumour or cyst has been proven by positive histopathology), removal of, requiring wide excision, not being a service to which another item in Groups Q3 to Q9 applies (Anaes.) (Assist.)	289.95	328.6 Y
52051	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	522.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOUR, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, without skin or mucosal graft (Anaes.) (Assist.)	391.95	444.25 Y
52054	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TUMOUR, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, with skin or mucosal graft (Anaes.) (Assist.)	458.55	519.5 Y
52055	1/11/1992	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1992	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	HAEMATOMA, SMALL ABSCESS OR CELLULITIS, not requiring admission to a hospital, INCISION WITH DRAINAGE OF (excluding after care)	21.35	24.2
52056	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	HAEMATOMA, aspiration of (Anaes.)	21.35	24.2 Y
52057	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	169.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	LARGE HAEMATOMA, LARGE ABSCESS, CARBUNCLE, CELLULITIS or similar lesion, requiring admission to a hospital, INCISION WITH DRAINAGE OF (excluding aftercare) (Anaes.)	127.2	144.15 Y
52058	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	247.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	PERCUTANEOUS DRAINAGE OF DEEP ABSCESS, usinginterventional imaging techniques - but not including imaging (Anaes.)	185.4	210.15 Y
52059	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	278.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	ABSCESS, DRAINAGE TUBE, exchange of using interventional imaging techniques - but not including imaging (Anaes.)	208.95	236.8 Y
52060	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	197.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MUSCLE, excision of (Anaes.)	147.85	167.55 Y
52061	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	232.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MUSCLE, RUPTURED, repair of (limited), not associated with external wound (Anaes.)	174.55	197.8 Y
52062	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MUSCLE, RUPTURED, repair of (extensive), not associated with external wound (Anaes.) (Assist.)	230.8	261.55 Y
52063	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE TUMOUR, IN INCONT, excision of, not being a service to which another item in Groups Q3 to Q9 applies (Anaes.) (Assist.)	278.1	315.2 Y
52064	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE CYST, injection into or aspiration of (Anaes.)	132.3	149.9 Y
52066	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	463.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUBMANDIBULAR GLAND, extirpation of (Anaes.) (Assist.)	347.65	394 Y
52069	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	206.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SUBLINGUAL GLAND, extirpation of (Anaes.)	154.95	175.65 Y
52072	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	61.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SALIVARY GLAND, DILATATION OR DIATHERMY of duct (Anaes.)	45.9	52.05 Y
52073	1/11/2000	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	155.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	SALIVARY GLAND, repair of CUTANEOUS FISTULA OF (Anaes.)	116.9	132.5 Y
52075	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	SALIVARY GLAND, removal of CALCULUS from duct or meatotomy or marsupialisation, 1 or more such procedures (Anaes.)	116.9	132.5 Y
52078	1/12/1991	[Table]	4	Q3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TONGUE, partial excision of (Anaes.) (Assist.)	230.8	261.55 Y

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52081	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TONGUE TIE, division or excision of frenulum (Anaes.)	36.3	41.15	Y
52084	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	124.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	TONGUE TIE, MANDIBULAR FRENULUM OR MAXILLARY FRENULUM, division or excision of frenulum, in a patient aged not less than 2 years (Anaes.)	92.25	105.7	Y
52087	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	213	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RANULA OR MUCOUS CYST OF MOUTH, removal of (Anaes.)	159.75	181.05	Y
52090	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	370.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	OPERATION ON MANDIBLE OR MAXILLA (other than alveolar margins) for chronic osteomyelitis - 1 bone or in combination with adjoining bones (Anaes.) (Assist.)	278.1	315.2	Y
52092	1/11/1992	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	483.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	OPERATION on SKULL for OSTEOMYELITIS (Anaes.) (Assist.)	362.55	410.85	Y
52094	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	611.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	OPERATION ON ANY COMBINATION OF ADJOINING BONES, being bones referred to in item 52092 (Anaes.) (Assist.)	458.55	523.45	Y
52095	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	396.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE GROWTH STIMULATOR, insertion of (Anaes.) (Assist.)	297.2	336.85	Y
52096	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	117.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ORTHOPAEDIC PIN OR WIRE, insertion of, into maxilla or mandible or zygoma, as an independent procedure (Anaes.)	88.05	99.8	Y
52097	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/05/2016	1/07/2021	146.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	EXTERNAL FIXATION, removal of, in the operating theatre of a hospital (Anaes.)	124.95		Y
52098	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	195.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	EXTERNAL FIXATION, removal of, in conjunction with operations involving internal fixation or bone grafting or both (Anaes.)	146.85	166.45	Y
52099	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	146.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	BURIED WIRE, PIN or SCREW, 1 or more, which were inserted for internal fixation purposes into maxilla or mandible or zygoma, removal of, requiring anaesthesia, incision, dissection and suturing, per bone, not being a service associated with a service to which item 52102 or 52105 applies (Anaes.)	110.25	124.95	Y
52102	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	146.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BURIED WIRE, PIN or SCREW, 1 or more, which were inserted for internal fixation purposes into maxilla or mandible or zygoma, removal of, requiring anaesthesia, incision, dissection and suturing, where undertaken in the operating theatre of a hospital, per bone (Anaes.)	110.25	124.95	Y
52105	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	274.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PLATE, 1 or more of, and associated screw and wire which were inserted for internal fixation purposes into maxilla or mandible or zygoma, removal of, requiring anaesthesia, incision, dissection and suturing, per bone, not being a service associated with a service to which item 52098 or 52102 applies (Anaes.) (Assist.)	205.7	233.15	Y
52106	1/05/1997	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/05/2016	1/07/2021	113.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	ARCH BARS, 1 or more, which were inserted for dental fixation purposes to the maxilla or mandible, removal of, requiring general anaesthesia where undertaken in the operating theatre of a hospital (Anaes.)	85		Y
52108	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	LIP, full thickness wedge excision of, with repair by direct sutures (Anaes.) (Assist.)	254.45	288.4	Y
52111	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	339.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VERMILIONECTOMY (Anaes.) (Assist.)	254.45	288.4	Y
52114	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE or MAXILLA, segmental resection of, for tumours or cysts (Anaes.) (Assist.)	458.55	523.5	Y
52117	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	727.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, including lower border, OR MAXILLA, sub-total resection of (Anaes.) (Assist.)	545.85	639.9	Y
52120	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	860.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, hemimandibulectomy of, including condylectomy where performed (Anaes.) (Assist.)	645.65	772.95	Y
52122	1/11/1992	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	860.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	MANDIBLE, hemimandibular reconstruction of, OR MAXILLA, reconstruction of, with BONE GRAFT, PLATE, TRAY OR ALLOGRAFT, not being a service associated with a service to which item 52123 applies (Anaes.) (Assist.)	645.65	772.95	Y
52123	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	974.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, total resection of both sides, including condylectomies where performed (Anaes.) (Assist.)	730.9	886.6	Y
52126	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	936.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLA, total resection of (Anaes.) (Assist.)	702.7	849	Y
52129	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1254.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLA, total resection of both maxillae (Anaes.) (Assist.)	940.7	1166.35	Y
52130	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	460.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE GRAFT, not being a service to which another item in Groups C0 to C9 applies (Anaes.) (Assist.)	345.3	391.35	Y
52131	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	BONE GRAFT WITH INTERNAL FIXATION, not being a service to which an item in the range (a)51900 to 52186; or (b)52303 to 53460 applies (Anaes.) (Assist.)	477.6	548.85	Y
52132	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	259.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TRACHEOSTOMY (Anaes.)	194.3	220.2	Y
52133	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	94.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CRICOTHYROSTOMY by direct stab or Seldinger technique, using Minitrach or similar device (Anaes.)	71.1	80.55	Y
52135	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/05/2016	1/07/2021	150.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	POST-OPERATIVE or POST-NASAL HAEMORRHAGE, or both, control of, where undertaken in the operating theatre of a hospital (Anaes.)	112.65		Y
52138	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	466.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY ARTERY, ligation of (Anaes.) (Assist.)	350.1	396.75	Y
52141	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	461.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FACIAL, MANDIBULAR or LINGUAL ARTERY or VEIN or ARTERY and VEIN, ligation of, not being a service to which item 52138 applies (Anaes.) (Assist.)	346.25	392.45	Y
52144	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	430.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FOREIGN BODY, deep, removal of using interventional imaging techniques (Anaes.) (Assist.)	322.75	365.8	Y
52147	1/12/1991	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	406.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DUCT OF MAJOR SALIVARY GLAND, transposition of (Anaes.) (Assist.)	304.55	345.15	Y
52148	1/11/1992	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	717.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	PAROTID DUCT, repair of, using micro-surgical techniques (Anaes.) (Assist.)	538.35	629.85	Y
52158	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	1155.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	SUBMANDIBULAR DUCTS, relocation of, for surgical control of drooling (Anaes.) (Assist.)	866.75	1067.75	Y
52180	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	195.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MALIGNANT DISEASE AGGRESSIVE OR POTENTIALLY MALIGNANT BONE OR DEEP SOFT TISSUE TUMOUR, biopsy of (not including aftercare) (Anaes.)	146.85	166.45	Y
52182	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	431.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE OR MALIGNANT DEEP SOFT TISSUE TUMOUR, lesional or marginal excision of (Anaes.) (Assist.)	323.3	366.4	Y
52184	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	636.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE TUMOUR, lesional or marginal excision of, combined with any 1 of: liquid nitrogen freezing, autograft, allograft or cementation (Anaes.) (Assist.)	477.6	548.85	Y
52186	1/11/2000	[Table]	4	C0	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	783.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	BONE TUMOUR, lesional or marginal excision of, combined with any 2 or more of: liquid nitrogen freezing, autograft, allograft or cementation (Anaes.) (Assist.)	587.85	695.9	Y
52300	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	295.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SINGLE-STAGE LOCAL FLAP, where indicated, repair to 1 defect, with skin or mucosa (Anaes.) (Assist.)	221.95	251.55	Y
52303	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SINGLE-STAGE LOCAL FLAP, where indicated, repair to 1 defect, with buccal pad of fat (Anaes.) (Assist.)	316.9	359.15	Y
52306	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	626.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	SINGLE-STAGE LOCAL FLAP, where indicated, repair to 1 defect, using temporalis muscle (Anaes.) (Assist.)	470.2	539	Y
52309	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	212	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FREE GRAFTING (mucosa or split skin) of a granulating area (Anaes.)	159.75	181.05	Y
52312	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	295.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FREE GRAFTING (mucosa, split skin or connective tissue) to 1 defect, including elective dissection (Anaes.) (Assist.)	221.95	251.55	Y
52315	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FREE GRAFTING, FULL THICKNESS, to 1 defect (mucosa or skin) (Anaes.) (Assist.)	369.75	419.05	Y
52318	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	146.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	BONE GRAFT, harvesting of, via separate incision, being a service associated with a service to which another item in Groups C0 to C9 applies - Autogenous - small quantity (Anaes.)	110.25	124.95	Y
52319	1/04/1992	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/1992	1/07/2021	248.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	BONE GRAFT, harvesting of, via separate incision, being a service associated with a service to which another item in Groups C0 to C9 applies - Autogenous - large quantity (Anaes.)	183.8	208.3	Y
52321	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	FOREIGN IMPLANT (NON-BIOLOGICAL), insertion of, for CONTOUR RECONSTRUCTION of pathological deformity, not being a service associated with a service to which item 52624 applies (Anaes.) (Assist.)	369.75	419.05	Y
52324	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR, using tongue, first stage (Anaes.) (Assist.)	369.75	419.05	Y
52327	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	244.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	DIRECT FLAP REPAIR, using tongue, second stage (Anaes.)	183.45	207.95	Y
52330	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	813.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PALATAL DEFECT (oro-nasal fistula), plastic closure of, including services to which item 52300, 52303, 52306 or 52324 applies (Anaes.) (Assist.)	610.2	725.7	Y
52333	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	813.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT PALATE, primary repair (Anaes.) (Assist.)	610.2	725.7	Y
52336	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	508.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT PALATE, secondary repair, closure of fistula using local flaps (Anaes.) (Assist.)	381.45	432.3	Y
52337	1/05/1997	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	1112.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	ALVEOLAR CLEFT (congenital) unilateral, grafting of, including plastic closure of associated oro-nasal fistulae and ridge augmentation (Anaes.) (Assist.)	834.3	1024.5	Y
52339	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	579.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	CLEFT PALATE, secondary repair, lengthening procedure (Anaes.) (Assist.)	434.4	492.3	Y
52342	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1005.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE or MAXILLA, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	754.5		Y
52345	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1134.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MANDIBLE or MAXILLA, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	850.9		Y
52348	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1282	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE or MAXILLA, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	961.5		Y
52351	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1439.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MANDIBLE or MAXILLA, bilateral osteotomy of osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	1079.85		Y
52354	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1450.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE or MAXILLA, osteotomies or osteectomies of, involving 3 or more such procedures on the 1 jaw, including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1094.7		Y
52357	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1646.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MANDIBLE or MAXILLA, osteotomies or osteectomies of, involving 3 or more such procedures on the 1 jaw, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	1232.4		Y
52360	1/12/1991	[Table]	4	C4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/03/2013	1/07/2021	1676.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	MANDIBLE and MAXILLA, osteotomies or osteectomies of, involving 2 such procedures of each jaw, including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1257.3		Y

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52363	1/12/1991	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	1885.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MANDIBLE and MAXILLA, osteotomies or osteotomies of, involving 2 such procedures of each jaw, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	1414.35	Y
52366	1/12/1991	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	1844.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	MANDIBLE and MAXILLA, complex bilateral osteotomies or osteotomies of, involving 3 or more such procedures of 1 jaw and 2 such procedures of the other jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1383.1	Y
52369	1/12/1991	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	2073.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MANDIBLE and MAXILLA, complex bilateral osteotomies or osteotomies of, involving 3 or more such procedures of 1 jaw and 2 such procedures of the other jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	1555.1	Y
52372	1/12/1991	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	2011.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1998	MANDIBLE and MAXILLA, complex bilateral osteotomies or osteotomies of, involving 3 or more such procedures of each jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1508.95	Y
52375	1/12/1991	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	A	1/03/2013	1/07/2021	2252.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	MANDIBLE and MAXILLA, complex bilateral osteotomies or osteotomies of, involving 3 or more such procedures of each jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Hi) (Anaes.) (Assist.)	1690.15	Y
52378	1/12/1991	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	779	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GENIOPLASTY including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	584.25	691.1 Y
52379	1/11/1992	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1331.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	FACE, contour reconstruction of 1 region, using autogenous bone or cartilage graft (Anaes.) (Assist.)	998.45	1243.35 Y
52380	1/11/1992	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	2266.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	MIDFACIAL OSTEOTOMIES – Le Fort II, Modified Le Fort III (Maxomaler), Modified Le Fort III (Malar-Maxillary), Le Fort III involving 3 or more osteotomies of the midface including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.)	1700.15	2178.95 Y
52382	1/11/1992	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	2717.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MIDFACIAL OSTEOTOMIES – Le Fort II, Modified Le Fort III (Maxomaler), Modified Le Fort III (Malar-Maxillary), Le Fort III involving 3 or more osteotomies of the midface including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.)	2038.1	2629.55 Y
52620	1/11/1992	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	250.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	MANDIBLE, fixation by intermaillary wiring, excluding wiring for obesity	188.2	213.3
52624	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	492.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	DERMIS, DERMOFAT OR FASCIA GRAFT (excluding transfer of fat by injection) (Anaes.) (Assist.)	369.65	418.95 Y
52630	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	1134.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	MICROVASCULAR REPAIR OF, using microsurgical techniques, with restoration of continuity of artery or vein of distal extremity or digit (Anaes.) (Assist.)	850.9	1046.6 Y
52640	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	563.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP, unilateral - primary repair, 1 stage, without anterior palate repair (Anaes.) (Assist.)	422.45	478.8 Y
52642	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	704.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP, unilateral - primary repair, 1 stage, with anterior palate repair (Anaes.) (Assist.)	528.2	616.35 Y
52644	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	782.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP, bilateral - primary repair, 1 stage, without anterior palate repair (Anaes.) (Assist.)	586.8	684.45 Y
52646	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	923.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP, bilateral - primary repair, 1 stage, with anterior palate repair (Anaes.) (Assist.)	692.65	835.6 Y
52650	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP, partial revision, including minor flap revision alignment and adjustment, including revision of minor muscle deficiency, if performed (Anaes.)	234.75	266.05 Y
52652	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	508.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP, total revision, including major flap revision, muscle reconstruction and revision of major whistle deformity (Anaes.) (Assist.)	381.45	432.3 Y
52656	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	860.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP RECONSTRUCTION using full thickness flap (Abbe or similar), first stage (Anaes.) (Assist.)	645.65	772.95 Y
52658	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	312.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CLEFT LIP RECONSTRUCTION using full thickness flap (Abbe or similar), second stage (Anaes.)	234.75	266.05 Y
52660	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	813.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	VELO-PHARYNGEAL INCOMPETENCE, pharyngeal flap for, or pharyngoplasty for (Anaes.)	610.2	725.7 Y
52680	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	522.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	COMPOSITE GRAFT (Chondro-cutaneous or chondro-mucosal) to nose, ear or eyelid (Anaes.) (Assist.)	391.95	444.25 Y
52682	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MACROCHEILIA or macroglossia, operation for (Anaes.) (Assist.)	377.15	427.45 Y
52684	1/11/2000	[Table]	4	O4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	598.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MACROSTOMIA, operation for (Anaes.) (Assist.)	448.95	510.7 Y
52600	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	312.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBULAR OR PALATAL EXOSTOSIS, excision of (Anaes.) (Assist.)	264.05	299.25 Y
52603	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	336.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MYLOHYOID RIDGE, reduction of (Anaes.) (Assist.)	252.4	286.05 Y
52606	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	256.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY TUBEROSITY, reduction of (Anaes.)	192.55	218.2 Y
52609	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	336.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PAPILLARY HYPERPLASIA OF THE PALATE, removal of - less than 5 lesions (Anaes.) (Assist.)	252.4	286.05 Y
52612	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	422.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PAPILLARY HYPERPLASIA OF THE PALATE, removal of - 5 to 20 lesions (Anaes.) (Assist.)	316.9	359.15 Y
52615	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PAPILLARY HYPERPLASIA OF THE PALATE, removal of - more than 20 lesions (Anaes.) (Assist.)	393.25	445.7 Y
52618	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	VESTIBULOPLASTY, submucosal or open, including excision of muscle and skin or mucosal graft when performed - unilateral or bilateral (Anaes.) (Assist.)	457.75	522.4 Y
52621	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	610.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	FLOOR OF MOUTH LOWERING (Obwegeser or similar procedure), including excision of muscle and skin or mucosal graft when performed - unilateral (Anaes.) (Assist.)	457.75	522.4 Y
52624	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ALVEOLAR RIDGE AUGMENTATION with bone or alloplast or both - unilateral (Anaes.) (Assist.)	369.65	418.95 Y
52626	1/11/1992	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	302.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ALVEOLAR RIDGE AUGMENTATION - unilateral, insertion of tissue expanding device into maxillary or mandibular alveolar ridge region for (Anaes.) (Assist.)	226.75	257 Y
52627	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	OSSEO-INTEGRATION PROCEDURE - in the practice of oral and maxillofacial surgery, extra oral implantation of titanium fixture (Anaes.) (Assist.)	393.25	445.7 Y
52630	1/12/1991	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	144.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	OSSEO-INTEGRATION PROCEDURE - in the practice of oral and maxillofacial surgery, fixation of transcutaneous abutment (Anaes.)	145.6	165 Y
52633	1/05/1997	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	OSSEO-INTEGRATION PROCEDURE - intra-oral implantation of titanium fixture to facilitate restoration of the dentition following resection of part of the maxilla or mandible for benign or malignant tumours (Anaes.)	393.25	445.7 Y
52636	1/05/1997	[Table]	4	O5	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	144.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	OSSEO-INTEGRATION PROCEDURE - fixation of transmucosal abutment to fixtures placed following resection of part of the maxilla or mandible for benign or malignant tumours (Anaes.)	145.6	165 Y
52800	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	190	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NEUROLYSIS BY OPEN OPERATION, without transposition, not being a service associated with a service to which item 52803 applies (Anaes.) (Assist.)	216	244.8 Y
52803	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	414.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NERVE TRUNK, internal (Interfascicular), NEUROLYSIS of, using microsurgical techniques (Anaes.) (Assist.)	311.05	352.5 Y
52806	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	190	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NEURECTOMY, NEUROTOMY or REMOVAL OF TUMOUR from superficial peripheral nerve (Anaes.) (Assist.)	216	244.8 Y
52809	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NEURECTOMY, NEUROTOMY or REMOVAL OF TUMOUR from deep peripheral nerve (Anaes.) (Assist.)	369.75	419.05 Y
52812	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	528.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NERVE TRUNK, PRIMARY repair of, using microsurgical techniques (Anaes.) (Assist.)	528.2	616.35 Y
52815	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	743.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NERVE TRUNK, SECONDARY repair of, using microsurgical techniques (Anaes.) (Assist.)	557.55	655.45 Y
52818	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	492.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NERVE, TRANSPOSITION OF (Anaes.) (Assist.)	369.75	419.05 Y
52821	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1071.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NERVE GRAFT TO NERVE TRUNK, (cable graft) including harvesting of nerve graft using microsurgical techniques (Anaes.) (Assist.)	804	984.05 Y
52824	1/12/1991	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	461.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PERIPHERAL BRANCHES OF THE TRIGEMINAL NERVE, cryosurgery of, for pain relief (Anaes.) (Assist.)	346.25	392.45 Y
52826	1/11/2000	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	247.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	INJECTION OF PRIMARY BRANCH OF TRIGEMINAL NERVE with alcohol, cortisone, phenol, or similar substance (Anaes.)	185.4	210.15 Y
52828	1/11/2000	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	367.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	CUTANEOUS NERVE,primary repair of, using microsurgical techniques (Anaes.) (Assist.)	275.8	312.55 Y
52830	1/11/2000	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	485	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	CUTANEOUS NERVE,secondary repair of, using microsurgical techniques (Anaes.) (Assist.)	363.75	412.25 Y
52832	1/11/2000	[Table]	4	O6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	665.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	CUTANEOUS NERVE, nerve graft to, using microsurgical techniques (Anaes.) (Assist.)	498.9	577.25 Y
53000	1/12/1991	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	33.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLARY ANTRUM, PROOF PUNCTURE AND LAVAGE OF (Anaes.)	25.4	28.8 Y
53003	1/12/1991	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	95.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MAXILLARY ANTRUM, proof puncture and lavage of, under general anaesthesia (requiring admission to hospital not being a service associated with a service to which another item in Groups O3 to O9 applies (Anaes.)	71.7	81.3 Y
53004	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	37.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	MAXILLARY ANTRUM, LAVAGE OF - each attendance at which the procedure is performed, including any associated consultation (Anaes.)	27.8	31.5 Y
53006	1/12/1991	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	542.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTROSTOMY (RADICAL) (Anaes.) (Assist.)	406.8	461.05 Y
53009	1/12/1991	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	307.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTRUM, intranasal operation on, or removal of foreign body from (Anaes.) (Assist.)	230.8	261.55 Y
53012	1/12/1991	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	122.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ANTRUM, drainage of, through tooth socket (Anaes.)	91.8	104 Y
53015	1/12/1991	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	611.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ORO-ANTRAL FISTULA, plastic closure of (Anaes.) (Assist.)	458.55	523.5 Y
53016	1/05/1997	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	NASAL SEPTUM, septoplasty, submucous resection or closure of septal perforation (Anaes.) (Assist.)	377.15	427.45 Y
53017	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	627.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	NASAL SEPTUM, reconstruction of (Anaes.) (Assist.)	470.5	539.4 Y
53019	1/11/1992	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	604.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	MAXILLARY SINUS, BONE GRAFT to floor of maxillary sinus following elevation of mucosal lining (sinus lift procedure), (unilateral) (Anaes.) (Assist.)	453.35	516.55 Y
53052	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	127.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	POST-NASAL SPACE, direct examination of, with or without biopsy (Anaes.)	95.85	108.65 Y

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53054	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	127.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	NASENDOSCOPY or SINOSCOPY or FIBREOPTIC EXAMINATION of NASOPHARYNX one or more of these procedures (Anaes.)	95.85	108.65	Y
53056	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	74.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	EXAMINATION OF NASAL CAVITY or POST-NASAL SPACE, or NASAL CAVITY AND POST-NASAL SPACE, UNDER GENERAL ANAESTHESIA, not being a service associated with a service to which another item in this Group applies (Anaes.)	56.15	63.65	Y
53058	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	127.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	NASAL HAEMORRHAGE, POSTERIOR, ARREST OF, with posterior nasal packing with or without cauterisation and with or without anterior pack (excluding aftercare) (Anaes.)	95.85	108.65	Y
53060	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	104.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CAUTERISATION (other than by chemical means) OR CAUTERISATION by chemical means when performed under general anaesthesia OR DIATHERMY OR SEPTUM, TURBINATES FOR OBSTRUCTION OR HAEMORRHAGE SECONDARY TO SURGERY (OR TRAUMA) – 1 or more of these procedures (including any consultation on the same occasion) not being a service associated with any other operation on the nose (Anaes.)	78.45	88.95	Y
53062	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	91.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	POST SURGICAL NASAL HAEMORRHAGE, arrest of during an episode of epistaxis by cauterisation or nasal cavity packing or both (Anaes.)	70.25	79.65	Y
53064	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	169.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	CRYOTHERAPY TO NOSE in the treatment of nasal haemorrhage (Anaes.)	127.2	144.15	Y
53068	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	142.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TURBINECTOMY or TURBINECTOMIES, partial or total, unilateral (Anaes.)	106.55	120.75	Y
53070	1/11/2000	[Table]	4	O7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	185.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TURBINATES, submucous resection of, unilateral (Anaes.)	138.95	157.5	Y
53200	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of a dislocation of, not requiring open reduction (Anaes.)	55.2	62.55	Y
53203	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	123.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of a dislocation of, requiring open reduction (Anaes.)	92.65	105	Y
53206	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	A	C	1/05/2016	1/07/2021	148.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	TEMPOROMANDIBULAR JOINT, manipulation of, performed in the operating theatre of a hospital, not being a service associated with a service to which another item in Groups G3 to O9 applies (Anaes.)	111.6		Y
53209	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1715.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	GLENOID FOSSA, ZYGOMATIC ARCH and TEMPORAL BONE, reconstruction of (Obwegeser technique) (Anaes.) (Assist.)	1287	1428.05	Y
53212	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	926.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ABSENT CONDYLE and ASCENDING RAMUS in hemifacial microsomia, construction of, not including harvesting of graft material (Anaes.) (Assist.)	695.25	839.05	Y
53215	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	425.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPOROMANDIBULAR JOINT, arthroscopy of, with or without biopsy, not being a service associated with any other arthroscopic procedure of that joint (Anaes.) (Assist.)	319	361.55	Y
53218	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	680.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPOROMANDIBULAR JOINT, arthroscopy of, removal of loose bodies, debridement, or treatment of adhesions - 1 or more such procedures (Anaes.) (Assist.)	510.2	592.35	Y
53220	1/11/2000	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	342.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TEMPOROMANDIBULAR JOINT, arthrotomy of, not being a service to which another item in this Group applies (Anaes.) (Assist.)	257.2	291.5	Y
53221	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	907.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with or without microsurgical techniques (Anaes.) (Assist.)	680.75	819.75	Y
53224	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1006.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with condylectomy or condylotomy, with or without microsurgical techniques (Anaes.) (Assist.)	754.65	918.25	Y
53225	1/11/1992	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	302.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ARTHROCENTESIS, lavage of the temporomandibular joint after insertion of 2 cannuli into the appropriate joint spaces (Anaes.) (Assist.)	226.75	257	Y
53226	1/11/2000	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	324.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TEMPOROMANDIBULAR JOINT, synovectomy of, not being a service to which another item in this Group applies (Anaes.) (Assist.)	243.75	276.25	Y
53227	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1236.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with or without meniscus or capsular surgery, including meniscectomy when performed, with or without microsurgical techniques (Anaes.) (Assist.)	927.3	1148.45	Y
53230	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1392.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	TEMPOROMANDIBULAR JOINT, open surgical exploration of, with meniscus, capsular and condylar head surgery, with or without microsurgical techniques (Anaes.) (Assist.)	1044.5	1304.75	Y
53233	1/12/1991	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1564.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TEMPOROMANDIBULAR JOINT, surgery of, involving procedures to which items S3224, S3226, S3227 and S3230 apply and also involving the use of tissue flaps, or cartilage graft, or allograft implants, with or without microsurgical techniques (Anaes.) (Assist.)	1173.75	1477.05	Y
53236	1/11/2000	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TEMPOROMANDIBULAR JOINT, stabilisation of, involving 1 or more of: repair of capsule, repair of ligament or internal fixation, not being a service to which another item in this Group applies (Anaes.) (Assist.)	367.35	416.3	Y
53239	1/11/2000	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	489.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TEMPOROMANDIBULAR JOINT, arthrodesis of, not being a service to which another item in this Group applies (Anaes.) (Assist.)	367.35	416.3	Y
53242	1/11/2000	[Table]	4	O8	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	324.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TEMPOROMANDIBULAR JOINT OR JOINTS, application of external fixator to, other than for treatment of fractures (Anaes.) (Assist.)	243.75	276.25	Y
53400	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	134.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLA, unilateral or bilateral, treatment of fracture of, not requiring splinting	100.8	114.25	
53403	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	164.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of fracture of, not requiring splinting	123.2	139.65	
53406	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	423.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLA, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation (Anaes.) (Assist.)	317.35	359.65	Y
53409	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	423.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of fracture of, requiringsplinting, wiring of teeth, circumosseous fixation or external fixation (Anaes.) (Assist.)	317.35	359.65	Y
53410	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	89.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ZYGOMATIC BONE, treatment of fracture of, not requiring surgical reduction	66.85	75.75	
53411	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction by a temporal, intra-oral or other approach (Anaes.)	186.35	211.2	Y
53412	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	408	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction and involving internal or external fixation at 1 site (Anaes.) (Assist.)	306	346.8	Y
53413	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	499.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 2 sites (Anaes.) (Assist.)	374.85	424.85	Y
53414	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	574.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 3 sites (Anaes.) (Assist.)	430.65	488.1	Y
53415	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	453.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	MAXILLA, treatment of fracture of, requiring open reduction (Anaes.) (Assist.)	340	385.35	Y
53416	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	453.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of fracture of, requiring open reduction (Anaes.) (Assist.)	340	385.35	Y
53418	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	569.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	MAXILLA, treatment of fracture of, requiring open reduction and internal fixation not involving plate(s) (Anaes.) (Assist.)	442	501.4	Y
53419	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	569.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	MANDIBLE, treatment of fracture of, requiring open reduction and internal fixation not involving plate(s) (Anaes.) (Assist.)	442	501.4	Y
53422	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	747.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	MAXILLA, treatment of fracture of, requiring open reduction and internal fixation involving plate(s) (Anaes.) (Assist.)	560.9	659.95	Y
53423	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	747.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/1992	MANDIBLE, treatment of fracture of, requiring open reduction and internal fixation involving plate(s) (Anaes.) (Assist.)	560.9	659.95	Y
53424	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	641.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLA, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction not involving plate(s) (Anaes.) (Assist.)	481.2	553.7	Y
53425	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	641.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction not involving plate(s) (Anaes.) (Assist.)	481.2	553.7	Y
53427	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2019	876.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MAXILLA, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction involving the use of plate(s) (Anaes.) (Assist.)	657.3	788.5	Y
53429	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	876.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction involving the use of plate(s) (Anaes.) (Assist.)	657.3	788.5	Y
53439	1/12/1991	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	248.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	MANDIBLE, treatment of a closed fracture of, involving a joint surface (Anaes.)	186.35	211.2	Y
53452	1/11/1992	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	502.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ORBITAL CAVITY, reconstruction of a wall or floor with or without foreign implant (Anaes.) (Assist.)	377.15	427.45	Y
53455	1/11/1992	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	590.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1992	ORBITAL CAVITY, bone or cartilage graft to orbital wall or floor including reduction of prolapsed or entrapped orbital contents (Anaes.) (Assist.)	443	502.75	Y
53458	1/05/1997	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	44.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	NASAL BONES, treatment of fracture of, not being a service to which item S3459 or S3460 applies	33.6	38.1	
53459	1/05/1997	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	245.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	NASAL BONES, treatment of fracture of, by reduction (Anaes.)	183.8	208.3	Y
53460	1/05/1997	[Table]	4	O9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/1997	1/07/2021	499.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/1997	NASAL BONES, treatment of fractures of, by open reduction involving osteotomies (Anaes.) (Assist.)	374.85	424.85	Y
53700	1/11/2000	[Table]	4	O11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	(Note. Where an anaesthetic combines a regional nerve block with a general anaesthetic for an operative procedure, benefits will be paid only under the anaesthetic item relevant to the operation. The items in this Group are to be used in the practice of oral and maxillofacial surgery and are not to be used for dental procedures (eg. restorative dentistry or dental extraction.)) TRIGEMINAL NERVE, primary division of, injection of an anaesthetic agent	97.45	110.45	
53702	1/11/2000	[Table]	4	O11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	65.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	TRIGEMINAL NERVE, peripheral branch of, injection of an anaesthetic agent	48.8	55.3	
53704	1/11/2000	[Table]	4	O11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	39.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	FACIAL NERVE, injection of an anaesthetic agent	29.4	33.3	
53706	1/11/2000	[Table]	4	O11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	129.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	NERVE BRANCH, destruction by a neurolytic agent, not being a service to which any other item in this Group applies	97.45	110.45	
54001	22/05/2020	[Table]	4	O1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/05/2020	Telehealth attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient is referred to the approved dental practitioner		75.65	
54002	22/05/2020	[Table]	4	O1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/05/2020	Telehealth attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient is referred to the approved dental practitioner		38.05	

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S4003	22/05/2020	[Table]	4	Q1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/05/2020	Phone attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient is referred to the approved dental practitioner	75.65
S4004	22/05/2020	[Table]	4	Q1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/05/2020	Phone attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient is referred to the approved dental practitioner	38.05
S4006	15/09/2021	[Table]	4	Q1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	75.65
S4007	15/09/2021	[Table]	4	Q1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	38.05
S4011	15/09/2021	[Table]	4	Q1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	75.65
S4012	15/09/2021	[Table]	4	Q1	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	15/09/2021	15/09/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	38.05
S5028	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Head, ultrasound scan of (R)	83.85	95
S5029	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Head, ultrasound scan of (NR)	29.1	32.95
S5030	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Orbital contents, ultrasound scan of (R)	83.85	95
S5031	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Orbital contents, ultrasound scan of (NR)	29.1	32.95
S5032	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Neck, one or more structures of, ultrasound scan of (R)	83.85	95
S5033	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Neck, one or more structures of, ultrasound scan of (NR)	29.1	32.95
S5036	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	113.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Abdomen, ultrasound scan of (including scan of urinary tract when performed), for morphological assessment, if: (a) the service is not solely a transrectal ultrasonic examination of any of the following:(i) prostate gland;(ii) bladder base;(iii) urethra; and(b) within 24 hours of the service, a service mentioned in item 55038 is not performed on the same patient by the providing practitioner (R)	85.5	96.9
S5037	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Abdomen, ultrasound scan of (including scan of urinary tract when performed), for morphological assessment, if the service is not solely a transrectal ultrasonic examination of any of the following:(i) prostate gland;(ii) bladder base;(iii) urethra (NR)	29.1	32.95
S5038	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Urinary tract, ultrasound scan of, if: (a) the service is not solely a transrectal ultrasonic examination of any of the following: (i) prostate gland; (ii) bladder base; (iii) urethra; and (b) within 24 hours of the service, a service mentioned in item 55036 or 55065 is not performed on the same patient by the providing practitioner (R)	83.85	95
S5039	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Urinary tract, ultrasound scan of, if the service is not solely a transrectal ultrasonic examination of any of the following:(i) prostate gland; (ii) bladder base; (c) urethra (NR)	29.1	32.95
S5048	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	112.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Scrotum, ultrasound scan of (R)	84.15	95.35
S5049	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Scrotum, ultrasound scan of (NR)	29.1	32.95
S5054	1/07/1993	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	C	1/07/1993	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Ultrasonic cross-sectional echography, in conjunction with a surgical procedure (other than a procedure to which item 55868 or 55892 applies) using interventional techniques, not being a service associated with a service to which any other item in this Group applies (R)	83.85	95
S5065	1/07/2014	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/07/2014	1/07/2021	100.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Pelvis, ultrasound scan of, by any or all approaches, if:(a) the service is not solelya service to which an item (other thanitem 55736 or 55739) in Subgroup 5 of this Group applies ora transrectal ultrasonic examination of any of the following: prostate gland; bladder base; urethra; and (b) within 24 hours of the service, a service mentioned in item 55038 is not performed on the same patient by the providing practitioner (R)	75.45	85.55
S5066	1/05/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/05/2020	1/07/2021	223.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breasts, both, ultrasound scan, in conjunction with a surgical procedure using interventional techniques, if:(a) the request for the scan indicates that an ultrasound-guided breast intervention be performed; and(b) the service is not performed in conjunction with any other item in this Group (R)	167.6	189.95
S5068	1/07/2014	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/07/2014	1/07/2021	35.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Pelvis, ultrasound scan of, by any or all approaches, if the service is not solely a service to which an item (other than item 55736 or 55739) in Subgroup 5 of this Group applies or a transrectal ultrasonic examination of any of the following:(i) prostate gland;(ii) bladder base;(iii) urethra (NR)	26.85	30.45
S5070	1/02/2000	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/02/2000	1/07/2021	100.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breast, one, ultrasound scan of (R)	75.45	85.55
S5071	1/05/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/05/2020	1/07/2021	212.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breast, one, ultrasound scan, in conjunction with a surgical procedure using interventional techniques, if:(a) the request for the scan indicates that an ultrasound-guided breast intervention be performed; and(b) the service is not performed in conjunction with any other item in this group (R)	159.3	180.5
S5073	1/02/2000	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/02/2000	1/07/2021	34.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breast, one, ultrasound scan of (NR)	26.15	29.65
S5076	1/02/2000	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/02/2000	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breasts, both, ultrasound scan of, including an ultrasound scan for post mastectomy surveillance (R)	83.85	95
S5079	1/02/2000	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/02/2000	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Breasts, both, ultrasound scan of, including an ultrasound scan for post mastectomy surveillance (NR)	29.1	32.95
S5084	1/05/2004	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/05/2004	1/07/2021	100.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Urinary bladder, ultrasound scan of, by any or all approaches, if within 24 hours of the service, a service mentioned in item 11917, 55036, 55038, 55065, 55600 or 55603 is not performed on the same patient by the providing practitioner (R)	75.45	85.55
S5085	1/05/2004	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/05/2004	1/07/2021	26.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Urinary bladder, ultrasound scan of, by any or all approaches, if within 24 hours of the service, a service mentioned in item 11917, 55037, 55039, 55068, 55600 or 55603 is not performed on the same patient by the providing practitioner (NR)	26.15	29.65
S5118	1/11/1992	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	31/10/1992	1/07/2021	282.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Heart, two-dimensional or three-dimensional real time transoesophageal examination of, from at least 2 levels, and in more than one plane at each level, if: (a) the service includes: (i) real time colour flow mapping and, if indicated, pulsed wave Doppler examination; and (ii) recordings on digital media; and (b) the service is not an intra-operative service; and (c) not being a service associated with a service to which an item in Subgroup 3 applies.(R) (Anaes.)	211.65	239.85 Y
S5126	1/08/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/08/2020	1/07/2021	236.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.1.2 Initial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows, with recordings on digital media, if the service: (a) is for the investigation of any of the following: (i) symptoms or signs of cardiac failure; (ii) suspected or known ventricular hypertrophy or dysfunction; (iii) pulmonary hypertension; (iv) valvular, aortic, pericardial, thrombotic or embolic disease; (v) heart tumour; (vi) symptoms or signs of congenital heart disease; (vii) other rare indications; and (b) is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies Applicable not more than once in a 24 month period.(R)	177.2	200.85
S5127	1/08/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/08/2020	1/07/2021	236.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.1.2 Repeat serial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows, with recordings on digital media, if the service: (a) is for the investigation of known valvular dysfunction; and (b) is requested by a specialist or consultant physician; and (c) is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies (R)	177.2	200.85
S5128	1/08/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/08/2020	1/07/2021	236.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.1.2 Repeat serial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows, with recordings on digital media, if the service: (a) is for the investigation of known valvular dysfunction; and (b) is requested by a medical practitioner (other than a specialist or consultant physician) at, or from, a practice located in a Modified Monash 3, 4, 5, 6 or 7 area; and (c) is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies (R)	177.2	200.85
S5129	1/08/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/08/2020	1/07/2021	236.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.1.2 Repeat serial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows, with recordings on digital media, if: (a) valvular dysfunction is not the primary issue for the patient (although it may be a secondary issue); and (b) the service is for the investigation of any of the following: (i) symptoms or signs of cardiac failure; (ii) suspected or known ventricular hypertrophy or dysfunction; (iii) pulmonary hypertension; (iv) aortic, thrombotic, embolic disease or pericardial disease (excluding isolated pericardial effusion or pericarditis); (v) heart tumour; (vi) structural heart disease; (vii) other rare indications; and (c) the service is requested by a specialist or consultant physician; and (d) the service is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies (R)	177.2	200.85
S5130	1/11/1992	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	31/10/1992	1/07/2021	174.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Intraoperative two-dimensional or three-dimensional real time transoesophageal echocardiography, if the service: (a) includes Doppler techniques with colour flow mapping and recordings on digital media; and (b) is performed during cardiac surgery; and (c) incorporates sequential assessment of cardiac function before and after the surgical procedure; and (d) is not associated with a service to which item 55126, or an item in Subgroup 3, applies (R) (Anaes.)	130.6	148 Y
S5132	1/08/2020	[Table]	5	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	C	1/08/2020	1/07/2021	236.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.1.2 Serial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 4 acoustic windows, with recordings on digital media, if the service: (a) is for the investigation of a patient who: (i) is under 17 years of age; or (ii) has complex congenital heart disease; and (b) is performed by a specialist or consultant physician practising in the speciality of cardiology; and (c) is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies (R)	177.2	200.85

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55133	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	212.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Note: the service only applies if the patient meets one or more of the following and the requirements of Note: IR.1.2 Frequent repetition serial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows, with recordings on digital media, if the service: (a) is for the investigation of a patient who: (i) has an isolated pericardial effusion or pericarditis; or (ii) has a normal baseline study, and has commenced medication for non-cardiac purposes that has cardiotoxic side effects and is a pharmaceutical benefit (within the meaning of Part VII of the National Health Act 1953) for the writing of a prescription for the supply of which under that Part an echocardiogram is required; and (b) is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies (R)	159.5	180.8	
55134	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	236.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Note: the service only applies if the patient meets one or more of the following and the requirements of Note: IR.1.2 Repeat real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows, with recordings on digital media, for the investigation of rare cardiac pathologies, if the service: (a) is requested by a specialist or consultant physician; and (b) is not associated with a service to which: (i) another item in this Subgroup applies (except Items55137, 55141, 55143, 55145 and 55146); or (ii) an item in Subgroup 2 applies (except Items55118 and 55130); or (iii) an item in Subgroup 3 applies (R)	177.2	200.85	
55135	1/05/2004	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2004	1/07/2021	362.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Intraoperative two-dimensional or three-dimensional real time transoesophageal echocardiography, if the service: (a) is provided on the same day as a service to which item 38677, 38684, 38499, 38516 or 38517 applies; and (b) includes Doppler techniques with colour flow mapping and recordings on digital media; and (c) is performed during cardiac valve surgery (replacement or repair); and (d) incorporates sequential assessment of cardiac function and valve competence before and after the surgical procedure; and (e) is not associated with a service to which item 55130, or an item in Subgroup 3, applies (R) (Anaes.)	271.65	307.85	Y
55137	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	236.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.1.2 Serial real time transthoracic echocardiographic examination of the heart with real time colour flow mapping from at least 4 acoustic windows, with recordings on digital media, if the service: (a) is for the investigation of a fetus with suspected or confirmed: (i) complex congenital heart disease; or (ii) functional heart disease; or (iii) fetal cardiac arrhythmia; or (iv) cardiac structural abnormality requiring confirmation; and (b) is performed by a specialist or consultant physician practising in the speciality of cardiology with advanced training and expertise in fetal cardiac imaging; and (c) is not associated with a service to which: (i) an item in Subgroup 2 applies (except Items55118 and 55130); or (ii) an item in Subgroup 3 applies (R)	177.2	200.85	
55141	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	421.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.0.1 and IR.1.2 Exercise stress echocardiography focused study, other than a service associated with a service to which: (a) Item11704, 11705, 11707, 11714, 11729 or 11730 applies; or (b) an item in Subgroup 3 applies Applicable not more than once in a 24 month period (R)	315.9	358.05	
55143	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	421.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.0.1 and IR.1.2 Pharmacological stress echocardiography, other than a service associated with a service to which: (a) Item11704, 11705, 11707, 11714, 11729 or 11730 applies; or (b) an item in Subgroup 3 applies Applicable not more than once in a 12 month period (R)	315.9	358.05	
55145	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	488.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.0.1 and IR.1.2 Pharmacological stress echocardiography, other than a service associated with a service to which: (a) Item11704, 11705, 11707, 11714, 11729 or 11730 applies; or (b) an item in Subgroup 3 applies Applicable not more than once in a 24 month period (R) Note: this item does not apply to a service provided to a patient if, in the previous 24 months, a service associated with a service to which Items55141, 55143 or 55146 applies has been provided to the patient.	366.15	415	
55146	1/08/2020	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/08/2020	1/07/2021	488.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.0.1 and IR.1.2 Pharmacological stress echocardiography if: (a) a service to which Item55141 applies has been performed on the patient in the previous 4 weeks, and the test has failed due to an inadequate heart rate response; and (b) the service is not associated with a service to which: (i) item11704, 11705, 11707, 11714, 11729 or 11730 applies; or (ii) an item in Subgroup 3 applies Applicable not more than once in a 24 month period (R) Note: this item does not apply to a service provided to a patient if, in the previous 24 months, a service associated with a service to which Item55143 or 55145 applies has been provided to the patient.	366.15	415	
55208	24/12/1996	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	24/12/1996	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	DUPLEX SCANNING involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of cavernosal artery of the penis following intracavernosal administration of a vasoactive agent, performed during the period of pharmacological activity of the injected agent to confirm a diagnosis of vascular aetiology for impotence (R). Note: This item is only available for services rendered by Dr Christopher McMahon, provider number 045449 of Australian Centre for Sexual Health, Berry Road Medical Centre, St Leonards NSW 2065.	130.2	147.6	
55211	24/12/1996	ITable	S	11	ITable	ITable	D	N	ITable	N	N	N	N	N	N	N	C	24/12/1996	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	DUPLEX SCANNING involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of cavernosal tissue of the penis to confirm a diagnosis and, where indicated, assess the progress and management of: (a) priapism; or (b) fibrosis of any type; or (c) fracture of the tunica; or (d) arteriovenous malformations (R) Note: This items is only available for Dr Christopher McMahon, provider number 045449 of Australian Centre for Sexual Health, Berry Road Medical Centre, St Leonards NSW 2065.	130.2	147.6	
55238	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Duplex scanning, unilateral, involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of arteries or bypass grafts in the lower limb or of arteries and bypass grafts in the lower limb, below the inguinal ligament, for acute venous thrombosis, not being a service associated with any of the following:(a) a service to which Item 55246 applies;(b) a service to which an item in Subgroup 4 applies;(c) a service to which Item 55880, 55881, 55882, 55883, 55884, 55885, 55886, 55887, 55888, 55889, 55890, 55891, 55892, 55893, 55894 or 55895 applies (R)	130.2	147.6	
55244	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Duplex scanning, unilateral, involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of veins in the lower limb, below the inguinal ligament, for chronic venous disease, not being a service associated with any of the following:(a) a service to which Item 55246 applies;(b) a service to which an item in Subgroup 4 applies;(c) a service to which Item 55880, 55881, 55882, 55883, 55884, 55885, 55886, 55887, 55888, 55889, 55890, 55891, 55892, 55893, 55894 or 55895 applies (R)	130.2	147.6	
55246	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Duplex scanning, unilateral, involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of arteries or bypass grafts in the upper limb or of arteries and bypass grafts in the upper limb, not being a service associated with a service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55248	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning, unilateral, involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of veins in the upper limb, not being a service associatedwith a service to which an item in Subgroup 4 applies (R).	130.2	147.6	
55252	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning, bilateral, involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of extra cranial bilateral carotid and vertebral vessels, with or without subclavian and innominate vessels, with or without oculoplethysmography or peri orbital Doppler examination, not being a service associated witha service to which an item in Subgroup 4 applies (R).	130.2	147.6	
55274	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of intra-abdominal, aorta and iliac arteries or inferior vena cava and iliac veins or of intra-abdominal, aorta and iliac arteries and inferior vena cava and iliac veins, excluding pregnancy related studies, not being a service associated witha service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55276	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of renal or visceral vessels or of renal and visceral vessels, including aorta, inferior vena cava and iliac vessels as required excluding pregnancy related studies, not being a service associated witha service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55278	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of intra cranial vessels, not being a service associated witha service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55280	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements:(a) by spectral analysis of cavernosal artery of the penis following intracavernosal administration of a vasoactive agent; and(b) performed during the period of pharmacological activity of the injected agent, to confirm a diagnosis of vascular aetiology for impotence; and(c) if a specialist in diagnostic radiology, nuclear medicine, urology, general surgery (sub specialising in vascular surgery) or a consultant physician in nuclear medicine attends the patient in person at the practice location where the service is performed, immediately before or for a period during the performance of the service; and(d) if the specialist or consultant physician interprets the results and prepares a report, not being a service associated with a service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55282	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements:(a) by spectral analysis of cavernosal tissue of the penis to confirm a diagnosis; and(b) if indicated, assess the progress and management of: (i) priapism; or(ii) fibrosis of any type; or(iii) fracture of the tunica; or(iv) arteriovenous malformations; and(c) if a specialist in diagnostic radiology, nuclear medicine, urology, general surgery (sub specialising in vascular surgery) or a consultant physician in nuclear medicine attends the patient in person at the practice location where the service is performed, immediately before or for a period during the performance of the service; and(d) if the specialist or consultant physician interprets the results and prepares a report, not being a service associated with a service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55284	1/11/1997	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020	Duplex scanning, unilateral, involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of surgically created arteriovenous fistula or surgically created arteriovenous access grafts in the upper or lower limbs, not being a service associated with a service to which an item in Subgroup 4 applies (R)	130.2	147.6	
55292	1/11/2001	ITable	S	11	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	173.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2020		130.2	147.6	

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SS294	1/11/2001	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	173.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of arteries or veins, or both, including any associated skin marking, for mapping of bypass conduit before vascular surgery, not being a service associated with any of the following:(a) a service to which an item in Subgroup 3 or 4 applies; (b) a service to which Item SS880, SS881, SS882, SS883, SS884, SS885, SS886, SS887, SS888, SS889, SS890, SS891, SS892, SS893, SS894 or SS895 applies (R)	130.2	147.6
SS296	1/11/2001	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	113.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Duplex scanning, unilateral, involving B mode ultrasound imaging and integrated Doppler flow spectral analysis and marking of veins in the lower limbs below the inguinal ligament before varicose vein surgery, including any associated skin marking, not being a service associated with any of the following: (a) a service to which an item in Subgroup 3 or 4 applies;(b) a service to which Item SS880, SS881, SS882, SS883, SS884, SS885, SS886, SS887, SS888, SS889, SS890, SS891, SS892, SS893, SS894 or SS895 applies (R)	85.3	96.65
SS600	1/11/1998	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Prostate, bladder base and urethra, ultrasound scan of, if performed:(a) personally by a medical practitioner (not being the medical practitioner who assessed the patient as specified in paragraph (c)) using one or more transducer probes that can obtain both axial and sagittal scans in 2 planes at right angles; and(b) after a digital rectal examination of the prostate by that medical practitioner; and(c) on a patient who has been assessed by:(i) a specialist in urology, radiation oncology or medical oncology; or(ii) a consultant physician in medical oncology; who has:(iii) examined the patient in the 60 days before the scan; and(iv) recommended the scan for the management of the patient's current prostatic disease(R)	83.85	95
SS603	1/11/1998	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Prostate, bladder base and urethra, ultrasound scan of, if performed:(a) personally by a medical practitioner who made the assessment mentioned in paragraph (c) using one or more transducer probes that can obtain both axial and sagittal scans in 2 planes at right angles; and(b) after a digital rectal examination of the prostate by that medical practitioner; and(c) on a patient who has been assessed by:(i) a specialist in urology, radiation oncology or medical oncology; or(ii) a consultant physician in medical oncology; who has:(iii) examined the patient in the 60 days before the scan; and(iv) recommended the scan for the management of the patient's current prostatic disease(R)	83.85	95
SS700	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	61.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, ultrasound scan of, by any or all approaches, for determining the gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is less than 12 weeks of gestation (R)	46.1	52.25
SS703	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	35.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, ultrasound scan of, by any or all approaches, for determining the gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is less than 12 weeks of gestation (NR)	26.85	30.45
SS704	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	71.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, for determining the structure, gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is 12 to 16 weeks of gestation (R)	53.8	60.95
SS705	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	35.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, for determining the structure, gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is 12 to 16 weeks of gestation (NR)	26.85	30.45
SS706	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	102.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, if:(a) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks of gestation; and(b) the service is not performed in the same pregnancy as item SS709 (R)	76.8	87.05
SS707	1/11/2005	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2005	1/07/2021	71.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:(a) the pregnancy (as confirmed by ultrasound) is dated by a fetal crown rump length of 45 to 84 mm; and(b) nuchal translucency measurement is performed to assess the risk of fetal abnormality; and(c) the service is not performed with Item SS700, SS703, SS704 or SS705, on the same patient within 24 hours (R)	53.8	60.95
SS708	1/11/2005	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2005	1/07/2021	35.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:(a) the pregnancy (as confirmed by ultrasound) is dated by a crown rump length of 45 to 84 mm; and(b) nuchal translucency measurement is performed to assess the risk of fetal abnormality; and(c) the service is not performed with Item SS700, SS703, SS704 or SS705, on the same patient within 24 hours (NR)	26.85	30.45
SS709	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	38.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, if:(a) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks of gestation; and(b) the service is not performed in the same pregnancy as Item SS706 (NR)	29.2	33.1
SS712	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	117.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, if:(a) the service is requested by a medical practitioner who:(i) is a Member or a Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists; or(ii) has a Diploma of Obstetrics; or(iii) has a qualification recognised by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists as being equivalent to a Diploma of Obstetrics; or(iv) has obstetric privileges at a non-metropolitan hospital; and(b) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks of gestation; and(c) further examination is clinically indicated after performance, in the same pregnancy, of a scan mentioned in Item SS706 or SS709 (R)	88.35	100.1
SS715	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	40.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, performed by or on behalf of a medical practitioner who is a Member or a Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, if:(a) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks of gestation; and(b) further examination is clinically indicated after performance, in the same pregnancy, of a scan mentioned in Item SS706 or SS709 (NR)	30.75	34.85
SS718	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	102.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:(a) the dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and(b) the service is not performed in the same pregnancy as item SS723 (R)	76.8	87.05
SS721	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	117.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:(a) the service is requested by a medical practitioner who:(i) is a Member or a Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists; or(ii) has a Diploma of Obstetrics; or(iii) has a qualification recognised by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists as being equivalent to a Diploma of Obstetrics; or(iv) has obstetric privileges at a non metropolitan hospital; and(b) the dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and(c) further examination is clinically indicated in the same pregnancy to which item SS718 or SS723 applies (R)	88.35	100.1
SS723	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	38.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:(a) the dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and(b) the service is not performed in the same pregnancy as Item SS718 (NR)	29.2	33.1
SS725	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/02/2000	1/07/2021	40.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, performed by or on behalf of a medical practitioner who is a Member or a Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, if:(a) the dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and(b) further examination is clinically indicated in the same pregnancy to which Item SS718 or SS723 applies (NR)	30.75	34.85
SS729	1/11/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	27.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Duplex scanning, if:(a) the service involves:(i) B mode ultrasound imaging and integrated Doppler flow measurements by spectral analysis of the umbilical artery; and(ii) measured assessment of amniotic fluid volume after the 24th week of gestation; and(b) there is reason to suspect intrauterine growth retardation or a significant risk of fetal death;—examination and report (R)	20.95	23.75
SS736	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2000	1/07/2021	130.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis, ultrasound scan of, in association with saline infusion of the endometrial cavity, by any or all approaches, if a previous transvaginal ultrasound has revealed an abnormality of the uterus or fallopian tube (R)	97.55	110.55
SS739	1/02/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2000	1/07/2021	58.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis, ultrasound scan of, in association with saline infusion of the endometrial cavity, by any or all approaches, if a previous transvaginal ultrasound has revealed an abnormality of the uterus or fallopian tube (NR)	43.8	49.6
SS759	1/11/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	153.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, if:(a) ultrasound of the same pregnancy confirms a multiple pregnancy; and(b) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks gestation; and(c) the service mentioned in Item SS706, SS709, SS712, SS715 or SS762 is not performed in conjunction with the scan during the same pregnancy (R)	115.2	130.6
SS762	1/11/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	61.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, if: (a) ultrasound of the same pregnancy confirms a multiple pregnancy; and (b) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks gestation; and (c) the service mentioned in Item SS706, SS709, SS712, SS715 or SS759 is not performed in conjunction with the scan during the same pregnancy (NR)	46.1	52.25
SS764	1/11/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	163.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, if:(a) the service is requested by a medical practitioner who:(i) is a Member or Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists; or(ii) has a Diploma of Obstetrics; or(iii) has a qualification recognised by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists as equivalent to a Diploma of Obstetrics; or(iv) has obstetric privileges at a non-metropolitan hospital; and(b) ultrasound of the same pregnancy confirms a multiple pregnancy; and(c) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks gestation; and(d) further examination is clinically indicated in the same pregnancy in which Item SS759 or SS762 has been performed; and(e) the service mentioned in Item SS706, SS709, SS712 or SS715 is not performed in conjunction with the scan during the same pregnancy (R)	122.9	139.3
SS766	1/11/2000	[Table]	S	I1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	66.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, with measurement of all parameters for dating purposes, performed by or on behalf of a medical practitioner, who is a Member or Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, if:(a) ultrasound of the same pregnancy confirms a multiple pregnancy; and(b) the dating of the pregnancy (as confirmed by ultrasound) is 17 to 22 weeks of gestation; and(c) further examination is clinically indicated in the same pregnancy in which Item SS759 or SS762 has been performed; and(d) the service mentioned in Item SS706, SS709, SS712 or SS715, is not performed in conjunction with the scan during the same pregnancy (NR)	49.95	56.6

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SS768	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	152.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if (a) dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and(b) the ultrasound confirms a multiple pregnancy; and(c) the service is not performed in the same pregnancy as item SS770; and(d) the service mentioned in item SS718, SS721, SS723 or SS725 is not performed in conjunction with the scan during the same pregnancy (R)	115.2	130.6
SS770	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	61.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if (a) dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and(b) the ultrasound confirms a multiple pregnancy; and(c) the service is not performed in the same pregnancy as item SS768; and(d) the service mentioned in item SS718, SS721, SS723 or SS725 is not performed in conjunction with the scan during the same pregnancy (NR)	46.1	52.25
SS772	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	161.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if (a) dating of the pregnancy as confirmed by ultrasound is after 22 weeks of gestation; and(b) the service is requested by a medical practitioner who (i) is a Member or Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists; or(ii) has a Diploma of Obstetrics; or(iii) has a qualification recognised by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists as equivalent to a Diploma of Obstetrics; or(iv) has obstetric privileges at a non metropolitan hospital; and(c) further examination is clinically indicated in the same pregnancy to which item SS768 or SS770 has been performed; and(d) the pregnancy as confirmed by ultrasound is a multiple pregnancy; and(e) the service mentioned in item SS718, SS721, SS723 or SS725 is not performed in conjunction with the scan during the same pregnancy (R)	122.9	139.3
SS774	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	F	C	1/11/2000	1/07/2021	66.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvis or abdomen, pregnancy related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, performed by or on behalf of a medical practitioner who is a Member or a Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, if (a) dating of the pregnancy as confirmed by ultrasound is after 22 weeks of gestation; and(b) further examination is clinically indicated in the same pregnancy to which item SS768 or SS770 has been performed; and(c) the pregnancy as confirmed by ultrasound is a multiple pregnancy; and(d) the service mentioned in item SS718, SS721, SS723 or SS725 is not performed in conjunction with the scan during the same pregnancy (NR)	49.95	56.6
SS812	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Chest or abdominal wall, one or more areas, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS070, SS073, SS076 or SS079 (R)	83.85	95
SS814	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Chest or abdominal wall, one or more areas, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS070, SS073, SS076 or SS079 (NR)	29.1	32.95
SS844	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	89.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Assessment of a mass associated with the skin or subcutaneous structures, not being a part of the musculoskeletal system, one or more areas, ultrasound scan of (R)	67.1	76.05
SS846	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Assessment of a mass associated with the skin or subcutaneous structures, not being a part of the musculoskeletal system, one or more areas, ultrasound scan of (NR)	29.1	32.95
SS848	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	139.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Musculoskeletal ultrasound, in conjunction with a surgical procedure using interventional techniques, not being a service associated with a service within any other item in this group applies, and not performed in conjunction with a service mentioned in item SS054 (R)	104.95	118.95
SS850	1/11/2000	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/07/2021	184.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Musculoskeletal ultrasound, in conjunction with a surgical procedure using interventional techniques, inclusive of a diagnostic musculoskeletal ultrasound service, if (a) the medical practitioner or nurse practitioner has indicated on a request for a musculoskeletal ultrasound that an ultrasound guided intervention is required if clinically indicated; and(b) the service is not performed in conjunction with a service mentioned in item SS054 or any other item in this Subgroup (R)	138.55	157
SS852	1/05/2001	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2001	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Paediatric spine, spinal cord and overlying subcutaneous tissues, ultrasound scan of (R)	83.85	95
SS854	1/05/2001	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2001	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Paediatric spine, spinal cord and overlying subcutaneous tissues, ultrasound scan of (NR)	29.1	32.95
SS856	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hand or wrist or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS858 (R)	83.85	95
SS857	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hand or wrist, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item SS859 (NR)	29.1	32.95
SS858	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hand or wrist, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS856 (R)	93	105.4
SS859	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hand or wrist, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS857 (NR)	32.3	36.6
SS860	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Forearm or elbow, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS862 (R)	83.85	95
SS861	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Forearm or elbow, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS863 (NR)	29.1	32.95
SS862	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Forearm or elbow, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS860 (R)	93	105.4
SS863	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Forearm or elbow, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item SS861 (NR)	32.3	36.6
SS864	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Shoulder or upper arm, or both, left or right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) an injury to a muscle, tendon or muscle/tendon junction;(ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);(iii) bicepsubsaustion;(iv) capsulitis and bursitis;(v) a mass, including a ganglion;(vi) an occult fracture;(vii) acromioclavicular joint pathology; and(b) the service is not performed in conjunction with a service mentioned in item SS866 (R)	83.85	95
SS865	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Shoulder or upper arm, or both, left or right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) an injury to a muscle, tendon or muscle/tendon junction;(ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);(iii) bicepsubsaustion;(iv) capsulitis and bursitis;(v) a mass, including a ganglion;(vi) an occult fracture;(vii) acromioclavicular joint pathology; and(b) the service is not performed in conjunction with a service mentioned in item SS867 (NR)	29.1	32.95
SS866	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Shoulder or upper arm, or both, left and right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) an injury to a muscle, tendon or muscle/tendon junction;(ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);(iii) bicepsubsaustion;(iv) capsulitis and bursitis;(v) a mass, including a ganglion;(vi) an occult fracture;(vii) acromioclavicular joint pathology; and(b) the service is not performed in conjunction with a service mentioned in item SS864 (R)	93	105.4
SS867	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Shoulder or upper arm, or both, left and right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) an injury to a muscle, tendon or muscle/tendon junction;(ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);(iii) bicepsubsaustion;(iv) capsulitis and bursitis;(v) a mass, including a ganglion;(vi) an occult fracture;(vii) acromioclavicular joint pathology; and(b) the service is not performed in conjunction with a service mentioned in item SS865 (NR)	32.3	36.6
SS868	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hip or groin, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS870 (R)	83.85	95
SS869	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hip or groin, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS871 (NR)	29.1	32.95
SS870	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hip or groin, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS868 (R)	93	105.4
SS871	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hip or groin, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item SS869 (NR)	32.3	36.6
SS872	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Paediatric hip examination for dysplasia, left or right, ultrasound scan of, if the service is not performed in conjunction with item SS874 (R)	83.85	95
SS873	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Paediatric hip examination for dysplasia, left or right, ultrasound scan of, if the service is not performed in conjunction with item SS875 (NR)	29.1	32.95
SS874	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Paediatric hip examination for dysplasia, left and right, ultrasound scan of, if the service is not performed in conjunction with item SS872 (R)	93	105.4
SS875	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Paediatric hip examination for dysplasia, left and right, ultrasound scan of, if the service is not performed in conjunction with item SS873 (NR)	32.3	36.6
SS876	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Buttock or thigh, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item SS878 (R)	83.85	95
SS877	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Buttock or thigh, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item SS879 (NR)	29.1	32.95
SS878	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Buttock or thigh, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item SS876 (R)	93	105.4
SS879	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Buttock or thigh, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item SS877 (NR)	32.3	36.6
SS880	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Knee, left or right, ultrasound scan of, if: (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) abnormality of tendons or bursae about the knee;(ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;(iii) a nerve entrapment or a nerve or nerve sheath tumour;(iv) an injury of collateral ligaments; and (b) the service is not performed in conjunction with item SS882 (R)	83.85	95
SS881	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Knee, left or right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) abnormality of tendons or bursae about the knee;(ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;(iii) a nerve entrapment or a nerve or nerve sheath tumour;(iv) an injury of collateral ligaments; and(b) the service is not performed in conjunction with item SS883 (NR)	29.1	32.95

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55882	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Knee, left and right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) abnormality of tendons or bursae about the knee;(ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;(iii) a nerve entrapment or a nerve or nerve sheath tumour;(iv) an injury of collateral ligaments; and(b) the service is not performed in conjunction with a service mentioned in item 55880 (R)	93	105.4
55883	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Knee, left and right, ultrasound scan of, if (a) the service is used for the assessment of one or more of the following suspected or known conditions:(i) abnormality of tendons or bursae about the knee;(ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;(iii) a nerve entrapment or a nerve or nerve sheath tumour;(iv) an injury of collateral ligaments; and(b) the service is not performed in conjunction with item 55881 (NR)	32.3	36.6
55884	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lower leg, left or right, ultrasound scan of, if the service is not performed in conjunction with item 55886 (R)	83.85	95
55885	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lower leg, left or right, ultrasound scan of, if the service is not performed in conjunction with item 55887 (NR)	29.1	32.95
55886	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lower leg, left and right, ultrasound scan of, if the service is not performed in conjunction with item 55884 (R)	93	105.4
55887	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lower leg, left and right, ultrasound scan of, if the service is not performed in conjunction with item 55885 (NR)	32.3	36.6
55888	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Ankle or hind foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item 55890 (R)	83.85	95
55889	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Ankle or hind foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item 55891 (NR)	29.1	32.95
55890	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Ankle or hind foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item 55888 (R)	93	105.4
55891	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Ankle or hind foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item 55889 (NR)	32.3	36.6
55892	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	111.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mid foot or fore foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item 55894 (R)	83.85	95
55893	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	38.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mid foot or fore foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with item 55895 (NR)	29.1	32.95
55894	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	124	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mid foot or fore foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item 55892 (R)	93	105.4
55895	1/05/2020	[Table]	S	11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mid foot or fore foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with item 55893 (NR)	32.3	36.6
56001	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	199.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of brain without intravenous contrast medium, not being a service to which item 57001 applies (R) (Anaes.)	149.85	169.85
56007	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	256.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of brain with intravenous contrast medium and with any scans of the brain before intravenous contrast injection, when performed, not being a service to which item 57007 applies (R) (Anaes.)	192.05	217.65
56010	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	258.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of pituitary fossa with or without intravenous contrast medium and with or without brain scan when performed (R) (Anaes.)	193.65	219.5
56013	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	256.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	COMPUTED TOMOGRAPHY - scan of orbits with or without intravenous contrast medium and with or without brain scan when undertaken (R) (Anaes.)	192.05	217.65
56016	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	297	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of petrous bones in axial and coronal planes in 1 mm or 2 mm sections, with or without intravenous contrast medium, with or without scan of brain (R) (Anaes.)	222.75	252.45
56022	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	230.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of facial bones, para nasal sinuses or both without intravenous contrast medium (R) (Anaes.)	172.8	195.85
56028	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	344.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of facial bones, para nasal sinuses or both with intravenous contrast medium and with any scans of the facial bones, para nasal sinuses or both before intravenous contrast injection, when performed (R) (Anaes.)	258.75	293.25
56030	1/02/2000	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2000	1/07/2021	230.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of facial bones, para nasal sinuses or both, with scan of brain, without intravenous contrast medium (R) (Anaes.)	172.8	195.85
56036	1/02/2000	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2000	1/07/2021	344.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of facial bones, para nasal sinuses or both, with scan of brain, with intravenous contrast medium, if (a) a scan without intravenous contrast medium has been performed; and(b) the service is required because the result of the scan mentioned in paragraph (a) is abnormal (R) (Anaes.)	258.75	293.25
56101	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	235.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of soft tissues of neck, including larynx, pharynx, upper oesophagus and salivary glands (not associated with cervical spine) without intravenous contrast medium, not being a service to which item 56801 applies (R) (Anaes.)	176.7	200.25
56107	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	348.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of soft tissues of neck, including larynx, pharynx, upper oesophagus and salivary glands (not associated with cervical spine)—with intravenous contrast medium and with any scans of soft tissues of neck, including larynx, pharynx, upper oesophagus and salivary glands (not associated with cervical spine) before intravenous contrast injection, when undertaken, not being a service associated with a service to which item 56807 applies (R) (Anaes.)	261.15	296
56219	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	334.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, one or more regions with intrathecal contrast medium, including the preparation for intrathecal injection of contrast medium and any associated plain X rays, not being a service to which item 59724 or 59275 applies (R) (Anaes.)	250.6	284
56220	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	245.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, cervical region, without intravenous contrast medium (R) (Anaes.)	184.35	208.95
56221	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	245.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, thoracic region, without intravenous contrast medium (R) (Anaes.)	184.35	208.95
56222	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	245.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, lumbosacral region, without intravenous contrast medium (R) (Anaes.)	184.35	208.95
56224	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, cervical region, with intravenous contrast medium and with any scans of the cervical region of the spine before intravenous contrast injection when undertaken (R) (Anaes.)	269.9	305.9
56225	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, thoracic region, with intravenous contrast medium and with any scans of the thoracic region of the spine before intravenous contrast injection when undertaken (R) (Anaes.)	269.9	305.9
56226	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, lumbosacral region, with intravenous contrast medium and with any scans of the lumbosacral region of the spine prior to intravenous contrast injection when undertaken (R) (Anaes.)	269.9	305.9
56233	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	245.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE:An account issued or a patient assignment form must show the item numbers of the examinations performed under this item Computed tomography—scan of spine, 2 examinations of the kind referred to in items 56220, 56221 and 56223, without intravenous contrast medium (R) (Anaes.)	184.35	208.95
56234	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE:An account issued or a patient assignment form must show the item numbers of the examinations performed under this item Computed tomography—scan of spine, 2 examinations of the kind referred to in items 56224, 56225 and 56226, with intravenous contrast medium and with any scans of these regions of the spine before intravenous contrast injection when undertaken (R) (Anaes.)	269.9	305.9
56237	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	245.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, 3 regions cervical, thoracic and lumbosacral, without intravenous contrast medium (R) (Anaes.)	184.35	208.95
56238	1/11/2001	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	359.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of spine, 3 regions, cervical, thoracic and lumbosacral, with intravenous contrast medium and with any scans of these regions of the spine before intravenous contrast injection when undertaken (R) (Anaes.)	269.9	305.9
56301	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	302.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of chest, including lungs, mediastinum, chest wall and pleura, with or without scans of the upper abdomen, without intravenous contrast medium, not being a service to which item 56801 or 57001 applies and not including a study performed to exclude coronary artery calcification or image the coronary arteries (R) (Anaes.)	226.6	256.8
56307	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	409.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of chest, including lungs, mediastinum, chest wall and pleura, with or without scans of the upper abdomen, with intravenous contrast medium and with any scans of the chest, including lungs, mediastinum, chest wall or pleura and upper abdomen before intravenous contrast injection, when undertaken, not being a service to which item 56807 or 57007 applies and not including a study performed to exclude coronary artery calcification or image the coronary arteries (R) (Anaes.)	307.25	348.25
56401	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	256.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of upper abdomen only (diaphragm to iliac crest) without intravenous contrast medium, not being a service to which item 56301, 56501, 56801 or 57001 applies (R) (Anaes.)	192.05	217.65
56407	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	368.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of upper abdomen only (diaphragm to iliac crest), with intravenous contrast medium, and with any scans of upper abdomen (diaphragm to iliac crest) before intravenous contrast injection, when undertaken, not being a service to which item 56307, 56507, 56807 or 57007 applies (R) (Anaes.)	276.55	313.4
56409	1/12/1991	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	256.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of pelvis only (iliac crest to pubic symphysis) without intravenous contrast medium not being a service associated with a service to which item 56401 applies (R) (Anaes.)	192.05	217.65
56412	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	368.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of pelvis only (iliac crest to pubic symphysis), with intravenous contrast medium and with any scans of pelvis (iliac crest to pubic symphysis) before intravenous contrast injection, when undertaken, not being a service to which item 56407 applies (R) (Anaes.)	276.55	313.4
56501	1/11/1996	[Table]	S	12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	394.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Computed tomography—scan of upper abdomen and pelvis without intravenous contrast medium, not for the purposes of virtual colonoscopy and not being a service to which item 56801 or 57001 applies(R) (Anaes.)	295.7	335.15

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56507	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	491.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of upper abdomen and pelvis with intravenous contrast medium and with any scans of upper abdomen and pelvis before intravenous contrast injection, when performed, not for the purposes of virtual colonoscopy and not being a service to which item 56807 or 57007 applies (R) (Anaes.)	368.75	417.95
56553	1/09/2015	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2015	1/07/2021	512.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Computed tomography—scan of colon for exclusion or diagnosis of colorectal neoplasia in a symptomatic or high risk patient if (a) one or more of the following applies:(i) the patient has had an incomplete colonoscopy in the 3 months before the scan;(ii) there is a high grade colonic obstruction;(iii) the service is requested by a specialist or consultant physician who performs colonoscopies in the practice of the specialist's or consultant physician's specialty; and(b) the service is not a service to which Item 56301, 56307, 56401, 56407, 56409, 56412, 56501, 56507, 56801, 56807 or 57001 applies(R) (Anaes.)	399.45	452.7 Y
56620	1/11/2018	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	225.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of knee, without intravenous contrast medium, not being a service to which Item 56622 or 56629 applies (R) (Anaes.)	169	191.55
56622	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	225.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of lower limb, left or right or both, one region (other than knee), or more than one region (which may include knee), without intravenous contrast medium, not being a service to which Item 56620 applies (R) (Anaes.).(Anaes.)	169	191.55 Y
56623	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	342.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of lower limb, left or right or both, one region (other than knee), or more than one region (which may include knee), with intravenous contrast medium and with any scans of the lower limb before intravenous contrast injection, when performed, not being a service to which Item 56626 applies (R) (Anaes.).(Anaes.)	257.05	291.3 Y
56626	1/11/2018	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	342.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of knee, with intravenous contrast medium and with any scans of the knee before intravenous contrast injection, when performed, not being a service to which Items 56623 or 56630 apply (R) (Anaes.)	257.05	291.3
56627	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	225.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of upper limb, left or right or both, any one region, or more than one region, without intravenous contrast medium (R) (Anaes.).(Anaes.)	169	191.55 Y
56628	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	342.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of upper limb, left or right or both, any one region, or more than one region, with intravenous contrast medium and with any scans of the upper limb before intravenous contrast injection, when performed (R) (Anaes.).(Anaes.)	257.05	291.3 Y
56629	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	225.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of upper limb and lower limb, left or right or both, any one region (other than knee), or more than one region (which may include knee) without intravenous contrast medium not being a service to which Item 56620 applies (R) (Anaes.).(Anaes.)	169	191.55 Y
56630	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	342.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of upper limb and lower limb, left or right or both, any one region (other than knee), or more than one region (which may include knee) with intravenous contrast medium with any scans of the limbs before intravenous contrast injection, when performed, not being a service to which Item 56626 applies (R) (Anaes.)	257.05	291.3 Y
56801	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	477.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of chest, abdomen and pelvis with or without scans of soft tissues of neck without intravenous contrast medium, not including a study performed to exclude coronary artery calcification or image the coronary arteries (R) (Anaes.)	358.35	406.15
56807	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	573.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of chest, abdomen and pelvis with or without scans of soft tissues of neck with intravenous contrast medium and with any scans of chest, abdomen and pelvis with or without scans of soft tissues of neck before intravenous contrast injection, when performed, not including a study performed to exclude coronary artery calcification or image the coronary arteries (R) (Anaes.)	430.15	487.5
57001	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	477.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of brain and chest with or without scans of upper abdomen without intravenous contrast medium, not including a study performed to exclude coronary artery calcification or image the coronary arteries (R) (Anaes.)	358.45	406.25
57007	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	581.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—scan of brain and chest with or without scans of upper abdomen with intravenous contrast medium and with any scans of brain and chest and upper abdomen before intravenous contrast injection, when performed, not including a study performed to exclude coronary artery calcification or image the coronary arteries (R) (Anaes.)	436.1	494.25
57201	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	158.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography—pelvimetry (R) (Anaes.)	119.25	135.15
57341	1/11/1996	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	481.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Computed tomography, in conjunction with a surgical procedure using interventional techniques (R) (Anaes.)	361.05	409.15
57352	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	522.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Computed tomography—angiography with intravenous contrast medium of any or all, or any part, of: (a) the arch of the aorta; or (b) the carotid arteries; or (c) the vertebral arteries and their branches (head and neck); including any scans performed before intravenous contrast injection—one or more data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy or digital recording of multiple projections, if: (d) either: (i) the service is requested by a specialist or consultant physician; or (ii) the service is requested by a medical practitioner (other than a specialist or consultant physician) and the request indicates that the patient's case has been discussed with a specialist or consultant physician; and (e) the service is not a service to which another item in this group applies; and (f) the service is performed for the exclusion of arterial stenosis, occlusion, aneurysm or embolism; and (g) the service is not a study performed to image the coronary arteries (R) (Anaes.)	391.75	444 Y
57353	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	522.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Computed tomography—angiography with intravenous contrast medium of any or all, or any part, of: (a) the ascending and descending aorta; or (b) the common iliac and abdominal branches including upper limbs (chest, abdomen and upper limbs); including any scans performed before intravenous contrast injection—one or more data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy or digital recording of multiple projections, if: (c) either: (i) the service is requested by a specialist or consultant physician; or (ii) the service is requested by a medical practitioner (other than a specialist or consultant physician) and the request indicates that the patient's case has been discussed with a specialist or consultant physician; and (d) the service is not a service to which another item in this group applies; and (e) the service is performed for the exclusion of arterial stenosis, occlusion, aneurysm or embolism; and (f) the service is not a study performed to image the coronary arteries (R) (Anaes.)	391.75	444 Y
57354	1/05/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	522.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Computed tomography—angiography with intravenous contrast medium of any or all, or any part, of: (a) the descending aorta; or (b) the pelvic vessels (aorto-iliac segment) and lower limbs; including any scans performed before intravenous contrast injection—one or more data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy or digital recording of multiple projections, if: (c) either: (i) the service is requested by a specialist or consultant physician; or (ii) the service is requested by a medical practitioner (other than a specialist or consultant physician) and the request indicates that the patient's case has been discussed with a specialist or consultant physician; and (d) the service is not a service to which another item in this group applies; and (e) the service is performed for the exclusion of arterial stenosis, occlusion, aneurysm or embolism; and (f) the service is not a study performed to image the coronary arteries (R) (Anaes.)	391.75	444 Y
57357	1/11/2020	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2020	1/07/2021	522.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Computed tomography—angiography with intravenous contrast medium of any or all, or any part, of the pulmonary arteries and their branches, including any scans performed before intravenous contrast injection—one or more data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy or digital recording of multiple projections, if: the service is not a service to which another item in this group applies; and the service is not a study performed to image the coronary arteries; and the service is (i) performed for the exclusion of pulmonary arterial stenosis, occlusion, aneurysm or embolism and is requested by a specialist or consultant physician; or(ii) performed for the exclusion of pulmonary arterial stenosis, occlusion or aneurysm and is requested by a medical practitioner (other than a specialist or consultant physician) and the request indicates that the patient's case has been discussed with a specialist or consultant physician; or (iii) for the exclusion of pulmonary embolism and is requested be a medical practitioner (other than a specialist or consultant physician) (R) (Anaes.)	391.75	444 Y
57360	1/07/2011	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2011	1/07/2021	716.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Computed tomography of the coronary arteries performed on a minimum of a 64 slice (or equivalent) scanner if: (a) the request is made by a specialist or consultant physician; and (b) the patient has stable or acute symptoms consistent with coronary ischaemia; and (c) the patient is at low to intermediate risk of an acute coronary event, including having no significant cardiac biomarker elevation and no electrocardiogram changes indicating acute ischaemia (R) Note: See explanatory note IN.2.2 for claiming restrictions for this item. (Anaes.)	537.7	629 Y
57362	1/11/2014	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2014	1/07/2021	115.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Cone beam computed tomography—dental and temporo mandibular joint imaging (without contrast medium) for diagnosis and management of any of the following: (a) mandibular and dento alveolar fractures;(b) dental implant planning;(c) orthodontics;(d) endodontic conditions;(e) periodontal conditions;(f) temporo mandibular joint conditions\Applicable once per patient per day, not being for a service to which any of Items 57602 to 57660 apply, and not being a service associated with another service in Group I2 (R) (Anaes.)	86.95	98.55
57364	1/07/2021	ITable]	S	I2	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/2021	1/07/2021	716.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: T9.8.3 (Item 38247), T9.8.2 (Item 38248) or Item 38252if subclause (iv) applies. Computed tomography of the coronary arteries performed on a minimum of a 64 slice (or equivalent) scanner, if: (a) the service is requested by a specialist or consultant physician; and (b) at least one of the following apply to the patient: (i) the patient has stable symptoms and newly recognised left ventricular systolic dysfunction of unknown aetiology; (ii) the patient requires exclusion of coronary artery anomaly or fistula; (iii) the patient will be undergoing non-coronary cardiac surgery; (iv) the patient meets the criteria to be eligible for a service to which Item 38247, 38249 or 38252 applies, but as an alternative to selective coronary angiography will require an assessment of the patency of one or more bypass grafts (R) (Anaes.)	537.7	629 Y
57506	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	30.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Hand, wrist, forearm, elbow or humerus (NR)	22.85	25.9
57509	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	40.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Hand, wrist, forearm, elbow or humerus (R)	30.55	34.6
57512	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	41.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Hand and wrist, or hand, wrist and forearm, or forearm and elbow, or elbow and humerus (NR)	31.1	35.25
57515	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	55.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Hand and wrist, or hand, wrist and forearm, or forearm and elbow, or elbow and humerus (R)	41.5	47.05
57518	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	33.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Foot, ankle, leg or femur (NR)	25	28.35
57521	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Foot, ankle, leg or femur (R)	33.35	37.8
57522	1/11/2018	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	33.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Knee (NR)	25	28.35
57523	1/11/2018	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	44.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Knee (R)	33.35	37.8
57524	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	50.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Foot and ankle, or ankle and leg, or leg and knee, or knee and femur (NR)	37.95	43.05
57527	1/12/1991	ITable]	S	I3	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	67.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	Foot and ankle, or ankle and leg, or leg and knee, or knee and femur (R)	50.55	57.25

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57541	1/11/2019	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/07/2021	75.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Fee for a service rendered using first eligible x-ray procedure carried out during attendance at residential aged care facility, where the service has been requested by a medical practitioner who has attended the patient in person and the request identifies one or more of the following indications: the patient has experienced a fall and one or more of the following items apply to the service 57509, 57515, 57521, 57527,57703, 57709,57712, 57715, 58521, 58524, 58527; or pneumonia or heart failure is suspected and item 58503 applies to the service; or acute abdomen or bowel obstruction is suspected and item 58903applies to the service. This call-out fee can be claimed once only per visit at a residential aged care facility irrespective of the number of patients attended. NOTE: If the service is bulked billed 85% of the fee is payable. The multiple services rule does not apply to this item. (R)	56.55	64.1
57700	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	41.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Shoulder or scapula (NR)	31.1	35.25
57703	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	55.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Shoulder or scapula (R)	41.5	47.05
57706	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	33.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Clavicle (NR)	25	28.35
57709	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Clavicle (R)	33.35	37.8
57712	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hip joint (R)	36.25	41.1
57715	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	62.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Pelvic girdle (R)	46.8	53
57721	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	101.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Femur, internal fixation of neck or intertrochanteric (pertrochanteric) fracture (R)	76.25	86.45
57901	1/11/1998	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Skull, not in association with item 57902 (R)	49.55	56.15
57902	1/11/1998	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Cephalometry, not in association with item 57901 (R)	49.55	56.15
57905	1/05/2020	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mastoids or petrous temporal bones (R)	49.55	56.15
57907	1/05/2020	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2020	1/07/2021	48.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Sinuses or facial bones – orbit, maxilla or malar, any or all (R)	36.35	41.2
57915	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mandible, not by orthopantomography technique (R)	36.25	41.1
57918	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Salivary calculus (R)	36.25	41.1
57921	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Nose (R)	36.25	41.1
57924	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Eye (R)	36.25	41.1
57927	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	50.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Temporo mandibular joints (R)	38.15	43.25
57930	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	33.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Teeth—single area (R)	25.3	28.65
57933	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	80.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Teeth - full mouth(R)	60.1	68.1
57939	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	66.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Palato pharyngeal studies with fluoroscopic screening (R)	49.55	56.15
57942	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	50.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Palato pharyngeal studies without fluoroscopic screening (R)	38.15	43.25
57945	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Larynx, lateral airways and soft tissues of the neck, not being a service associated with a service to which item 57939 or 57942 applies (R)	33.35	37.8
57960	1/11/2002	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	48.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Orthopantomography for diagnosis or management (or both) of trauma, infection, tumour or a congenital or developmental anomalies of the teeth or maxillofacial region (R)	36.45	41.3
57963	1/11/2002	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	48.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Orthopantomography for diagnosis or management (or both) of any of the following conditions, if the signs and symptoms of the condition is present (a) impacted teeth;(b) caries;(c) periodontal pathology;(d) periapical pathology (R)	36.45	41.3
57966	1/11/2002	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	48.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Orthopantomography for diagnosis or management (or both) of missing or crowded teeth, or dentofacial anomalies of the teeth or jaws (R)	36.45	41.3
57969	1/11/2002	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/07/2021	48.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Orthopantomography for diagnosis or management (or both) of temporo mandibular joint arthroses or dysfunction (R)	36.45	41.3
58100	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	68.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Spine—cervical (R)	51.6	58.45
58103	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	56.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Spine—thoracic (R)	42.35	48
58106	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	78.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Spine—lumbosacral (R)	59.15	67.05
58108	1/11/2001	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Spine—4 regions, cervical, thoracic, lumbosacral and sacrococcygeal (R)	84.5	95.8
58109	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Spine—sacrococcygeal (R)	36.15	40.95
58112	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	99.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE:An account issued or a patient assignment form must show the item numbers of the examinations performed under this item Spine—2 examinations of the kind mentioned in items 58100, 58103, 58106 and 58109 (R)	74.7	84.7
58115	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE:An account issued or a patient assignment form must show the item numbers of the examinations performed under this item Spine—3 examinations of the kind mentioned in items 58100, 58103, 58106 and 58109 (R)	84.5	95.8
58120	1/01/2010	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2010	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Spine—4 regions, cervical, thoracic, lumbosacral and sacrococcygeal, if the service to which item 58120 or 58121 applies has not been performed on the same patient within the same calendar year (R)	84.5	95.8
58121	1/01/2010	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2010	1/07/2021	112.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE:An account issued or a patient assignment form must show the item numbers of the examinations performed under this item Spine—3 examinations of the kind mentioned in items 58100, 58103, 58106 and 58109, if the service to which item 58120 or 58121 applies has not been performed on the same patient within the same calendar year (R)	84.5	95.8
58300	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	41.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Bone age study (R)	30.8	34.9
58306	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	91.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Skeletal survey (R)	68.7	77.85
58500	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	36.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Chest (lung fields) by direct radiography (NR)	27.15	30.8
58503	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Chest (lung fields) by direct radiography (R)	36.25	41.1
58506	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	62.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Chest (lung fields) by direct radiography with fluoroscopic screening (R)	46.65	52.9
58509	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	30.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Thoracic inlet or trachea (R)	30.55	34.6
58521	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Left ribs, right ribs or sternum (R)	33.35	37.8
58524	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	57.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Left and right ribs, left ribs and sternum, or right ribs and sternum (R)	43.4	49.2
58527	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	71.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Left ribs, right ribs and sternum (R)	53.35	60.45
58700	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	35.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Plain renal only (R)	35.4	40.1
58706	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	161.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Intravenous pyelography, with or without preliminary plain films and with or without tomography (R)	121.3	137.45
58715	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	155.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Antegrade or retrograde pyelography with or without preliminary plain films and with preparation and contrast injection, one side (R)	116.4	131.95
58718	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	129.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Retrograde cystography or retrograde urethrography with or without preliminary plain films and with preparation and contrast injection (R) (Anaes.)	96.9	109.8 Y
58721	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	141.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Retrograde micturating cysto urethrography, with preparation and contrast injection (R) (Anaes.)	106.2	120.35 Y
58900	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	36.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Plain abdominal only, not being a service associated with a service to which item 58909, 58912 or 58915 applies (NR)	27.45	31.15
58903	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Plain abdominal only, not being a service associated with a service to which item 58909, 58912 or 58915 applies (R)	36.6	41.45
58909	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	92.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Barium or other opaque meal of one or more of pharynx, oesophagus, stomach or duodenum, with or without preliminary plain films of pharynx, chest or duodenum, not being a service associated with a service to which item 57909, 57942 or 57945 applies (R)	69.1	78.3
58912	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	112.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Barium or other opaque meal of oesophagus, stomach, duodenum and follow through to colon, with or without screening of chest and with or without preliminary plain film (R)	84.7	96
58915	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	80.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Barium or other opaque meal, small bowel series only, with or without preliminary plain film (R)	60.65	68.75
58916	1/11/1997	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	141.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Small bowel enema, barium or other opaque study of the small bowel, including duodenal intubation, with or without preliminary plain films, not being a service associated with a service to which item 30488 applies (R) (Anaes.)	106.4	120.6 Y
58921	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	138.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Opaque enema, with or without air contrast study and with or without preliminary plain films (R)	103.95	117.8
58927	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	78.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Cholegraphy direct, with or without preliminary plain films and with preparation and contrast injection, not being a service associated with a service to which item 30469 applies (R)	58.75	66.6
58933	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	210.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Cholegraphy, percutaneous transhepatic, with or without preliminary plain films and with preparation and contrast injection (R)	157.95	179.05
58936	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	200.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Cholegraphy, drip infusion, with or without preliminary plain films, with preparation and contrast injection and with or without tomography (R)	150.55	170.6
58939	1/11/1996	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	142.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Defaecogram (R)	107	121.3
59103	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/07/2021	21.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2009	Localisation of foreign body, if provided in conjunction with a service described in Subgroups 1 to 12 of Group 13 (R)	16.35	18.55
59300	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	91.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mammography of both breasts if there is reason to suspect the presence of malignancy because of (a) the past occurrence of breast malignancy in the patient; or(b) significant history of breast or ovarian malignancy in the patient's family; or(c) symptoms or indications of breast disease found on examination of the patient by a medical practitioner (R) (Note: These items are intended for use in the investigation of a clinical abnormality of the breast;h and NOT for individual, group or opportunistic screening of asymptomatic patients)	68.75	77.95

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59302	1/11/2018	[Table]	S	13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	206.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Three dimensional tomosynthesis of both breasts, if there is reason to suspect the presence of malignancy because of: a) the past occurrence of breast malignancy in the patient; or b) significant history of breast or ovarian malignancy in the patient's family; or c) symptoms or indications of breast disease found on examination of the patient by a medical practitioner Not being a service to which item 59300 applies (R)	155.2	175.9
59303	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	55.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Mammography of one breast if: (a) the service is specifically requested for a unilateral mammogram; and(b) there is reason to suspect the presence of malignancy because of:(i) the past occurrence of breast malignancy in the patient; or(ii) significant history of breast or ovarian malignancy in the patient's family; or(iii) symptoms or indications of breast disease found on examination of the patient by a medical practitioner (R)	41.45	47
59305	1/11/2018	[Table]	S	13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2018	1/07/2021	116.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Three dimensional tomosynthesis of one breast, if there is reason to suspect the presence of malignancy because of: a) the past occurrence of breast malignancy in the patient; or b) significant history of breast or ovarian malignancy in the patient's family; or c) symptoms or indications of breast disease found on examination of the patient by a medical practitioner Not being a service to which item 59303 applies (R)	87.6	99.25
59312	1/11/1997	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	89.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Radiographic examination of both breasts, in conjunction with a surgical procedure on each breast, using interventional techniques (R)	66.85	75.75
59314	1/11/1997	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	53.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Radiographic examination of one breast, in conjunction with a surgical procedure using interventional techniques (R)	40.35	45.75
59318	1/11/1997	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	48.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Radiographic examination of excised breast tissue to confirm satisfactory excision of one or more lesions in one breast or both following pre-operative localisation in conjunction with a service under item 31536 (R)	36.15	41
59700	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	98.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Discography, each disc, with or without preliminary plain films and with preparation and contrast injection (R) (Anaes.) (Anaes.)	74.2	84.1 Y
59703	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	77.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Dacryocystography, one side, with or without preliminary plain film and with preparation and contrast injection (R)	58.35	66.1
59712	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	116.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hysterosalpingography, with or without preliminary plain films and with preparation and contrast injection (R)(Anaes.) (Anaes.)	87.35	99 Y
59715	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	147	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Bronchography, one side, with or without preliminary plain films and with preparation and contrast injection, on a person under 16 years of age (R) (Anaes.) (Anaes.)	110.25	124.95 Y
59718	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	137.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Phlebography, one side, with or without preliminary plain films and with preparation and contrast injection (R) (Anaes.) (Anaes.)	103.45	117.25 Y
59724	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	231.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Myelography, one or more regions, with or without preliminary plain films and with preparation and contrast injection, not being a service associated with a service to which item 56219 applies (R)(Anaes.) (Anaes.)	173.95	197.15 Y
59732	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	110.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Sialography, one side, with preparation and contrast injection, not being a service associated with a service to which item 57918 applies (R)	82.75	93.8
59739	1/12/1997	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/07/2021	75.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Sinogram or Fistulogram, one or more regions, with or without preliminary plain films and with preparation and contrast injection (R)	56.65	64.2
59751	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	142.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Arthrography, with or without the facet (zygapophyseal) joints of the spine, single or double contrast study, with or without preliminary plain films and with preparation and contrast injection (R)	106.9	121.15
59754	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	224.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lymphangiography, one or both sides, with preliminary plain films and follow-up radiography and with preparation and contrast injection (R)	168.5	191
59763	1/11/1996	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	137.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Air insufflation during video—fluoroscopic imaging including associated consultation (R)	102.85	116.55
59970	1/11/1996	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/07/2021	172.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Angiography or digital subtraction angiography, or both, with fluoroscopy and image acquisition, using a mobile image intensifier, including any preliminary plain films, preparation and contrast injection—one or more regions (R) (Anaes.)	129.3	146.5
60000	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of head and neck with or without arch aortography—1 to 3 data acquisition runs (R) (Anaes.)	433.2	491
60003	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	847.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of head and neck with or without arch aortography—4 to 6 data acquisition runs (R) (Anaes.)	635.3	759.15
60006	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1204.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of head and neck with or without arch aortography—7 to 9 data acquisition runs (R) (Anaes.)	903.4	1116.6
60009	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1409.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of head and neck with or without arch aortography—10 or more data acquisition runs (R) (Anaes.)	1057.15	1321.6
60012	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of thorax—1 to 3 data acquisition runs (R) (Anaes.)	433.2	491
60015	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	847.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of thorax—4 to 6 data acquisition runs (R) (Anaes.)	635.3	759.15
60018	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1204.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of thorax—7 to 9 data acquisition runs (R) (Anaes.)	903.4	1116.6
60021	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1409.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of thorax—10 or more data acquisition runs (R) (Anaes.)	1057.15	1321.6
60024	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of abdomen—1 to 3 data acquisition runs (R) (Anaes.)	433.2	491
60027	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	847.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of abdomen—4 to 6 data acquisition runs (R) (Anaes.)	635.3	759.15
60030	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1204.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of abdomen—7 to 9 data acquisition runs (R) (Anaes.)	903.4	1116.6
60033	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1409.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of abdomen—10 or more data acquisition runs (R) (Anaes.)	1057.15	1321.6
60036	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of upper limb or limbs—1 to 3 data acquisition runs (R) (Anaes.)	433.2	491
60039	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	847.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of upper limb or limbs—4 to 6 data acquisition runs (R) (Anaes.)	635.3	759.15
60042	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1204.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of upper limb or limbs—7 to 9 data acquisition runs (R) (Anaes.)	903.4	1116.6
60045	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1409.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of upper limb or limbs—10 or more data acquisition runs (R) (Anaes.)	1057.15	1321.6
60048	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of lower limb or limbs—1 to 3 data acquisition runs (R) (Anaes.)	433.2	491
60051	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	847.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of lower limb or limbs—4 to 6 data acquisition runs (R) (Anaes.)	635.3	759.15
60054	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1204.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of lower limb or limbs—7 to 9 data acquisition runs (R) (Anaes.)	903.4	1116.6
60057	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1409.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of lower limb or limbs—10 or more data acquisition runs (R) (Anaes.)	1057.15	1321.6
60060	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	577.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of aorta and lower limb or limbs—1 to 3 data acquisition runs (R) (Anaes.)	433.2	491
60063	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	847.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of aorta and lower limb or limbs—4 to 6 data acquisition runs (R) (Anaes.)	635.3	759.15
60066	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1204.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of aorta and lower limb or limbs—7 to 9 data acquisition runs (R) (Anaes.)	903.4	1116.6
60069	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	1409.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Digital subtraction angiography, examination of aorta and lower limb or limbs—10 or more data acquisition runs (R) (Anaes.)	1057.15	1321.6
60072	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	49.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Selective arteriography or selective venography by digital subtraction angiography technique—one vessel (NR) (Anaes.)	36.95	41.9
60075	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	98.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Selective arteriography or selective venography by digital subtraction angiography technique—2 vessels (NR) (Anaes.)	73.85	83.7
60078	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	147.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Selective arteriography or selective venography by digital subtraction angiography technique—3 or more vessels (NR) (Anaes.)	110.8	125.55
60500	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	44.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Fluoroscopy, with general anaesthesia (not being a service associated with a radiographic examination) (R) (Anaes.)	33.35	37.8 Y
60503	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	30.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Fluoroscopy, without general anaesthesia (not being a service associated with a radiographic examination) (R)	22.85	25.9
60506	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	65.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Fluoroscopy using a mobile image intensifier, in conjunction with a surgical procedure lasting less than 1 hour, not being a service associated with a service to which another item in this Group applies (R)	49	55.55
60509	1/11/1992	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	101.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Fluoroscopy using a mobile image intensifier, in conjunction with a surgical procedure lasting 1 hour or more, not being a service associated with a service to which another item in this Group applies (R)	76	86.15
60918	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	48.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Arteriography (peripheral) or phlebography—one vessel, when used in association with a service to which Item59970 applies, not being a service associated with a service to which any of items 60000 to 60078 apply (NR) (Anaes.)	36.25	41.1 Y
60927	1/12/1991	[Table]	S	13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	38.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Selective arteriogram or phlebogram, when used in association with a service to which item 59970 applies, not being a service associated with a service to which any of items 60000 to 60078 apply (NR) (Anaes.)	29.25	33.15 Y

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61109	1/11/1992	[Table]	S 13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	31/10/1992	1/07/2021	265.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Fluoroscopy in an angiography suite with image intensification, in conjunction with a surgical procedure using interventional techniques, not being a service associated with a service to which another item in this Group applies (R)	198.9	225.4
61310	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	367.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Myocardial infarct avid study (R)	275.5	312.25
61313	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	303.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Gated cardiac blood pool study, (equilibrium) (R)	227.55	257.85
61314	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	420	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Gated cardiac blood pool study, with or without intervention, and first pass blood flow or cardiac shunt study (R)	315	357
61321	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	329	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.2 Single-rest myocardial perfusion study for the assessment of the extent and severity of viable and non-viable myocardium, with single photon emission tomography, with or without planar imaging, if: (a) the patient has left ventricular systolic dysfunction and probable or confirmed coronary artery disease; and (b) the service uses a single rest technetium-99m (Tc-99m) protocol; and (c) the service is requested by a specialist or a consultant physician; and (d) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61326, 61332, 61339, 61345, 61367, 61380, 61394, 61408, 61406 or 61422 applies; and (e) if the patient is 17 years or older—a service to which this Item, or Item 61315, 61329, 61332, 61345, 61380, 61398, 61406 or 61422, applies has not been provided to the patient in the previous 24 months (R)	246.75	279.65
61324	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	653.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.1 Single stress myocardial perfusion study, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) at least one of the following applies: (i) the patient has body habitus or other physical conditions (including heart rhythm disturbance) to the extent that a stress echocardiography would not provide adequate information; (ii) the patient is unable to exercise to the extent required for a stress echocardiography to provide adequate information; (iii) the patient has had a failed stress echocardiography provided in a service to which Item55141, 55143, 55145 or 55146 applies; and (c) the service includes resting ECG, continuous ECG monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (d) the service is requested by a specialist or consultant physician; and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61326, 61332, 61377, 61345, 61367, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and (f) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61329, 61332, 61345, 61367, 61377, 61380, 61394, 61398, 61406 or 61414, applies has not been provided to the patient in the previous 24 months (R)	489.8	565.15
61325	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	329	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.2 Single-rest myocardial perfusion study for the assessment of the extent and severity of viable and non-viable myocardium, with single photon emission tomography, with or without planar imaging, if: (a) the patient has left ventricular systolic dysfunction and probable or confirmed coronary artery disease; and (b) the service uses: (i) an initial rest study followed by a redistribution study on the same day; and (ii) thallous chloride-201 (Tl-201) protocol; and (c) the service is requested by a specialist or a consultant physician; and (d) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61326, 61332, 61345, 61380, 61398, 61406 or 61422 applies; and (e) if the patient is 17 years or older: (i) a service to which Item 61311, 61329, 61332, 61345, 61380, 61398, 61406 or 61422, applies has not been provided to the patient in the previous 24 months; and (ii) the service is applicable only twice each 24 months (R)	246.75	279.65
61328	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	227.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lung perfusion study (R)	170.75	193.55
61329	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	982.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.1 Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) at least one of the following applies: (i) the patient has body habitus or other physical conditions (including heart rhythm disturbance) to the extent that a stress echocardiography would not provide adequate information; (ii) the patient is unable to exercise to the extent required for a stress echocardiography to provide adequate information; (iii) the patient has had a failed stress echocardiography provided in a service to which Item55141, 55143, 55145 or 55146 applies; and (c) the service includes resting electrocardiogram, continuous electrocardiogram monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (d) the service is requested by a medical practitioner (other than a specialist or consultant physician); and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61326, 61332, 61345, 61367, 61377, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and (f) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61321, 61324, 61326, 61332, 61345, 61367, 61377, 61380, 61394, 61398, 61406, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)	736.55	894.15
61340	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	253	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lung ventilation study using aerosol, technegas or xenon gas (R)	189.75	215.05
61345	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	982.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.1 Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) at least one of the following applies: (i) the patient has body habitus or other physical conditions (including heart rhythm disturbance) to the extent that a stress echocardiography would not provide adequate information; (ii) the patient is unable to exercise to the extent required for a stress echocardiography to provide adequate information; (iii) the patient has had a failed stress echocardiography provided in a service to which Item55141, 55143, 55145 or 55146 applies; and (c) the service includes resting electrocardiogram, continuous electrocardiogram monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (d) the service is requested by a specialist or consultant physician; and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61326, 61329, 61332, 61357, 61377, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and (f) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61321, 61324, 61326, 61329, 61332, 61357, 61377, 61380, 61394, 61398, 61406, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)	736.55	894.15
61348	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	443.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Lung perfusion study and lung ventilation study using aerosol, technegas or xenon gas (R)	332.55	376.85
61349	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	982.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.1 Repeat combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion, with single photon emission tomography, with or without planar imaging, if: (a) both: (i) a service has been provided to the patient in the previous 24 months to which this Item, or Item 61311, 61324, 61329, 61332, 61337, 61345, 61357, 61365, 61380, 61394, 61398, 61406, 61410, 61414 or 61418, applies; and (ii) the patient has subsequently undergone a revascularisation procedure; and (b) the patient has one or more symptoms of cardiac ischaemia that have evolved and are not adequately controlled with optimal medical therapy; and (c) at least one of the following applies: (i) the patient has body habitus or other physical conditions (including heart rhythm disturbance) to the extent that a stress echocardiography would not provide adequate information; (ii) the patient is unable to exercise to the extent required for a stress echocardiography to provide adequate information; (iii) the patient has had a failed stress echocardiography provided in a service to which Item55141, 55143, 55145 or 55146 applies; and (d) the service is requested by a specialist or a consultant physician; and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61365, 61410 or 61418 applies; and (f) if the patient is 17 years or older—a service to which this Item, or Item 61365, 61410 or 61418, applies has not been provided to the patient in the previous 12 months (R)	736.55	894.15
61353	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	266.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Liver and spleen study (colloid) (R)	289.95	328.65
61356	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	302.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Red blood cell spleen or liver study (R)	294.6	333.9
61357	1/08/2020	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	653.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IR.4.1 Single stress myocardial perfusion study, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) at least one of the following applies: (i) the patient has body habitus or other physical conditions (including heart rhythm disturbance) to the extent that a stress echocardiography would not provide adequate information; (ii) the patient is unable to exercise to the extent required for a stress echocardiography to provide adequate information; (iii) the patient has had a failed stress echocardiography provided in a service to which Item55141, 55143, 55145 or 55146 applies; and (c) the service includes resting electrocardiogram, continuous electrocardiogram monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (d) the service is requested by a specialist or consultant physician; and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61326, 61329, 61332, 61345, 61377, 61380, 61394, 61398, 61406, or 61414, applies has not been provided to the patient in the previous 24 months (R)	489.8	565.15
61360	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	403.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hepatobiliary study, including morphine administration or pre-treatment with a cholagogue when performed (R)	302.55	342.85
61361	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	461.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Hepatobiliary study with formal quantification following baseline imaging, using a cholagogue (R)	346.05	392.2
61364	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	496.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Bowel haemorrhage study (R)	372.75	422.45
61368	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	223.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Meckel's diverticulum study (R)	167.35	189.65
61369	1/11/1999	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2004	1/11/2006	2015.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Indium-labelled octreotide study (including single photon emission tomography when undertaken), if (a) a gastro-entero-pancreatic endocrine tumour is suspected on the basis of biochemical evidence with negative or equivocal conventional imaging; or(b) both:(i) a surgically amenable gastro-entero-pancreatic endocrine tumour has been identified on the basis of conventional techniques; and(ii) the study is to exclude additional disease sites (R)	1511.85	1927.85
61372	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	223.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Salivary study (R)	167.35	189.65
61373	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	489.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Gastro-oesophageal reflux study, including delayed imaging on a separate occasion when performed (R)	367.3	416.25
61376	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	143.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Oesophageal clearance study (R)	107.55	121.85
61381	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	574.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Gastric emptying study, using single tracer (R)	430.8	488.2
61383	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	624.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Combined solid and liquid gastric emptying study using dual isotope technique or the same isotope on separate days (R)	468.75	527.05
61384	1/11/1996	[Table]	S 14	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	687.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Radionuclide colonic transit study (R)	515.8	599.8

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61386	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	332.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Renal study, including perfusion and renogram images and computer analysis or cortical study with planar imaging (R)	249.4	282.65
61387	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	430.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Renal cortical study, with single photon emission tomography and planar quantification (R)	323.1	366.15
61389	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	370.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Single renal study with pre-procedural administration of a diuretic or angiotensin converting enzyme (ACE) inhibitor (R)	277.95	315
61390	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	409.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Renal study with diuretic administration after a baseline study (R)	307.5	348.5
61393	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	605.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Combined examination involving a renal study following angiotensin converting enzyme (ACE) inhibitor provocation and a baseline study, in either order and related to a single referral episode (R)	454.15	517.6
61394	15/09/2020	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	15/09/2020	15/09/2020	653.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IA 4.1 Single stress myocardial perfusion study, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) the service is provided at, or from, a practice located in a Modified Monash 3, 4, 5, 6 or 7 area; and (c) a stress echocardiography service is not available in the Modified Monash area where the service is provided; and (d) the service includes resting electrocardiograph, continuous electrocardiograph monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (e) the service is requested by a specialist or consultant physician; and (f) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61406, 61414 or 61422 applies; and (g) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61324, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61406 or 61414, applies has not been provided to the patient in the previous 24 months (R)	489.8	565.15
61397	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	246.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Cystourethrogram (R)	185.15	209.85
61398	15/09/2020	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	15/09/2020	15/09/2020	982.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IA 4.1 Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) the service is provided at, or from, a practice located in a Modified Monash 3, 4, 5, 6 or 7 area; and (c) a stress echocardiography service is not available in the Modified Monash area where the service is provided; and (d) the service includes resting electrocardiograph, continuous electrocardiograph monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (e) the service is requested by a medical practitioner (other than a specialist or consultant physician); and (f) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61406, 61414 or 61422 applies; and (g) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61406, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)	736.55	894.15
61402	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	605.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Cerebral perfusion study, with single photon emission tomography and with planar imaging when performed (R)	453.8	517.15
61406	15/09/2020	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	15/09/2020	15/09/2020	982.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IA 4.1 Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) the service is provided at, or from, a practice located in a Modified Monash 3, 4, 5, 6 or 7 area; and (c) a stress echocardiography service is not available in the Modified Monash area where the service is provided; and (d) the service includes resting electrocardiograph, continuous electrocardiograph monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (e) the service is requested by a specialist or consultant physician; and (f) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61408, 61414 or 61422 applies; and (g) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61408, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)	736.55	894.15
61409	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	873.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Cerebro spinal fluid transport study, with imaging on 2 or more separate occasions (R)	655.15	785.6
61410	15/09/2020	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	15/09/2020	15/09/2020	982.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IA 4.1 Repeat combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion, with single photon emission tomography, with or without planar imaging, if: (a) both: (i) a service has been provided to the patient in the previous 24 months to which this Item, or Item 61311, 61324, 61329, 61332, 61345, 61349, 61357, 61365, 61377, 61380, 61394, 61398, 61406, 61414 or 61418, applies; and (ii) the patient has subsequently undergone a revascularisation procedure; and (b) the patient has one or more symptoms of cardiac ischaemia that have evolved and are not adequately controlled with optimal medical therapy; and (c) the service is provided at, or from, a practice located in a Modified Monash 3, 4, 5, 6 or 7 area; and (d) a stress echocardiography service is not available in the Modified Monash area where the service is provided; and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730 or 61418 applies; and (f) if the patient is 17 years or older—a service to which Item 61349, 61365 or 61418 applies has not been provided to the patient in the previous 12 months	736.55	894.15
61413	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	225.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Cerebro spinal fluid shunt patency study (R)	169.5	192.1
61414	15/09/2020	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	15/09/2020	15/09/2020	653.05	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2021	Note: the service only applies if the patient meets the requirements of the descriptor and the requirements of Note: IA 4.1 Single stress myocardial perfusion study, with single photon emission tomography, with or without planar imaging, if: (a) the patient has symptoms of cardiac ischaemia; and (b) the service is provided at, or from, a practice located in a Modified Monash 3, 4, 5, 6 or 7 area; and (c) a stress echocardiography service is not available in the Modified Monash area where the service is provided; and (d) the service includes resting electrocardiograph, continuous electrocardiograph monitoring during exercise (with recording), blood pressure monitoring and the recording of other parameters (including heart rate); and (e) the service is requested by a medical practitioner (other than a specialist or consultant physician); and (f) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61408 or 61422 applies; and (g) if the patient is 17 years or older—a service to which this Item, or Item 61311, 61324, 61329, 61332, 61345, 61357, 61377, 61380, 61394 or 61406, applies has not been provided to the patient in the previous 24 months (R)	489.8	565.15
61421	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	479.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Bone study—whole body, with, when undertaken, blood flow, blood pool and delayed imaging on a separate occasion (R)	359.85	407.85
61425	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	600.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Bone study—whole body and single photon emission tomography, with, when undertaken, blood flow, blood pool and delayed imaging on a separate occasion (R)	450.55	512.8
61426	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	554.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study using iodine (R)	416.1	471.6
61429	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	543	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study using gallium (R)	407.25	461.55
61430	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	628.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study using gallium, with single photon emission tomography (R)	494.6	571.55
61433	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	496.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study using cells labelled with technetium (R)	372.75	422.45
61434	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	615.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study using cells labelled with technetium, with single photon emission tomography (R)	461.55	527.5
61438	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	672.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study using thallium (R)	504.75	585.05
61441	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	495.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Bone marrow study—whole body using technetium labelled bone marrow agents (R)	367.3	416.25
61442	1/11/1997	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1997	1/11/2006	752.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Whole body study, using gallium—with single photon emission tomography of 2 or more body regions acquired separately (R)	564.3	664.45
61445	1/11/1999	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1999	1/11/2006	286.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Bone marrow study—localised using technetium labelled agent (R)	215.1	243.8
61446	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	331.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Regional scintigraphic study, using an approved bone scanning agent,including when undertaken, blood flow imaging, blood pool imaginand repeat imaging on a separate occasion (R)	250.2	283.55
61449	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	456.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Regional scintigraphic study, using an approved bone scanning agentand single photon emission tomography, including when undertaken, blood flow imaging, blood pool imaginand repeat imaging on a separate occasion (R)	342.15	387.8
61450	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	397.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Localised study using gallium (R)	298.2	337.95
61453	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	514.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Localised study using gallium, with single photon emission tomography (R)	386.05	437.5
61454	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	348.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Localised study using cells labelled with technetium (R)	261.1	295.9
61457	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	470.45	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Localised study using cells labelled with technetium, with single photon emission tomography (R)	352.85	399.9
61461	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	527.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Localised study using thallium (R)	395.9	448.7
61462	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/05/2007	129	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Repeat planar and single photon emission tomography imaging, or repeat planar imaging or single photon emission tomography imaging on an occasion subsequent to the performance of Item 61364, 61426, 61429, 61433, 61442, 61450, 61453, 61460 or 61485, if there is no additional administration of radiopharmaceutical and if the previous radionuclide scan was abnormal or equivocal (R)	96.75	109.65
61469	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	348.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Lymphoscintigraphy (R)	261.1	295.9
61472	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	175.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Thyroid study (R)	131.55	149.1
61480	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	386.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Parathyroid study (R)	290.15	328.85
61485	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	999.2	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Adrenal study, with single photon emission tomography (R)	749.4	911.3
61495	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	223.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Tear duct study (R)	167.35	189.65
61499	1/11/1996	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/1996	1/11/2006	253	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Particle perfusion study (infra arterial) or Le Veen shunt study (R)	189.75	215.05
61505	1/05/2007	ITable	S	IA	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2007	1/05/2007	100	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	CT scan performed at the same time and covering the same body area as single photon emission tomography or positron emission tomography for the purpose of anatomic localisation or attenuation correction if no separate diagnostic CT report is issued and performed in association with a service to which an item in Subgroup 1 or 2 of Group IA applies (R)	75	85

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61523	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/12/2005	Whole body FDG PET study, performed for evaluation of a solitary pulmonary nodule where the lesion is considered unsuitable for transthoracic fine needle aspiration biopsy, or for which an attempt at pathological characterisation has failed (R)	714.75	865.1	
61524	1/11/2019	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/11/2019	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Whole body FDG PET study, performed for the staging of locally advanced (Stage III) breast cancer, for a patient who is considered suitable for active therapy (R) (Anaes.)	714.75	865.1	Y
61525	1/11/2019	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/11/2019	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Whole body FDG PET study, performed for the evaluation of suspected metastatic or suspected locally or regionally recurrent breast carcinoma, for a patient who is considered suitable for active therapy (R) (Anaes.)	714.75	865.1	Y
61529	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/12/2005	Whole body FDG PET study, performed for the staging of proven non-small cell lung cancer, where curative surgery or radiotherapy is planned (R)	714.75	865.1	
61538	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	901	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	FDG PET study of the brain for evaluation of suspected residual or recurrent malignant brain tumour based on anatomical imaging findings, after definitive therapy (or during ongoing chemotherapy) in patients who are considered suitable for further active therapy. (R)	675.75	813.1	
61541	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study, following initial therapy, for the evaluation of suspected residual, metastatic or recurrent colorectal carcinoma in patients considered suitable for active therapy (R)	714.75	865.1	
61553	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	999	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected metastatic or recurrent malignant melanoma in patients considered suitable for active therapy (R)	749.25	911.1	
61559	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	918	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/12/2005	FDG PET study of the brain, performed for the evaluation of refractory epilepsy which is being evaluated for surgery (R)	688.5	830.1	
61560	1/11/2021	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	605.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	FDG PET study of the brain, performed for the diagnosis of Alzheimer's disease, if: clinical evaluation of the patient by a specialist, or in consultation with a specialist, is equivocal; and the service includes a quantitative comparison of the results of the study with the results of an FDG PET study of a normal brain from a reference database; and a service to which this item applies has not been performed on the patient in the previous 12 months; and a service to which Item61402 applies has not been performed on the patient in the previous 12 months for the diagnosis or management of Alzheimer's disease Applicable not more than 3 times per lifetime(R)	453.8	517.15	
61565	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study, following initial therapy, performed for the evaluation of suspected residual, metastatic or recurrent ovarian carcinoma in patients considered suitable for active therapy. (R)	714.75	865.1	
61571	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study, for the further primary staging ofpatients with histologically proven carcinoma of the uterine cervix, at FIGO stage IB2 or greater by conventional staging, prior to planned radical radiation therapy or combined modality therapy with curative intent. (R)	714.75	865.1	
61575	1/07/2011	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/07/2011	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study, for the further staging of patients with confirmed local recurrence of carcinoma of the uterine cervix considered suitable for salvage pelvic chemoradiotherapy or pelvic exenteration with curative intent. (R)	714.75	865.1	
61577	1/10/2001	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/10/2001	1/10/2001	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2009	Whole body FDG PET study, performed for the staging of proven oesophageal or GEJ carcinoma, in patients considered suitable for active therapy (R)	714.75	865.1	
61598	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2009	Whole body FDG PET study, performed for the staging of biopsy-proven newly diagnosed or recurrent head and neck cancer (R)	714.75	865.1	
61604	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2009	Whole body FDG PET study, performed for the evaluation of patients with suspected residual head and neck cancer after definitive treatment, and who are suitable for active therapy (R).	714.75	865.1	
61610	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2009	Whole body FDG PET study performed for the evaluation of metastatic squamous cell carcinoma of unknown primary site involving cervical nodes (R)	714.75	865.1	
61620	1/07/2011	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/07/2011	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Whole body FDG PET study for the initial staging of newly diagnosed or previously untreated Hodgkin or non-Hodgkin lymphoma (R)	714.75	865.1	
61622	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Whole body FDG PET study to assess response to first line therapy either during treatment or within three months of completing definitive first line treatment for Hodgkin or non-Hodgkin lymphoma (R)	714.75	865.1	
61628	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Whole body FDG PET study for restaging following confirmation of recurrence of Hodgkin or non-Hodgkin lymphoma (R)	714.75	865.1	
61632	1/07/2011	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/07/2011	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2017	Whole body FDG PET study to assess response to second-line chemotherapy (haemopoietic stem cell transplantation is being considered for Hodgkin or non-Hodgkin lymphoma (R)	714.75	865.1	
61640	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	999	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study for initial staging of patients with biopsy-proven bone or soft tissue sarcoma (excluding gastrointestinal stromal tumour) considered by conventional staging to be potentially curable. (R)	749.25	911.1	
61644	1/04/2022	[Table]	S	I4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2022	1/04/2022	329	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2022	Single rest myocardial perfusion study for the assessment of the extent and severity of non-viable myocardium, with PET, if: (a) the service is performed because the service to which Item 61325 applies cannot be performed due to unavailability of thallous chloride 201 (Tl-201); and (b) the patient has left ventricular systolic dysfunction and probable or confirmed coronary artery disease; and (c) the service is performed in conjunction with a rest myocardial perfusion study using technetium-99m; and (d) the service is requested by a specialist or a consultant physician; and (e) the service is not associated with a service to which Item 11704, 11705, 11707, 11714, 11729 or 11730 applies; and (f) this service and Item 61325 are applicable only twice each 24 months (R) Item 61644 is a substitute item that may only be used during periods of national shortage of Tl-201. See IN.4.4 of explanatory notes to this Category for further information.	266.75	279.65	
61646	14/01/2002	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	14/01/2002	14/01/2002	999	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Whole body FDG PET study for the evaluation of patients with suspected residual or recurrent sarcoma (excluding gastrointestinal stromal tumour) after the initial course of definitive therapy to determine suitability for subsequent therapy with curative intent. (R)	749.25	911.1	
61647	1/05/2018	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2018	1/05/2020	953	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	Whole body 68Ga DOTA peptide PET study, if:(a) a gastro entero pancreatic neuroendocrine tumour is suspected on the basis of biochemical evidence with negative or equivocal conventional imaging; or(b) both:(i) a surgically amenable gastro entero pancreatic neuroendocrine tumour has been identified on the basis of conventional techniques; and(ii) the study is for excluding additional disease sites (R)	714.75	865.1	
61650	1/06/2004	[Table]	S	I4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/06/2004	1/11/2006	659.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	LeukoScan study of the long bones and feet for suspected osteomyelitis, if: (a) the patient does not have access to ex vivo white blood cell scanning; and(b) the patient is not being investigated for other sites of infection (R)	659.05	790.8	
63001	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for tumour of the brain or meninges (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63004	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for inflammation of brain or meninges (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63007	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for skull base or orbital tumour (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63010	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	336	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for stereotactic scan of brain, with fiducials in place, for the sole purpose of allowing planning for stereotactic neurosurgery (R) (Anaes.) (Contrast) (Anaes.)	252	285.6	Y
63040	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	336	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for acoustic neuroma (R) (Anaes.) (Contrast) (Anaes.)	252	285.6	Y
63043	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	268.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for pituitary tumour (R) (Anaes.) (Contrast) (Anaes.)	268.8	304.65	Y
63046	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for toxic or metabolic or ischaemic encephalopathy (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63049	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for demyelinating disease of the brain (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63052	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for congenital malformation of the brain or meninges (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63055	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for venous sinus thrombosis (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63058	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for head trauma (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63061	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for epilepsy (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63064	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for stroke (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63067	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for carotid or vertebral artery dissection (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63070	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for intracranial aneurysm (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63073	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head (including MRA, if performed) for intracranial arteriovenous malformation (R) (Anaes.) (Contrast) (Anaes.)	302.4	342.75	Y
63101	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI and MRA of extracranial or intracranial circulation (or both)—scan of head and neck vessels for stroke (R) (Anaes.) (Contrast) (Anaes.)	369.6	418.9	Y
63111	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head and cervical spine (including MRA, if performed) for tumour of the central nervous system or meninges (R) (Anaes.) (Contrast) (Anaes.)	369.6	418.9	Y
63114	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head and cervical spine (including MRA, if performed) for inflammation of the central nervous system or meninges (R) (Anaes.) (Contrast) (Anaes.)	369.6	418.9	Y
63125	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head and cervical spine (including MRA, if performed) for demyelinating disease of the central nervous system (R) (Anaes.) (Contrast) (Anaes.)	369.6	418.9	Y
63128	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head and cervical spine (including MRA, if performed) for congenital malformation of the central nervous system or meninges (R) (Anaes.) (Contrast) (Anaes.)	369.6	418.9	Y
63131	1/08/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head and cervical spine (including MRA, if performed) for syrinx (congenital or acquired) (R) (Anaes.) (Contrast) (Anaes.)	369.6	418.9	Y

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63151	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for infection (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63154	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for tumour (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63161	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for demyelinating disease (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63164	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for congenital malformation of the spinal cord or the cauda equina or the meninges (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63167	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for myelopathy (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63170	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for syrinx (congenital or acquired) (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63173	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for cervical radiculopathy (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63176	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for sciatica (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63179	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for spinal canal stenosis (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63182	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for previous spinal surgery (R) (Areas.) (Contrast) (Areas.)	268.8	304.65	Y
63185	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of one region or 2 contiguous regions of the spine for trauma (R) (Areas.) (Areas.)	268.8	304.65	Y
63201	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for infection (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63204	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for tumour (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63219	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for demyelinating disease (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63222	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for congenital malformation of the spinal cord or the cauda equina or the meninges (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63225	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for myelopathy (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63228	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for syrinx (congenital or acquired) (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63231	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for cervical radiculopathy (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63234	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for sciatica (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63237	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for spinal canal stenosis (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63240	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for previous spinal surgery (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63243	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of 3 contiguous or 2 non contiguous regions of the spine for trauma (R) (Areas.) (Areas.)	336	380.8	Y
63271	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cervical spine and brachial plexus for tumour (R) (Areas.) (Contrast) (Areas.)	369.6	418.9	Y
63274	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cervical spine and brachial plexus for trauma (R) (Areas.) (Contrast) (Areas.)	369.6	418.9	Y
63277	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cervical spine and brachial plexus for cervical radiculopathy (R) (Areas.) (Contrast) (Areas.)	369.6	418.9	Y
63280	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	492.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cervical spine and brachial plexus for previous surgery (R) (Areas.) (Contrast) (Areas.)	369.6	418.9	Y
63301	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	380.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for tumour arising in bone or musculoskeletal system, excluding tumours arising in breast, prostate or rectum (R) (Areas.) (Contrast) (Areas.)	285.6	323.7	Y
63304	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	380.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for infection arising in bone or musculoskeletal system, excluding infection arising in breast, prostate or rectum (R) (Areas.) (Contrast) (Areas.)	285.6	323.7	Y
63307	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	380.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for osteonecrosis (R) (Areas.) (Contrast) (Areas.)	285.6	323.7	Y
63322	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of hip or its supporting structures (R) (Areas.) (Contrast) (Areas.)	302.4	342.75	Y
63325	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of shoulder or its supporting structures (R) (Areas.) (Contrast) (Areas.)	302.4	342.75	Y
63328	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of knee or its supporting structures (R) (Areas.) (Contrast) (Areas.)	302.4	342.75	Y
63331	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of ankle or foot (or both) or its supporting structures (R) (Areas.) (Contrast) (Areas.)	302.4	342.75	Y
63334	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	336	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of one or both temporomandibular joints or their supporting structures (R) (Areas.) (Contrast) (Areas.)	252	285.6	Y
63337	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of wrist or hand (or both) or its supporting structures (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63340	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for derangement of elbow or its supporting structures (R) (Areas.) (Contrast) (Areas.)	302.4	342.75	Y
63361	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of musculoskeletal system for Gaucher disease (R) (Areas.) (Areas.)	302.4	342.75	Y
63385	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cardiovascular system for congenital disease of the heart or a great vessel (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63388	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	448	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cardiovascular system for tumour of the heart or a great vessel (R) (Areas.) (Contrast) (Areas.)	336	380.8	Y
63391	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cardiovascular system for abnormality of thoracic aorta (R) (Areas.) (Contrast) (Areas.)	302.4	342.75	Y
63395	1/05/2018	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2018	1/05/2018	855.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cardiovascular system for assessment of myocardial structure and function involving:(a) dedicated right ventricular views; and(b) 3D volumetric assessment of the right ventricle; and(c) reporting of end diastolic and end systolic volumes, ejection fraction and BSA indexed values;if the request for the scan indicates that:(d) the patient presented with symptoms consistent with arrhythmogenic right ventricular cardiomyopathy (ARVC); or(e) investigative findings in relation to the patient are consistent with ARVC(R) (Contrast) (Areas.)	641.4	767.3	Y
63397	1/05/2018	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2018	1/05/2018	855.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of cardiovascular system for assessment of myocardial structure and function involving: (a) dedicated right ventricular views; and(b) 3D volumetric assessment of the right ventricle; and(c) reporting of end diastolic and end systolic volumes, ejection fraction and BSA indexed values;if the request for the scan indicates that the patient:(d) is asymptomatic; and(e) has one or more first degree relatives diagnosed with confirmed arrhythmogenic right ventricular cardiomyopathy (ARVC)(R) (Contrast) (Areas.)	641.4	767.3	Y
63399	1/01/2022	ITable]	S	IS	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	C	1/01/2022	1/01/2022	855.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2022	MRI—scan of cardiovascular system for the assessment of myocardial structure and function, if the service is requested by a consultant physician who has assessed the patient, and the request for the scan indicates: the patient has suspected myocarditis after receiving a mRNA COVID-19 vaccine; and the patient had symptom onset within 21 days of a mRNA COVID-19 vaccine administration; and the results from the following examinations are inconclusive to form a diagnosis of myocarditis:(i)echocardiogram; and(ii) troponin; and(iii)chest X-ray. Applicable not more than once in a patient's lifetime (R) (Contrast) (Areas.)	641.4	767.3	Y
63401	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRA—if the request for the scan specifically identifies the clinical indication for the scan—scan of cardiovascular system for vascular abnormality in a patient with a previous anaphylactic reaction to an iodinated contrast medium (R) (Contrast) (Areas.)	302.4	342.75	Y
63404	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRA—if the request for the scan specifically identifies the clinical indication for the scan—scan of cardiovascular system for obstruction of the superior vena cava, inferior vena cava or a major pelvic vein (R) (Contrast) (Areas.)	302.4	342.75	Y
63416	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRA— scan of person under the age of 16 for the vasculature of limbs prior to limb or digit transfer surgery in congenital limb deficiency syndrome (R) (Contrast) (Areas.)	302.4	342.75	Y
63425	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of person under the age of 16 for post inflammatory or post traumatic physeal fusion (R) (Areas.)	302.4	342.75	Y
63428	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of person under the age of 16 for Gaucher disease (R) (Areas.)	302.4	342.75	Y
63440	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of person under the age of 16 for pelvic or abdominal mass (R) (Contrast) (Areas.)	302.4	342.75	Y
63443	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of person under the age of 16 for mediastinal mass (R) (Contrast) (Areas.)	302.4	342.75	Y
63446	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of person under the age of 16 for congenital uterine or anorectal abnormality (R) (Contrast) (Areas.)	302.4	342.75	Y
63454	1/05/2019	ITable]	S	IS	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	1200	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2021	MRI— scan of the pelvis or abdomen, for a patient who is pregnant, if: (a) the pregnancy is at, or after, 18 weeks gestation; and(b) fetal central nervous system abnormality is suspected; and(c) an ultrasound has been performed and is provided by, or on behalf of, or at the request of, a specialist who is practising in the specialty of obstetrics; and(d) the diagnosis is indeterminate or requires further examination; and(e) the service is requested by a specialist practising in the specialty of obstetrics (R) (Contrast) (Areas.)	900	1112.1	Y
63461	1/08/2004	ITable]	S	IS	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	358.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2020	MRI—scan of the body for adrenal mass in a patient with a malignancy that is otherwise resectable (R) (Areas.)	268.8	304.65	Y

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63464	1/02/2009	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2009	1/02/2009	690	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of both breasts for the detection of cancer, if a dedicated breast coil is used, the request for the scan identifies that the person is asymptomatic and is younger than 50 years of age, and the request for the scan identifies: (a) that the patient is at high risk of developing breast cancer, due to one of the following:(i) 2 or more first or second degree relatives on the same side of the family diagnosed with breast or ovarian cancer;(ii) 2 or more first or second degree relatives on the same side of the family diagnosed with breast or ovarian cancer, if any of the relatives has been diagnosed with bilateral breast cancer, had onset of breast cancer before the age of 40 years, had onset of ovarian cancer before the age of 50 years, has been diagnosed with breast and ovarian cancer (at the same time or at different times), has Ashkenazi Jewish ancestry or is a male relative who has been diagnosed with breast cancer;(iii) one first or second degree relative diagnosed with breast cancer at age 45 years or younger, and another first or second degree relative on the same side of the family with bone or soft tissue sarcoma at age 45 years or younger; or(b) that genetic testing has identified the presence of a high risk breast cancer gene mutation (R) (Anaes.)	517.5	602.1	Y
63467	1/02/2009	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2009	1/02/2009	690	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of both breasts for the detection of cancer, if (b) a dedicated breast coil is used; and(b) the person has had an abnormality detected as a result of a service mentioned in Item 63464 performed in the previous 12 months (R) (Anaes.)	517.5	602.1	Y
63470	1/08/2004	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of the pelvis for the staging of histologically diagnosed cervical cancer at FIGO stage 1B or greater, if the request for scan identifies that: (a) a histological diagnosis of carcinoma of the cervix has been made; and(b) the patient has been diagnosed with cervical cancer at FIGO stage 1B or greater (R) (Contrast) (Anaes.)	302.4	342.75	Y
63473	1/08/2004	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	627.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of the pelvis and upper abdomen, in a single examination, for the staging of histologically diagnosed cervical cancer at FIGO stage 1B or greater, if the request for the scan identifies that: (a) a histological diagnosis of carcinoma of the cervix has been made; and(b) the patient has been diagnosed with cervical cancer at FIGO stage 1B or greater (R) (Contrast) (Anaes.)	470.4	536.3	Y
63476	1/07/2009	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2009	1/07/2009	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of the pelvis for the initial staging of rectal cancer, if: (a) a phased array body coil is used; and(b) the request for the scan identifies that the indication is for the initial staging of rectal cancer (including cancer of the rectosigmoid and anorectum) (R) (Contrast) (Anaes.)	302.4	342.75	Y
63482	1/01/2006	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2006	1/01/2006	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of pancreas and biliary tree for suspected biliary or pancreatic pathology (R) (Anaes.)	302.4	342.75	Y
63487	1/11/2016	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/11/2016	690	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of both breasts, if (a) a dedicated breast coil is used; and(b) the request for the scan identifies that:(i) the patient has been diagnosed with metastatic cancer restricted to the regional lymph nodes; and(ii) clinical examination and conventional imaging have failed to identify the primary cancer (R) (Anaes.)	517.5	602.1	
63489	1/11/2016	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2016	1/11/2021	1008	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	MRI—scan of one breast, performed in conjunction with a biopsy procedure on that breast and an ultrasound scan of that breast, if: (a) the request for the MRI scan identifies that the patient has a suspicious lesion seen on MRI but not on conventional imaging; and (b) the ultrasound scan is performed immediately before the MRI scan and confirms that the lesion is not amenable to biopsy guided by conventional imaging; and (c) a dedicated breast coil is used (R) (Anaes.)	756	920.1	Y
63491	1/08/2004	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	44.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE: Benefits in Subgroup 22 are only payable for modifying items where claimed simultaneously with MRI services. Modifiers for sedation and anaesthesia may not be claimed for the same service. MRI or MRA service to which an item in this Group (other than an item in this Subgroup) applies if: (a) the service is performed under a person in accordance with clause 2.5.1; and(b) the item for the service includes in its description "contrast"; and(c) the service is performed using a contrast agent	33.6	38.1	
63494	1/08/2004	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	44.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI or MRA service to which an item in this Group (other than an item in this Subgroup) applies if: (a) the service is performed on a person in accordance with clause 2.5.1; and(b) the service is performed using intravenous or intra muscular sedation	33.6	38.1	
63496	1/05/2019	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	250	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	NOTE: Benefits in Subgroup 22 are only payable for modifying items where claimed simultaneously with MRI services. Modifiers for sedation and anaesthesia may not be claimed for the same service. MRI service to which Item 63545 or 63546 applies if: (a) the service is performed on a person under the supervision of an eligible provider; and(b) the service is performed using an hepatobiliary specific contrast agent	187.5	212.5	
63497	1/08/2004	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/08/2004	1/08/2004	156.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI or MRA service to which an item in this Group (other than an item in this Subgroup) applies if: (a) the service is performed on a person in accordance with clause 2.5.1; and(b) the service is performed under anaesthetic in the presence of a medical practitioner who is qualified to perform an anaesthetic	117.6	133.3	
63498	12/03/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	12/03/2012	12/03/2012	44.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	12/03/2012	MRI service to which Item 63501, 63502, 63504 or 63505 applies if: (a) the service is performed in accordance with the determination; and (b) the service is performed on a person using intravenous or intra muscular sedation	33.6	38.1	
63499	12/03/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	12/03/2012	12/03/2012	156.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	12/03/2012	MRI service to which Item 63501, 63502, 63504 or 63505 applies if: (a) the service is performed in accordance with the determination; and (b) the service is performed on a person under anaesthetic in the presence of a medical practitioner who is qualified to perform an anaesthetic.	117.6	133.3	
63501	12/03/2012	[Table]	S	IS	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	12/03/2012	12/03/2012	500	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of one or both breasts for the evaluation of implant integrity where: (a) a dedicated breast coil is used; and(b) the request for the scan identifies that the patient: (i) has or is suspected of having a silicone breast implant manufactured by Poly Implant Prosthese (PIP); and(ii) the result of the scan confirms a loss of integrity of the implant. (R) Note: Benefits are payable on one occasion only in any 24 Month Period	375	425	
63502	12/03/2012	[Table]	S	IS	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	12/03/2012	12/03/2012	500	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of one or both breasts for the evaluation of implant integrity where: (a) a dedicated breast coil is used; and (b) the request for the scan identifies that the patient: (i) has or is suspected of having a silicone breast implant manufactured by Poly Implant Prosthese (PIP); and (ii) the result of the scan does not demonstrate a loss of integrity of the implant (R) Note: Benefits are payable on one occasion only in any 24Month Period	375	425	
63504	12/03/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	12/03/2012	12/03/2012	500	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	12/03/2012	MRI—scan of one or both breasts for the evaluation of implant integrity where: (a) a dedicated breast coil is used; and (b) the request for the scan identifies that the patient: (i) has or is suspected of having a silicone breast implant manufactured by Poly Implant Prosthese (PIP); and (ii) presents with symptoms where implant rupture is suspected; and (iii) the result of the scan confirms a loss of integrity of the implant (R)	375	425	
63505	12/03/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	12/03/2012	12/03/2012	500	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	12/03/2012	MRI—scan of one or both breasts for the evaluation of implant integrity where: (a) a dedicated breast coil is used; and (b) the request for the scan identifies that the patient: (i) has or is suspected of having a silicone breast implant manufactured by Poly Implant Prosthese (PIP); and (ii) presents with symptoms where implant rupture is suspected; and (iii) the result of the scan does not demonstrate a loss of integrity of the implant (R)	375	425	
63507	1/11/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of head for a patient under 16 years if the service is for:(a) an unexplained seizure; or(b) an unexplained headache if significant pathology is suspected; or(c) paranasal sinus pathology that has not responded to conservative therapy (R) (Contrast) (Anaes.)	302.4	342.75	Y
63510	1/11/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	448	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of spine following radiographic examination for a patient under 16 years if the service is for: (a) significant trauma; or(b) unexplained neck or back pain with associated neurological signs; or(c) unexplained back pain if significant pathology is suspected (R) (Contrast) (Anaes.)	336	380.8	Y
63513	1/11/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of knee for internal joint derangement for a patient under 16 years (R) (Contrast) (Anaes.)	302.4	342.75	Y
63516	1/11/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of hip following radiographic examination for a patient under 16 years if any of the following is suspected: (a) septic arthritis;(b) slipped capital femoral epiphysis;(c) Perthes disease (R) (Contrast) (Anaes.)	302.4	342.75	Y
63519	1/11/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of elbow following radiographic examination for a patient under 16 years if a significant fracture or avulsion injury, which would change the way in which the patient is managed, is suspected (R) (Contrast) (Anaes.)	302.4	342.75	Y
63522	1/11/2012	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	448	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of wrist following radiographic examination for a patient under 16 years if a scaphoid fracture is suspected (R) (Contrast) (Anaes.)	336	380.8	Y
63531	1/11/2019	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/11/2019	690	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of both breasts, if: (a) a dedicated breast coil is used; and(b) the request for the scan identifies that:(i) the patient has a breast lesion; and(ii) the results of conventional imaging are inconclusive for the presence of breast cancer; and(iii) biopsy has not been possible (R) (Contrast) (Anaes.)	517.5	602.1	Y
63533	1/11/2019	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2019	1/11/2019	690	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of both breasts, if: (a) a dedicated breast coil is used; and(b) the request for the scan identifies that:(i) the patient has been diagnosed with a breast cancer; and(ii) there is a discrepancy between the clinical assessment and the conventional imaging assessment of the extent of the malignancy; and(c) the results of breast MRI imaging may alter treatment planning (R) (Contrast) (Anaes.)	517.5	602.1	Y
63541	1/07/2018	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	450	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Multiparametric MRI—scan of the prostate for the detection of cancer, requested by a specialist in the speciality of urology, radiation oncology or medical oncology: (a) if the request for the scan identifies that the patient is suspected of developing prostate cancer: (i) on the basis of a digital rectal examination; or (ii) in the circumstances mentioned in clause2.5.9A; and (b) using a standardised image acquisition protocol involving: (i) T2-weighted imaging; and (ii) diffusion-weighted imaging; and (iii) (unless contraindicated) dynamic contrast enhancement (R) Note:See explanatory note IN.5.1 forthe meaning of Clause 2.5.9 in the descriptor for this item and the claiming limitations. (Anaes.)	337.5	382.5	Y
63543	1/07/2018	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	450	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Multiparametric MRI—scan of the prostate for the assessment of cancer, requested by a specialist in the speciality of urology, radiation oncology or medical oncology: (a) if the request for the scan identifies that the patient: (i) is under active surveillance following a confirmed diagnosis of prostate cancer by biopsy histopathology; and (ii) is not undergoing, or planning to undergo, treatment for prostate cancer; and (b) using a standardised image acquisition protocol involving: (i) T2-weighted imaging; and (ii) diffusion-weighted imaging; and (iii) (unless contraindicated) dynamic contrast enhancement (R) Note: See explanatory note IN.5.2 for claiming restrictions for this item. (Anaes.)	337.5	382.5	Y
63545	1/05/2019	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	550	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—multiphase scans of liver (including delayed imaging, if performed) with a contrast agent, for characterisation or intervention planning, if (a) the patient has: (i) known colorectal carcinoma; and(ii) known, suspected, or possible liver metastasis; and(b) computed tomography, or ultrasound imaging, has identified a mass lesion in patient's liver. *For any particular patient*—applicable not more than once in a 12 month period (R) (Contrast) (Anaes.)	412.5	467.5	Y
63546	1/05/2019	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	550	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—multiphase scans of the liver (including delayed imaging, if performed) with a contrast agent, for diagnosis or staging, if (a) the patient has:(i) known or suspected hepatocellular carcinoma; and(ii) chronic liver disease that has been confirmed by a specialist or consultant physician; and(b) the patient's liver function has been identified as Child Pugh class A or B; and(c) the patient has an identified hepatic lesion over 10 mm in diameter. *For any particular patient*—applicable not more than once in a 12 month period (R) (Contrast) (Anaes.)	412.5	467.5	Y
63547	1/05/2018	[Table]	S	IS	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2018	1/05/2018	690	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan of both breasts for the detection of cancer, if: (a) a dedicated breast coil is used; and(b) the request for the scan identifies that:(i) the patient has a breast implant in situ; and(ii) anaplastic large cell lymphoma has been diagnosed(R) (Contrast) (Anaes.)	517.5	602.1	Y

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63551	1/11/2013	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2013	1/11/2013	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	MRI - scan of head for a patient 16 years or older, after a request by a medical practitioner (other than a specialist or consultant physician), for any of the following: (a) unexplained seizure(s);(b) unexplained chronic headache with suspected intracranial pathology (R) (Contrast) (Anaes.)	302.4	342.75 Y
63554	1/11/2013	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2013	1/11/2013	358.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	MRI - scan of spine for a patient 16 years or older, after referral by a medical practitioner (other than a specialist or consultant physician), for suspected cervical radiculopathy (R) (Contrast) (Anaes.)	268.8	304.65 Y
63557	1/11/2013	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2013	1/11/2013	492.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	MRI - scan of spine for a patient 16 years or older, after referral by a medical practitioner (other than a specialist or consultant physician), for suspected cervical spinal trauma (R) (Contrast) (Anaes.)	369.6	418.9 Y
63560	1/11/2013	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2013	1/11/2013	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	MRI - scan of knee following acute knee trauma, after referral by a medical practitioner (other than a specialist or consultant physician), for a patient 16 to 49 years with: (a) inability to extend the knee suggesting the possibility of acute meniscal tear; or(b) clinical findings suggesting acute anterior cruciate ligament tear (R) (Contrast) (Anaes.)	302.4	342.75 Y
63740	1/11/2014	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	457.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan to evaluate small bowel Crohn's disease if the service is provided to a patient for: (a) evaluation of disease extent at time of initial diagnosis of Crohn's disease; or(b) evaluation of exacerbation, or suspected complications, of known Crohn's disease; or(c) evaluation of known or suspected Crohn's disease in pregnancy; or(d) assessment of change to therapy in a patient with small bowel Crohn's disease (R) (Contrast)	343.9	388.65
63741	1/11/2014	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	265.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan with enteroclysis for Crohn's disease if the service is related to Item 63740 (R)	188.95	225.5
63743	1/11/2014	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	403.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2020	MRI—scan for fistulising perianal Crohn's disease if the service is provided to a patient for:(a) evaluation of pelvic sepsis and fistulas associated with established or suspected Crohn's disease; or(b) assessment of change to therapy of pelvic sepsis and fistulas from Crohn's disease (R) (Contrast)	302.4	342.75
64990	1/02/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	7.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A diagnostic imaging service to which an item in this table (other than this item or Item 64991, 64992, 64993, 64994 or 64995) applies if: (a)the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a Commonwealth concession card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this table applying to the service		6.15
64991	1/05/2004	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	10.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A diagnostic imaging service to which an item in this table (other than this item or Item 64990, 64992, 64993, 64994 or 64995) applies if: (a)the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a Commonwealth concession card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this table applying to the service; and (e) the service is provided at, or from, a practice location in a Modified Monash 2 area		9.3
64992	1/01/2022	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	11.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A diagnostic imaging service to which an item in this table (other than this item or Item 64990, 64991, 64993, 64994 or 64995) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a Commonwealth concession card holder; and (c) the person is not an admitted patient of a hospital; and (d) the service is bulk-billed in respect of the fees for: (i)this item; and (ii) the other item in this Schedule applying to the service; and (e) the service is provided at, or from, a practice location in: (i) a Modified Monash 3 area; or (ii) a Modified Monash 4 area		9.85
64993	1/01/2022	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	12.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A diagnostic imaging service to which an item in this table (other than this item or Item 64990, 64991, 64992, 64994 or 64995) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a Commonwealth concession card holder; and (c) the person is not an admitted patient of a hospital; and (d) the service is bulk-billed in respect of the fees for: (i)this item; and (ii) the other item in this Schedule applying to the service; and (e) the service is provided at, or from, a practice location in a Modified Monash 5 area		10.45
64994	1/01/2022	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	13	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A diagnostic imaging service to which an item in this table (other than this item or Item 64990, 64991, 64992, 64993 or 64995) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a Commonwealth concession card holder; and (c) the person is not an admitted patient of a hospital; and (d) the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this Schedule applying to the service; and (e) the service is provided at, or from, a practice location in a Modified Monash 6 area		11.05
64995	1/01/2022	[Table]	S	IG	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	14.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A diagnostic imaging service to which an item in this table (other than this item or Item 64990, 64991, 64992, 64993 or 64994) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a Commonwealth concession card holder; and (c) the person is not an admitted patient of a hospital; and (d) the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this Schedule applying to the service; and (e) the service is provided at, or from, a practice location in a Modified Monash 7 area		12.15
65060	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	7.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Haemoglobin, erythrocyte sedimentation rate, blood viscosity - 1 or more tests	5.9	6.7
65066	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	10.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Examination of: (a)a blood film by special stains to demonstrate Heinz bodies, parasites or iron; or (b)a blood film by enzyme cytochemistry for neutrophil alkaline phosphatase, alpha-naphthyl acetate esterase or chloroacetate esterase; or (c)a blood film using any other special staining methods including periodic acid Schiff and Sudan Black; or (d)a urinary sediment for haemosiderin including a service described in Item 65072	7.8	8.85
65070	1/11/2000	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/01/2013	16.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Erythrocyte count, haematocrit, haemoglobin, calculation or measurement of red cell index or indices, platelet count, leucocyte count and manual or instrument generated differential count - not being a service where haemoglobin only is requested - one or more instrument generated sets of results from a single sample; and (if performed) (a) a morphological assessment of a blood film; (b) any service in Item 65060 or 65072	12.75	14.45
65072	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	10.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2001	Examination for reticulocytes including a reticulocyte count by any method - 1 or more tests	7.65	8.7
65075	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	51.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Haemolysis or metabolic enzymes - assessment by: (a)erythrocyte autohaemolysis test; or (b)erythrocyte osmotic fragility test; or (c)sugar water test; or (d)G-6-P D (qualitative or quantitative) test; or (e)pyruvate kinase (qualitative or quantitative) test; or (f)acid haemolysis test; or (g) quantitation of muramidase in serum or urine; or (h) Donath Landsteiner antibody test; or (i) other erythrocyte metabolic enzyme tests 1 or more tests	39	44.2
65078	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	60.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Tests for the diagnosis of thalassaemia consisting of haemoglobin electrophoresis or chromatography and at least 2 of: (a)examination for HbH; or (b)quantitation of HbA2; or (c)quantitation of HbF; including (if performed) any service described in item 65060 or 65070	67.65	76.7
65079	1/05/2007	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	60.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Tests described in item 65078 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	67.65	76.7
65081	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	65.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Tests for the investigation of haemoglobinopathy consisting of haemoglobin electrophoresis or chromatography and at least 1 of: (a)heat denaturation test; or (b)isopropanol precipitation test; or (c)tests for the presence of haemoglobin S; or (d)quantitation of any haemoglobin fraction (including S, C, D, E); including (if performed) any service described in item 65060, 65070 or 65078	72.45	82.15
65082	1/05/2007	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	65.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Tests described in item 65081 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	72.45	82.15
65084	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	165.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Bone marrow trephine biopsy - histopathological examination of sections of bone marrow and examination of aspirated material (including clot sections where necessary), including (if performed): any test described in item 65060, 65066 or 65070	124.4	141
65087	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	62.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Bone marrow - examination of aspirated material (including clot sections where necessary), including (if performed): any test described in item 65060, 65066 or 65070	62.35	70.65
65090	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	11.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Blood grouping (including back-grouping if performed) - ABO and Rh (D antigen)	8.4	9.5
65093	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	22	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Blood grouping - Rh phenotypes, Kell system, Duffy system, M and N factors or any other blood group system - 1 or more systems, including Item 65060 (if performed)	16.5	18.7
65096	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	46	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Blood grouping (including back-grouping if performed), and examination of serum for Rh and other blood group antibodies, including: (a)identification and quantitation of any antibodies detected; and (b)(if performed) any test described in Item 65060 or 65070	30.75	34.85
65099	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	108.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Compatibility tests by crossmatch - all tests performed on any1 day for up to 6 units, including: (a)direct testing of donor red cells from each unit against the serum of the patient by one or more accepted crossmatching techniques; and (b) all grouping checks of the patient and donor; and (c)examination for antibodies, and if necessary identification of any antibodies detected; and (d)(if performed) any tests described in Item 65060, 65070, 65090 or 65096 (Item is subject to rule 5)	81.7	92.6
65102	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	164.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Compatibility tests by crossmatch - all tests performed on any1 day in excess of 6 units, including: (a) direct testing of donor red cells from each unit against serum of the patient by one or more accepted crossmatching techniques; and (b) all grouping checks of the patient and donor; and (c)examination for antibodies, and if necessary identification of any antibodies detected; and (d)(if performed) any tests described in Item 65060, 65070, 65090, 65096, 65099 or 65105 (Item is subject to rule 5)	123.45	139.95
65105	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	108.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	Compatibility testing using at least a 3-cell panel and issue of red cells for transfusion - all tests performed on any one day for up to 6 units, including: (a) all grouping checks of the patient and donor; and (b) examination for antibodies and, if necessary, identification of any antibodies detected; and (c) (if performed) any tests described in Item 65060, 65070, 65090 or 65096 (Item is subject to rule 5)	81.7	92.6
65108	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	164.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Compatibility testing using at least a 3-cell panel and issue of red cells for transfusion - all tests performed on any one day in excess of 6 units, including: (a)all grouping checks of the patient and donor; and (b)examination for antibodies and, if necessary, identification of any antibodies detected; and (c) (if performed) any tests described in Item 65060, 65070, 65090, 65096, 65099 or 65105 (Item is subject to rule 5)	123.45	139.95
65109	1/05/2007	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	12.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Release of fresh frozen plasma or cryoprecipitate for the use in a patient for the correction of a coagulopathy - 1 release.	9.7	11
65110	1/05/2007	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	12.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Release of compatible fresh platelets for the use in a patient for platelet support as prophylaxis to minimize bleeding or during active bleeding - 1 release.	9.7	11
65111	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	23.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Examination of serum for blood group antibodies (including identification and, if necessary, quantitation of any antibodies detected)	17.4	19.75
65114	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	9.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	1 or more of the following tests: (a)direct Coombs (antiglobulin) test; (b)qualitative or quantitative test for cold agglutinins or heterophil antibodies	6.85	7.75
65117	1/11/1998	[Table]	G	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	1 or more of the following tests: (a)Spectroscopic examination of blood for chemically altered haemoglobins; (b)detection of methaemalbumin (Schumm's test)	15.2	17.25

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65120	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	13.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Prothrombin time (including INR where appropriate), activated partial thromboplastin time, thrombin time (including test for the presence of heparin), test for factor XIII deficiency (qualitative), Echis test, Stypven test, reptilase time, fibrinogen, or 1 of fibrinogen degradation products, fibrin monomer or D-dimer - 1 test	10.3	11.65
65123	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	2 tests described in item 65120	15.3	17.3
65126	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	27.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	3 tests described in item 65120	20.9	23.7
65129	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	35.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	4 or more tests described in item 65120	26.65	30.2
65137	1/05/2000	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/01/2013	25.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Test for the presence of lupus anticoagulant not being a service associated with any service to which items 65175, 65176, 65177, 65178 and 65179 apply	19.05	21.55
65142	1/05/2000	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/01/2013	25.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Confirmation or clarification of an abnormal or indeterminate result from a test described in item 65175, by testing a specimen collected on a different day - 1 or more tests	19.05	21.55
65144	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	56.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Platelet aggregation in response to ADP, collagen, 5HT, ristocetin or other substances; or heparin, low molecular weight heparins, heparinoid or other drugs - 1 or more tests	42.45	48.1
65147	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	27.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of anti-Xa activity when monitoring is required for a patient receiving a low molecular weight heparin or heparinoid - 1 test	28.45	32.25
65150	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	70.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation of von Willebrand factor antigen, von Willebrand factor activity (ristocetin cofactor assay), von Willebrand factor collagen binding activity, factor II, factor V, factor VII, factor VIII, factor IX, factor X, factor XI, factor XII, factor XIII, Fletcher factor, Fitzgerald factor, circulating coagulation factor inhibitors other than by Bethesda assay - 1 test (Item is subject to rule 6)	53.2	60.3
65153	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	141.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	2 tests described in item 65150 (Item is subject to rule 6)	106.4	120.6
65156	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	212.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	3 or more tests described in item 65150 (Item is subject to rule 6)	159.6	180.85
65157	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	70.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 65150, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	53.2	60.3
65158	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	70.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Tests described in item 65150, other than that described in 65157, if rendered by a receiving APP - each test to a maximum of 2 tests (Item is subject to rule 6 and 18)	53.2	60.3
65159	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	70.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of circulating coagulation factor inhibitors by Bethesda assay - 1 test	53.2	60.3
65162	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	10.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Examination of a maternal blood film for the presence of fetal red blood cells (Kleihauer test)	7.85	8.9
65165	1/11/1998	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	34.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	Detection and quantitation of fetal red blood cells in the maternal circulation by detection of red cell antigens using flow cytometric methods including (if performed) any test described in item 65070 or 65142	25.85	29.3
65166	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	34.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 65165 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	25.85	29.3
65171	1/05/2000	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2000	1/01/2013	25.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	Test for the presence of antithrombin III deficiency, protein C deficiency, protein S deficiency or activated protein C resistance in a first degree relative of a person who has a proven defect of any of the above - 1 or more tests	19.05	21.55
65175	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	25.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Test for the presence of antithrombin III deficiency, protein C deficiency, protein S deficiency, lupus anticoagulant, activated protein C resistance - where the request for the test(s) specifically identifies that the patient has a history of venous thromboembolism - quantitation by 1 or more techniques - 1 test (Item is subject to Rule 6)	19.05	21.55
65176	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	48.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	2 tests described in item 65175 (Item is subject to rule 6)	36.5	41.4
65177	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	71.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	3 tests described in item 65175 (Item is subject to rule 6)	54	61.2
65178	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	95.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	4 tests described in item 65175 (Item is subject to rule 6)	71.4	80.95
65179	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	118.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	5 tests described in item 65175 (Item is subject to rule 6)	88.9	100.75
65180	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	25.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 65175, if rendered by a receiving APA, where no tests in the item have been rendered by the referring APA - 1 test (Item is subject to rule6 and 18)	19.05	21.55
65181	1/05/2007	[Table]	6	P1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	23.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2010	A test described in item65175, if rendered by a receiving APP, if one or more tests described in the item have been rendered by the referring APP - one test (Item is subject to rule 6 and 18)	17.5	19.85
66500	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	9.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Quantitation in serum, plasma, urine or other body fluid (except amniotic fluid), by any method except reagent tablet or reagent strip (with or without reflectance meter) of: acid phosphatase, alanine aminotransferase, albumin, alkaline phosphatase, ammonia, amylase, aspartate aminotransferase, bicarbonate, bilirubin (total), bilirubin (any fractions), C-reactive protein, calcium (total or corrected for albumin), chloride, creatine kinase, creatinine, gamma glutamyl transferase, globulin, glucose, lactate dehydrogenase, lipase, magnesium, phosphate, potassium, sodium, total protein, total cholesterol, triglycerides, urate or urea - 1 test	7.3	8.25
66503	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	11.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	2 tests described in item 66500	8.75	9.95
66506	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	13.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	3 tests described in item 66500	10.25	11.65
66509	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	15.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	4 tests described in item 66500	11.75	13.35
66512	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	17.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	5 or more tests described in item 66500	13.3	15.05
66517	1/11/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	19.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2010	Quantitation of bile acids in blood in pregnancy. Applicable not more than 3 times in a pregnancy.	14.75	16.75
66518	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Investigation of cardiac or skeletal muscle damage by quantitative measurement of creatine kinase isoenzymes, troponin or myoglobin in blood - testing on 1 specimen in a 24 hour period	15.05	17.05
66519	1/11/2001	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/01/2013	40.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Investigation of cardiac or skeletal muscle damage by quantitative measurement of creatine kinase isoenzymes, troponin or myoglobin in blood - testing on 2 or more specimens in a 24 hour period	30.15	34.15
66522	1/11/2021	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Faecal calprotectin test for the diagnosis of inflammatory bowel disease, if all the following apply: the patient is under 50 years of age; the patient has gastrointestinal symptoms suggestive of inflammatory or functional bowel disease of more than 6 weeks' duration; infectious causes have been excluded; the likelihood of malignancy has been assessed as low; no relevant clinical alarms are present	56.25	63.75
66523	1/11/2021	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Faecal calprotectin test for the diagnosis of inflammatory bowel disease, if all the following apply: the results of a service to which Item66522 applies were inconclusive for the patient (that is, the results showed a faecal calprotectin level of more than 50 µg/g but not more than 100 µg/g); the patient has ongoing gastrointestinal symptoms suggestive of inflammatory or functional bowel disease; the service is requested by a specialist or consultant physician practising as a specialist gastroenterologist; the request indicates that an endoscopic examination is not initially required; no relevant clinical alarms are present	56.25	63.75
66536	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	11.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	Quantitation of HDL cholesterol	8.3	9.4
66539	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Electrophoresis of serum for demonstration of lipoprotein subclasses, if the cholesterol is >6.5 mmol/L and triglyceride >4.0 mmol/L or in the diagnosis of types III and IV hyperlipidaemia - (Item is subject to rule 25)	22.95	26.05
66542	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	14.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2000	Oral glucose tolerance test for the diagnosis of diabetes mellitus that includes: (a)administration of glucose; and (b)at least 2 measurements of blood glucose; and (c)(if performed) any test described in Item 66695	14.25	16.15
66545	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	15.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1999	Oral glucose challenge test in pregnancy for the detection of gestational diabetes that includes: (a)administration of glucose; and (b)1 or 2 measurements of blood glucose; and (c)(if performed) any test in Item 66695	11.85	13.45
66548	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	19.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	Oral glucose tolerance test in pregnancy for the diagnosis of gestational diabetes that includes: (a)administration of glucose; and (b)at least 3 measurements of blood glucose; and (c)any test in Item 66696 (if performed)	14.95	16.95
66551	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	16.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Quantitation of glycated haemoglobin performed in the management of established diabetes (See para P6.2.2 of explanatory notes to this Category)	12.6	14.3
66554	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	16.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Quantitation of glycated haemoglobin performed in the management of pre-existing diabetes where the patient is pregnant - including a service in item 66551 (if performed) - (Item is subject to rule 25)	12.6	14.3
66557	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	9.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of fructosamine performed in the management of established diabetes - each test to a maximum of 4 tests in a 12 month period	7.3	8.25
66560	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	Microalbumin - quantitation in urine	15.1	17.1
66563	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Osmolality, estimation by osmometer, in serum or in urine - 1 or more tests	18.55	21
66566	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	33.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Quantitation of: (a)blood gases (including pCO2, oxygen saturation and pCO2) ; and (b)bicarbonate and pH; including any other measurement (eg. haemoglobin, lactate, potassium or ionised calcium) or calculation performed on the same specimen - 1 or more tests on 1 specimen	25.3	28.65
66569	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	42.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of blood gases, bicarbonate and pH as described in Item 66566 on 2 specimens performed within any 1 day	31.95	36.25
66572	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	51.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of blood gases, bicarbonate and pH as described in Item 66566 on 3 specimens performed within any 1 day	38.7	43.85
66575	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	60.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of blood gases, bicarbonate and pH as described in Item 66566 on 4 specimens performed within any 1 day	45.35	51.4
66578	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	69.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of blood gases, bicarbonate and pH as described in Item 66566 on 5 specimens performed within any 1 day	52.05	58.95
66581	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	78.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of blood gases, bicarbonate and pH as described in Item 66566 on 6 or more specimens performed within any 1 day	58.7	66.55
66584	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	9.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of ionised calcium (except if performed as part of item 66566) - 1 test	7.3	8.25
66587	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	47.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Urine acidification test for the diagnosis of renal tubular acidosis including the administration of an acid load, and pH measurements on 4 or more urine specimens and at least 1 blood specimen	35.7	40.45
66590	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Calculus, analysis of 1 or more	22.95	26.05

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66593	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	18	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Ferritin - quantitation, except if requested as part of iron studies	13.5	15.3
66596	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	32.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Iron studies, consisting of quantitation of: (a)serum iron; and (b)transferrin or iron binding capacity; and (c)ferritin	24.45	27.7
66605	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Vitamins - quantitation of vitamins B1, B2, B3, B6 or Cin blood, urine or other body fluid - 1 or more tests	22.95	26.05
66606	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66605 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18 and 25)	22.95	26.05
66607	1/05/2009	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2013	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Vitamins - quantitation of vitamins A or E in blood, urine or other body fluid - 1 or more tests within a 6 month period	56.85	64.4
66610	1/07/2011	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	75.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	A test described in item 66607 if rendered by a receiving APP - 1 or more tests	56.85	64.4
66623	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	41.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	All qualitative and quantitative tests on blood, urine or other body fluid for: (a)a drug or drugs of abuse (including illegal drugs and legally available drugs taken other than in appropriate dosage); or (b)ingested or absorbed toxic chemicals; including a service described in item 66800, 66803, 66806, 66812 or 66815 (if performed), but excluding: (c)the surveillance of sports people and athletes for performance improving substances; and (d)the monitoring of patients participating in a drug abuse treatment program	31.15	35.3
66626	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Detection or quantitation or both (not including the detection of nicotine and metabolites in smoking withdrawal programs) of a drug, or drugs, of abuse or a therapeutic drug, on a sample collected from a patient participating in a drug abuse treatment program; but excluding the surveillance of sports people and athletes for performance improving substances; including all tests on blood, urine or other body fluid (Item is subject to rule 25)	18.1	20.5
66629	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Beta-2-microglobulin - quantitation in serum, urine or other body fluids - 1 or more tests	15.1	17.1
66632	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Ceeruloplasmin, haptoglobin, or prealbumin - quantitation in serum, urine or other body fluids - 1 or more tests	15.1	17.1
66635	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Alpha-1-antitrypsin - quantitation in serum, urine or other body fluid - 1 or more tests	15.1	17.1
66638	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	49.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Isoelectric focusing or similar methods for determination of alpha-1-antitrypsin phenotype in serum - 1 or more tests	36.8	41.7
66639	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	29.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66638 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	21.9	24.85
66641	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	29.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Electrophoresis of serum or other body fluid to demonstrate: (a)the isoenzymes of lactate dehydrogenase; or (b)the isoenzymes of alkaline phosphatase; including the preliminary quantitation of total relevant enzyme activity - 1 or more tests	21.9	24.85
66642	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	29.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66641 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	21.9	24.85
66644	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	C-1 esterase inhibitor - quantitation	15.15	17.15
66647	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	45.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	C-1 esterase inhibitor - functional assay	33.85	38.35
66650	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	Alpha-fetoprotein, CA-19-9 antigen (CA15.3), CA-125 antigen (CA125), CA-19.9 antigen (CA19-9), cancer associated serum antigen (CASA), carcinoembryonic antigen (CEA), human chorionic gonadotrophin (HCG), neuron specific enolase (NSE), thyroglobulin in serum or other body fluid, in the monitoring of malignancy, or in the detection or monitoring of hepatic tumours, gestational trophoblastic disease or germ cell tumours - quantitation - 1 test (Item is subject to rule 6)	18.3	20.7
66651	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	24.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66650 if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	18.3	20.7
66652	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	20.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66650 if rendered by a receiving APP - other than that described in 66651, if rendered by a receiving APP, 1 test (Item is subject to rule 6 and 18)	15.25	17.3
66653	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	44.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	2 or more tests described in item 66650 (Item is subject to rule 6)	33.45	37.95
66655	1/05/2001	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2001	1/01/2013	20.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Prostate specific antigen - quantitation - 1 of this item in a 12 month period (Item is subject to rule 25)	15.15	17.15
66656	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	Prostate specific antigen - quantitation in the monitoring of previously diagnosed prostatic disease (including a test described in item 66655)	15.15	17.15
66659	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	37.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	Prostate specific antigen - quantitation of 2 or more fractions of PSA and any derived index including (if performed) a test described in item 66656, in the follow up of a PSA result that lies at or above the age related median but below the age related, method specific 97.5% reference limit - 1 of this item in a 12 month period (Item is subject to rule 25)	28	31.75
66660	1/05/2009	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2013	37.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2009	Prostate specific antigen - quantitation of 2 or more fractions of PSA and any derived index including (if performed) a test described in item 66656, in the follow up of a PSA result that lies at or above the age related, method specific 97.5% reference limit, but below a value of 10 ug/L - 4 of this item in a 12 month period. (Item is subject to rule 25)	28	31.75
66662	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	79.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of hormone receptors on proven primary breast or ovarian carcinoma or a metastasis from a breast or ovarian carcinoma or a subsequent lesion in the breast - 1 or more tests	60	68
66663	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	79.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66662 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	60	68
66665	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Lead quantitation in blood or urine (other than for occupational health screening purposes) to a maximum of 3 tests in a 6 month period - each test	22.95	26.05
66666	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66665 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	22.95	26.05
66667	1/11/2000	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	Quantitation of serum zinc in a patient receiving intravenous alimentation - each test	22.95	26.05
66671	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	36.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of serum aluminium in a patient in a renal dialysis program - each test	27.7	31.4
66674	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of: (a)faecal fat; or (b)breath hydrogen in response to loading with disaccharides; 1 or more tests within a 28 day period	30	34
66677	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	8.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Test for trypsin activity in faeces in the investigation of diarrhoea of longer than 6 weeks duration in children under 6 years old	8.4	9.5
66680	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	74.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of disaccharidases and other enzymes in intestinal tissue - 1 or more tests	55.85	63.3
66683	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	74.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Enzymes - quantitation in solid tissue or tissues other than blood elements or intestinal tissue - 1 or more tests	55.85	63.3
66686	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	50.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Performance of 1 or more of the following procedures: (a)growth hormone suppression by glucose loading; (b)growth hormone stimulation by exercise; (c)dexamethasone suppression test; (d)overt collection by iontophoresis for chloride analysis; (e)pharmacological stimulation of growth hormone	38	43.1
66695	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation in blood or urine of hormones and hormone binding proteins - ACTH, aldosterone, androstenedione, C-peptide, calcitonin, cortisol, DHEAS, 11-deoxycortisol, dihydrotestosterone, FSH, gastrin, glucagon, growth hormone, hydroxyprogesterone, insulin, LH, oestradiol, oestrone, progesterone, prolactin, PTH, renin, sex hormone binding globulin, somatomedin C(IGF-1), free or total testosterone, urine steroid fraction or fractions, vasoactive intestinal peptide, - 1 test (Item is subject to rule 6)	22.9	25.95
66696	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66695, if rendered by a receiving APP - where no tests in the item have been rendered by the referring APP (Item is subject to rule 6 and 18)	22.9	25.95
66697	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	13.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Tests described in item 66695, other than that described in 66696, if rendered by a receiving APP - each test to a maximum of 4 tests (Item is subject to rule 6 and 18)	9.9	11.25
66698	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	43.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	2 tests described in item 66695 (Item is subject to rule 6)	32.8	37.15
66701	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	56.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	3 tests described in item 66695 (Item is subject to rule 6)	42.7	48.4
66704	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	70.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	4 tests described in item 66695 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 4 tests specified on the request form or performs 4 tests and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	52.65	59.65
66707	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	83.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	5 or more tests described in item 66695 (Item is subject to rule 6)	62.55	70.85
66711	1/11/2005	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/01/2013	30.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation in saliva of cortisol in: (a)the investigation of Cushing's syndrome; or (b)the management of children with congenital adrenal hyperplasia (Item is subject to rule 6)	22.65	25.65
66712	1/11/2005	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2005	1/01/2013	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Two tests described in item 66711 (Item is subject to rule 6)	32.3	36.6
66714	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 66711, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP (Item is subject to rule 6 and 18)	22.65	25.65
66715	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	12.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Tests described in item 66711, other than that described in 66714, if rendered by a receiving APP, each test to a maximum of 1 test (Item is subject to rule 6 and 18)	9.65	10.95
66716	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	25.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	TSH quantitation	18.8	21.3
66719	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Thyroid function tests (comprising the service described in Item 66716 and either or bothof a test for free thyroxine and a test for free T3) for a patient, if: (a)the patient has a level of TSH that is outside the normal reference range for the particular method of assay used to determine the level; or (b)the request from the requesting medical practitioner indicates that the tests are performed: (i)for the purpose of monitoring thyroid disease in the patient; or (ii)to investigate the sick euthyroid syndrome if the patient is an admitted patient; or (iii)to investigate dementia or psychiatric illness of the patient; or (iv)to investigate amenorrhoea or infertility of the patient; or (v)the request from the requesting medical practitioner indicates that themedical practitionersuspects the patient has a pituitary dysfunction; or (d)the request from the requesting medical practitioner indicates that thepatient is on drugs that interfere with thyroid hormone metabolism or function	26.1	29.6
66722	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	37.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	TSH quantitation described in item 66716 and 1 test described in item 66695 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 2 tests specified on the request form or performs 2 tests and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	28.45	32.25

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66723	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	37.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Tests described in Item 66722, that is, TSH quantitation and 1 test described in 66695, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	28.45	32.25
66724	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	13.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Tests described in Item 66722, if rendered by a receiving APP, other than that described in 66723. It is to include a quantitation of TSH - each test to a maximum of 4 tests described in Item 66695 (Item is subject to rule 6 and 18)	9.9	11.2
66725	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	51.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	TSH quantitation described in Item 66716 and 2 tests described in Item 66695 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 3 tests specified on the request form or performs 3 tests and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	38.3	43.4
66728	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	64.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	TSH quantitation described in Item 66716 and 3 tests described in Item 66695 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 4 tests specified on the request form or performs 4 tests and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	48.15	54.6
66731	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	77.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	TSH quantitation described in Item 66716 and 4 tests described in Item 66695 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 5 tests specified on the request form or performs 5 tests and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	58.05	65.8
66734	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	90.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	TSH quantitation described in Item 66716 and 5 tests described in Item 66695 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs 6 or more tests specified on the request form) (Item is subject to rule 6)	67.95	77
66743	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	Quantitation of alpha-fetoprotein in serum or other body fluids during pregnancy except if requested as part of Items 66750 or 66751	15.1	17.1
66749	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	32.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Amniotic fluid, spectrophotometric examination of, and quantitation of: (a)lecithin/sphingomyelin ratio; or (b)palmitic acid, phosphatidylglycerol or lamellar body phospholipid; or (c)bilirubin, including correction for haemoglobin 1 or more tests	24.75	28.05
66750	1/05/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/01/2013	39.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Quantitation, in pregnancy, of any2 of the following to detect foetal abnormality- total human chorionic gonadotropin (total HCG), free alpha human chorionic gonadotropin (free alpha HCG), free beta human chorionic gonadotropin (free beta HCG), pregnancy associated plasma protein A (PAPP-A), unconjugated oestriol (uE3), alpha-fetoprotein (AFP) - including (if performed) a service described intem 73527or 73529 - Applicable not more than once in a pregnancy	29.85	33.8
66751	1/05/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/01/2013	51.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation, in pregnancy, of any three or more tests described in 66750 (Item is subject to rule 25)	41.45	47
66752	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Quantitation of acetoacetate, beta-hydroxybutyrate, citrate, oxalate, total free fatty acids, cysteine, homocysteine, cystine, lactate, pyruvate or other amino acids and hydroxyproline (except if performed as part of Item 66773 or 66776) - 1 test	18.55	21
66755	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	38.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	2 or more tests described in Item 66752	29.15	33.05
66756	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	98.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation of 10 or more amino acids for the diagnosis of inborn errors of metabolism - up to 4 tests in a 12 month period on excitable tissue, plasma, CSF and urine.	73.75	83.6
66757	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	98.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation of 10 or more amino acids for monitoring of previously diagnosed inborn errors of metabolism in a blood spot	73.75	83.6
66758	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Quantitation of angiotensin converting enzyme, or cholinesterase - 1 or more tests	18.55	21
66761	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	13.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Test for reducing substances in faeces by any method (except reagent strip or dipstick)	9.9	11.2
66764	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	8.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Examination for faecal occult blood (including tests for haemoglobin and its derivatives in the faeces except by reagent strip or dip stick methods) with a maximum of 3 examinations on specimens collected on separate days in a 28 day period	6.7	7.6
66767	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	17.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	2 examinations described in Item 66764 performed on separately collected and identified specimens	13.4	15.2
66770	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	26.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	3 examinations described in Item 66764 performed on separately collected and identified specimens	20.05	22.7
66773	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Quantitation of products of collagen breakdown or formation for the monitoring of patients with proven low bone mineral density, and if performed, a service described in Item 66752 - 1 or more tests (Low bone densitometry is defined in the explanatory notes to Category 2 - Diagnostic Procedures and Investigations of the Medicare Benefits Schedule)	18.5	21
66776	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	24.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Quantitation of products of collagen breakdown or formation for the monitoring of patients with metabolic bone disease or Paget's disease of bone, and if performed, a service described in Item 66752 - 1 or more tests	18.5	21
66779	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	39.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Adrenaline, noradrenaline, dopamine, histamine, hydroxyindoleacetic acid (5HIAA), hydroxymethoxymandelic acid (HMMA), homovanillic acid (HVA), metanephrines, methoxyphenoxyethylene glycol (MHPG), phenylacetic acid (PAA) or serotoninquantitation - 1 or more tests	30	34
66780	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	39.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66779 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	30	34
66782	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	13.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Porphyrins or porphyrins precursors - detection in plasma, red cells, urine or faeces - 1 or more tests	9.9	11.2
66783	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	13.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66782 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	9.9	11.2
66785	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	39.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Porphyrins or porphyrins precursors - quantitation in plasma, red cells, urine or faeces - 1 test (Item is subject to rule 6)	30	34
66788	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	65.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Porphyrins or porphyrins precursors - quantitation in plasma, red cells, urine or faeces - 2 or more tests (Item is subject to rule 6)	49.4	56
66789	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	39.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66785 if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	30	34
66790	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	19.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66785 other than that described in 66789, if rendered by a receiving APP - to a maximum of 1 test (Item is subject to rule 6 and 18)	19.45	22.05
66791	1/11/1998	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	74.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Porphyrin biosynthetic enzymes - measurement of activity in blood cells or other tissues - 1 or more tests	55.85	63.3
66792	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	74.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66791 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	55.85	63.3
66800	1/11/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	18.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	Quantitation in blood, urine or other body fluid by any method (except reagent tablet or reagent strip) of any of the following being used therapeutically by the patient from whom the specimen was taken: amikacin, carbamazepine, digoxin, disopyramide, ethanol, ethosuximide, gentamicin, lithium, lignocaine, netilmicin, paracetamol, phenobarbitone, primidone, phenytoin, procainamide, quinidine, salicylate, theophylline, tobramycin, valproate or vancomycin - 1 test (Item to be subject to rule 6)	13.65	15.45
66803	1/11/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	30.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	2 tests described in Item 66800 (Item is subject to rule 6)	22.9	25.95
66804	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	18.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66800 if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	13.65	15.45
66805	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	18.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66800 other than that described in 66804, if rendered by a receiving APP - each test to a maximum of 2 tests (Item is subject to rule 6 and 18)	9.3	10.5
66806	1/11/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	41.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	3 tests described in Item 66800 (Item is subject to rule 6)	31.4	35.6
66812	1/11/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	Quantitation, not elsewhere described in this Table by any method or methods, in blood, urine or other body fluid, of a drug being used therapeutically by the patient from whom the specimen was taken - 1 test (This fee applies where 1 laboratory performs the only test specified on the request form or performs 1 test and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	26.1	29.6
66815	1/11/2003	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	59.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2003	2 tests described in Item 66812 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 2 tests specified on the request form or performs 2 tests and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	44.7	50.65
66816	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	34.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66812 if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	26.1	29.6
66817	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	24.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66812, other than that described in 66816, if rendered by a receiving APP - to a maximum of 1 test (Item is subject to rule 6 and 18)	18.6	21.05
66819	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Quantitation of copper, manganese, selenium, or zinc (except if Item 66667 applies), in blood, urine or other body fluid - 1 test. (Item is subject to rule 6, 22 and 25)	22.95	26.05
66820	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66819 if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6, 18, 22 and 25)	22.95	26.05
66821	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	21.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66819 other than that described in 66820 if rendered by a receiving APP to a maximum of 1 test (Item is subject to rule 6, 18,22 and 25)	16.35	18.55
66822	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	52.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Quantitation of copper, manganese, selenium, or zinc (except if Item 66667 applies), in blood, urine or other body fluid - 2 or more tests. (Item is subject to rule 6, 22 and 25)	39.35	44.6
66825	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation of aluminium (except if Item 66671 applies), arsenic, beryllium, cadmium, chromium, gold, mercury, nickel, or strontium, in blood, urine or other body fluid or tissue - 1 test. To a maximum of 3 of this item in a 6 month period (Item is subject to rule 6, 22 and 25)	22.95	26.05
66826	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	30.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66825 if rendered by a receiving APP where no tests have been rendered by the referring APP - 1 test (Item is subject to rules 6, 18, 22 and 25)	22.95	26.05
66827	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	21.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 66825, other than that described in 66826, if rendered by a receiving APP to a maximum of 1 test (Item is subject to rules 6, 18, 22 and 25)	16.35	18.55
66828	1/05/2007	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	52.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation of aluminium (except if Item 66671 applies), arsenic, beryllium, cadmium, chromium, gold, mercury, nickel, or strontium, in blood, urine or other body fluid or tissue - 2 or more tests. To a maximum of 3 of this item in a 6 month period (Item is subject to rule 6, 22 and 25)	39.35	44.6

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66830	1/07/2008	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/01/2013	58.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	Quantitation of BNP or NT-proBNP for the diagnosis of heart failure in patients presenting with dyspnoea to a hospital Emergency Department (Item is subject to rule 25)	43.9	49.75
66831	1/11/2008	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	30.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Quantitation of copper or iron in liver tissue biopsy	23.25	26.35
66832	1/11/2008	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	30.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	A test described in Item 66831 if rendered by a receiving APP (Item is subject to rule 18A and 22)	23.25	26.35
66833	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	30.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	25-hydroxyvitamin D, quantification in serum, for the investigation of a patient who: (a)has signs or symptoms of osteoporosis or osteomalacia; or (b)has increased alkaline phosphatase and otherwise normal liver function tests; or (c)has hyperparathyroidism, hypo- or hypercalcaemia, or hypophosphataemia; or (d)is suffering from malabsorption (for example, because the patient has cystic fibrosis, short bowel syndrome, inflammatory bowel disease or untreated coeliac disease, or has had bariatric surgery); or (e) has deeply pigmented skin, or chronic and severe lack of sun exposure for cultural, medical, occupational or residential reasons; or (f)is taking medication known to decrease 25OH-D levels (for example, anticonvulsants); or (g)has chronic renal failure or is a renal transplant recipient; or (h)is less than 16 years of age and has signs or symptoms of rickets; or (i)is an infant whose mother has established vitamin D deficiency; or (j)is a exclusively breastfed baby and has at least one other risk factor mentioned in a paragraph in this item; or (k)has a sibling who is less than 16 years of age and has vitamin D deficiency	22.55	25.55
66834	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	30.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	A test described in Item 66833 if rendered by a receiving APP (Item is subject to Rule 18)	22.55	25.55
66835	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	39.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	1, 25-dihydroxyvitamin D - quantification in serum, if the request for the test is made by, or on advice of, the specialist or consultant physician managing the treatment of the patient	29.3	33.2
66836	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	39.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	1, 25-dihydroxyvitamin D-quantification in serum, if: (a)the patient has hypercalcaemia; and (b)the request for the test is made by a general practitioner managing the treatment of the patient	29.3	33.2
66837	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	39.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	A test described in Item 66835 or 66836 if rendered by a receiving APP (Item is subject to Rule 18)	29.3	33.2
66838	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	23.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Serum vitamin B12 test (Item is subject to Rule 25)	17.7	20.1
66839	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	42.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Quantification of vitamin B12 markers such as holoTranscobalamin or methylmalonic acid, where initial serum vitamin B12 result is low or equivocal	32.25	36.55
66840	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	23.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Serum folate test and, if required, red-cell folate test for a patient at risk of folate deficiency, including patients with malabsorption conditions, macrocytic anaemia or coeliac disease	17.7	20.1
66841	1/11/2014	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	16.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Quantitation of HbA1c (glycated haemoglobin) performed for the diagnosis of diabetes in asymptomatic patients at high risk.(Item is subject to rule 25)	12.6	14.3
66900	1/05/2009	[Table]	6	P2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2013	77.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	CARBON-LABELLED UREA BREATH TEST using oral C-13 or C-14 urea, including the measurement of exhaled 13CO2 or 14CO2 (except if itself is a service for either:- (a)the confirmation of Helicobacter pylori colonisation OR (b)the monitoring of the success of eradication of Helicobacter pylori.	58.25	66.05
69300	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	12.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Microscopy of wet film microscopy other than 69302, from 1 or more sites, obtained directly from a patient (not cultures) including (a)differential cell count (if performed); or (b)examination for dermatophytes; or (c)pinworm examination; or (d)stained preparation or preparations using any relevant stain or stains - 1 or more tests	9.4	10.65
69303	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	22	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Culture and (if performed) microscopy to detect pathogenic micro-organisms from nasal swabs, throat swabs, rectal swabs and vaginal swabs (excluding swabs taken for epidemiological surveillance), including (if performed): (a)pathogen identification and antibiotic susceptibility testing; or (b)a service described in Item 69300, specimens from 1 or more sites	16.5	18.7
69306	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	33.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microscopy and culture to detect pathogenic micro-organisms from skin or other superficial sites, including (if performed): (a)pathogen identification and antibiotic susceptibility testing; or (b)a service described in Items 69300, 69303, 69312, 69318; 1 or more tests on 1 or more specimens	25.35	28.7
69309	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	48.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Microscopy and culture to detect dermatophytes and other fungi causing cutaneous disease from skin scrapings, skin biopsies, hair and nails (excluding swab specimens) and including (if performed): (a)the detection of antigens not elsewhere specified in this Schedule; or (b)a service described in Items 69300, 69303, 69306, 69312, 69318; 1 or more tests on 1 or more specimens	36.15	40.95
69312	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	33.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microscopy and culture to detect pathogenic micro-organisms from urethra, vagina, cervix or rectum (except for faecal pathogens), including (if performed): (a)pathogen identification and antibiotic susceptibility testing; or (b) a service described in Items 69300, 69303, 69306 and 69318; 1 or more tests on 1 or more specimens	25.35	28.7
69316	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	28.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Detection of Chlamydia trachomatis by any method - 1 test (Item is subject to rule 26)	21.5	24.4
69317	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	35.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	1 test described in Item 69494 and a test described in 69316 (Item is subject to rule 26)	26.9	30.5
69318	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	33.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microscopy and culture to detect pathogenic micro-organisms from specimens of sputum (except when part of Items 69324, 69327 and 69330), including (if performed): (a) pathogen identification and antibiotic susceptibility testing; or (b)a service described in Items 69300, 69303, 69306 and 69312; 1 or more tests on 1 or more specimens	25.35	28.7
69319	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	42.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	2 tests described in Item 69494 and a test described in 69316. (Item is subject to rule 26)	32.25	36.55
69321	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	48.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microscopy and culture of post-operative wounds, aspirates of body cavities, synovial fluid, CSF or operative or biopsy specimens, for the presence of pathogenic micro-organisms involving aerobic and anaerobic cultures and the use of different culture media, and including (if performed): (a)pathogen identification and antibiotic susceptibility testing; or (b)a service described in Item 69300, 69303, 69306, 69312 or 69318; specimens from 1 or more sites	36.15	40.95
69324	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	43	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Microscopy (with appropriate stains) and culture for mycobacteria - 1 specimen of sputum, urine, or other body fluid or 1 operative or biopsy specimen, including (if performed): (a)microscopy and culture of other bacterial pathogens isolated as a result of this procedure; or (b)pathogen identification and antibiotic susceptibility testing; including a service described in Item 69300	32.25	36.55
69325	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	43	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69324 if rendered by a receiving APP (Item is subject to rule 18)	32.25	36.55
69327	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	Microscopy (with appropriate stains) and culture for mycobacteria - 2 specimens of sputum, urine, or other body fluid or 2 operative or biopsy specimens, including (if performed): (a)microscopy and culture of other bacterial pathogens isolated as a result of this procedure; or (b)pathogen identification and antibiotic susceptibility testing; including a service mentioned in Item 69300	63.75	72.25
69328	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69327 if rendered by a receiving APP (Item is subject to rule 18)	63.75	72.25
69330	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	128	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2000	Microscopy (with appropriate stains) and culture for mycobacteria - 3 specimens of sputum, urine, or other body fluid or 3 operative or biopsy specimens, including (if performed): (a)microscopy and culture of other bacterial pathogens isolated as a result of this procedure; or (b)pathogen identification and antibiotic susceptibility testing; including a service mentioned in Item 69300	96	108.8
69331	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	128	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69330 if rendered by a receiving APP (Item is subject to rule 18)	96	108.8
69333	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Urine examination (including serial examinations) by any means other than simple culture by dip slide, including: (a)cell count; and (b)culture; and (c)colony count; and (d)(if performed) stained preparations; and (e)(if performed) identification of cultured pathogens; and (f)(if performed) antibiotic susceptibility testing; and (g)(if performed) examination for pH, specific gravity, blood, protein, urobilinogen, sugar, acetone or bile salts	15.45	17.5
69336	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	33.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2020	Microscopy of faeces for ova, cysts and parasites that must include a concentration technique, and the use of fixed stains or antigen detection for cryptosporidia and giardia - including (if performed) a service described in Item 69300 - 1 of this item in any 7 day period	25.1	28.45
69339	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	19.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	Microscopy of faeces for ova, cysts and parasites using concentration techniques examined subsequent to Item 69336 on a separately collected and identified specimen collected within 7 days of the examination described in 69336 - 1 examination in any 7 day period	14.35	16.25
69345	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	52.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2003	Culture and (if performed) microscopy without concentration techniques of faeces for faecal pathogens, using at least 2 selective or enrichment media and culture in at least 2 different atmospheres including (if performed): (a)pathogen identification and antibiotic susceptibility testing; and (b)the detection of clostridial toxins; and (c)a service described in Item 69302; - 1 examination in any 7 day period	39.7	45
69354	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	30.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Blood culture for pathogenic micro-organisms (other than viruses), including sub-cultures and (if performed): (a)identification of any cultured pathogen;and (b)necessary antibiotic susceptibility testing; to a maximum of 3 sets of cultures - 1 set of cultures	23.1	26.15
69357	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	61.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	2 sets of cultures described in Item 69354	46.1	52.25
69360	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	3 sets of cultures described in Item 69354	69.15	78.4
69363	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	28.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Detection of Clostridium difficile or Clostridium difficile toxin (except if a service described in Item 69345 has been performed): - one or more tests	21.5	24.4
69378	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Quantitation of HIV viral RNA load in plasma or serum in the monitoring of a HIV sero-positive patient not on antiretroviral therapy - 1 or more tests	135.2	153.25
69379	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69378 if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	135.2	153.25
69380	1/07/2011	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	770.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Genotypic testing for HIV antiretroviral resistance in a patient with confirmed HIV infection if the patient's viral load is greater than 1,000 copies per ml at any of the following times: (a)at presentation; or (b)before antiretroviral therapy; or (c)when treatment with combination antiretroviral agents fails; maximum of 2 tests in a 12 month period	577.75	682.4
69381	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Quantitation of HIV viral RNA load in plasma or serum in the monitoring of antiretroviral therapy in a HIV sero-positive patient - 1 or more tests on 1 or more specimens	135.2	153.25
69382	1/03/1999	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/03/1999	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Quantitation of HIV viral RNA load in cerebrospinal fluid in a HIV sero-positive patient - 1 or more tests on 1 or more specimens	135.2	153.25
69383	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69381 if rendered by a receiving APP - 1 or more tests on 1 or more specimens (Item is subject to rule 18)	135.2	153.25
69384	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	15.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Quantitation of 1 antibody to microbial antigens not elsewhere described in the Schedule - 1 test (This fee applies where a laboratory performs the only antibody test specified on the request form or performs 1 test and refers the rest to the laboratory of a separate APA) (Item is subject to rule 6)	11.75	13.35

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69387	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	29	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	2 tests described in item 69384 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 2 estimations specified on the request form or performs 2 of the antibody estimations specified on the request form and refers the remainder to the laboratory of a separate APA) (Item is subject to rule 6)	21.75	24.65
69390	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	42.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	3 tests described in item 69384 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 3 estimations specified on the request form or performs 3 of the antibody estimations specified on the request form and refers the remainder to the laboratory of a separate APA) (Item is subject to rule 6)	31.8	36
69393	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	55.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	4 tests described in item 69384 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 4 estimations specified on the request form or performs 4 of the antibody estimations specified on the request form and refers the remainder to the laboratory of a separate APA) (Item is subject to rule 6)	41.8	47.35
69396	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	69.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	5 or more tests described in item 69384 (This fee applies where 1 laboratory, or more than 1 laboratory belonging to the same APA, performs the only 5 estimations specified on the request form or performs 5 of the antibody tests specified on the request form and refers the remainder to the laboratory of a separate APA) (Item is subject to rule 6)	51.85	58.75
69400	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	15.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 69384, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rules 6 and 18)	11.75	13.35
69401	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	13.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	A test described in item 69384, other than that described in 69400, if rendered by a receiving APP - each test to a maximum of 4 tests (Item is subject to rule 6, 18 and 18A)	10.05	11.35
69405	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	15.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microbiological serology during a pregnancy (except in the investigation of a clinically apparent intercurrent microbial illness or close contact with a patient suffering from parvovirus infection or varicella during that pregnancy) including: (a)the determination of 1 of the following - rubella immune status, specific syphilis serology, carriage of Hepatitis B, Hepatitis C antibody, HIV antibody and (b)(if performed) a service described in 1 or more of items 69384, 69475, 69478 and 69481	11.75	13.35
69408	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	29	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microbiological serology during a pregnancy (except in the investigation of a clinically apparent intercurrent microbial illness or close contact with a patient suffering from parvovirus infection or varicella during that pregnancy) including: (a)the determination of 2 of the following - rubella immune status, specific syphilis serology, carriage of Hepatitis B, Hepatitis C antibody, HIV antibody and (b)(if performed) a service described in 1 or more of items 69384, 69475, 69478 and 69481	21.75	24.65
69411	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	42.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microbiological serology during a pregnancy (except in the investigation of a clinically apparent intercurrent microbial illness or close contact with a patient suffering from parvovirus infection or varicella during that pregnancy) including: (a)the determination of 3 of the following - rubella immune status, specific syphilis serology, carriage of Hepatitis B, Hepatitis C antibody, HIV antibody and (b)(if performed) a service described in 1 or more of items 69384, 69475, 69478 and 69481	31.8	36
69413	1/11/2003	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	55.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2005	Microbiological serology during a pregnancy (except in the investigation of a clinically apparent intercurrent microbial illness or close contact with a patient suffering from parvovirus infection or varicella during that pregnancy) including: (a)the determination of 4 of the following - rubella immune status, specific syphilis serology, carriage of Hepatitis B, Hepatitis C antibody, HIV antibody and (b)(if performed) a service described in 1 or more of items 69384, 69475, 69478 and 69481	41.8	47.35
69415	1/11/2005	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	16/08/2005	1/01/2013	69.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Microbiological serology during a pregnancy (except in the investigation of a clinically apparent intercurrent microbial illness or close contact with a patient suffering from parvovirus infection or varicella during that pregnancy) including: (a)the determination of all 5 of the following - rubella immune status, specific syphilis serology, carriage of Hepatitis B, Hepatitis C antibody, HIV antibody and (b)(if performed) a service described in 1 or more of items 69384, 69475, 69478 and 69481	51.85	58.75
69445	1/11/2000	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2000	1/01/2013	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2007	Detection of Hepatitis C viral RNA in a patient undertaking antiviral therapy for chronic HCV hepatitis by using a service described in Item 69499 - 1 test. To a maximum of 4 of this item in a 12 month period (Item is subject to rule 25)	69.15	78.4
69451	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69445 if rendered by a receiving APP - 1 test. (Item is subject to rule 18 and 25)	69.15	78.4
69471	1/11/1998	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	34.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2017	Test of cell-mediated immune response in blood for the detection of latent tuberculosis by interferon gamma release assay (IGRA) in the following people: (a) a person who has been exposed to a confirmed case of active tuberculosis; (b) a person who is infected with human immunodeficiency virus; (c) a person who is to commence, or has commenced, tumour necrosis factor (TNF) inhibitor therapy; (d) a person who is to commence, or has commenced, renal dialysis; (e) a person with silicosis; (f) a person who is, or is about to become, immunosuppressed because of a disease, or a medical treatment, not mentioned in paragraph(s) to (e)	26.2	29.7
69472	1/11/2001	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/01/2013	15.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	Detection of antibodies to Epstein Barr Virus using specific serology - 1 test	11.75	13.35
69474	1/11/2001	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2001	1/01/2013	28.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2001	Detection of antibodies to Epstein Barr Virus using specific serology - 2 or more tests	21.5	24.4
69475	1/11/2002	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	15.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	One test for hepatitis antigen or antibodies to determine immune status or viral carriage following exposure or vaccination to Hepatitis A, Hepatitis B, Hepatitis C or Hepatitis D (Item subject to rule 11)	11.75	13.35
69478	1/11/2002	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	29.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	2 tests described in 69475 (Item subject to rule 11)	21.95	24.9
69479	1/04/2020	[Table]	6	P3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2020	1/01/2022	42.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Detection of a SARS-CoV-2 nucleic acid 1 or more tests if: (a) the person is a private patient in a recognised hospital and the fee charged for the service does not exceed the schedule fee; or (b) the person receives a bulk-billed service from a prescribed laboratory as described in 4.1 of the Pathology Services Table	31.9	36.15
69480	1/04/2020	[Table]	6	P3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2020	1/01/2022	85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Detection of a SARS-CoV-2 nucleic acid 1 or more tests if: (a) the person is a private patient in a hospital other than a recognised hospital and the fee charged for the service does not exceed the schedule fee; or (b) the person receives a bulk-billed service not covered by item 69479	63.75	72.25
69481	1/11/2002	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	40.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Investigation of infectious causes of acute or chronic hepatitis - 3 tests for hepatitis antibodies or antigens, (Item subject to rule 11)	30.45	34.5
69482	1/07/2008	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/01/2013	102.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	Quantitation of Hepatitis B viral DNA in patients who are Hepatitis B surface antigen positive and have chronic hepatitis B, but are not receiving antiviral therapy - 1 test (Item is subject to rule 25)	114.1	129.3
69483	1/07/2008	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/01/2013	102.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	Quantitation of Hepatitis B viral DNA in patients who are Hepatitis B surface antigen positive and who have chronic hepatitis B and are receiving antiviral therapy - 1 test (Item is subject to rule 25)	114.1	129.3
69484	1/11/2002	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	17.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2008	Supplementary testing for Hepatitis B surface antigen or Hepatitis C antibody using a different assay on the specimen which yielded a reactive result on initial testing (Item is subject to rule 18)	12.85	14.55
69488	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Quantitation of HCV RNA load in plasma or serum in: (a) the pre-treatment evaluation,of a patient with chronic HCV hepatitis, for antiviral therapy;or (b) the assessment of efficacy of antiviral therapy for such a patient (including a service in Item 69499 or 69491) (Item is subject to rule 18 and 25)	135.2	153.25
69489	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	180.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69488 if rendered by a receiving APP (Item is subject to rule 18 and 25)	135.2	153.25
69491	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	204.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Nucleic acid amplification and determination of Hepatitis C virus (HCV) genotype if the patient is HCV RNA positive and is being evaluated for antiviral therapy of chronic HCV hepatitis. To a maximum of 1 of this item in a 12 month period	153.6	176.1
69492	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	204.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69491 if rendered by a receiving APP - 1 test(Item is subject to rule 18 and 25)	153.6	176.1
69494	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	28.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Detection of a virus or microbial antigen or microbial nucleic acid (not elsewhere specified) 1 test (Item is subject to rule 6 and 26)	21.5	24.4
69495	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	35.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	2 tests described in 69494 (Item is subject to rule 6 and 26)	26.9	30.5
69496	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	43.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	3 or more tests described in 69494 (Item is subject to rule 6 and 26)	32.3	36.6
69497	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	28.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69494, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6, 18 and 26)	21.5	24.4
69498	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	7.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69494, other than that described in 69497, if rendered by a receiving APP - each test to a maximum of 2 tests (Item is subject to rule 6, 18 and 26)	5.4	6.15
69499	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Detection of Hepatitis C viral RNA if at least 1 of the following criteria is satisfied: (a)the patient is Hepatitis C seropositive; (b)the patient's serological status is uncertain after testing; (c)the test is performed for the purpose of: (i)determining the Hepatitis C status of an immunosuppressed or immunocompromised patient; or (ii)the detection of acute Hepatitis C prior to seroconversion where considered necessary for the clinical management of the patient; To a maximum of 1 of this item in a 12 month period (Item is subject to rule 19 and 25)	69.15	78.4
69500	1/05/2007	[Table]	6	P3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	92.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 69499 if rendered by a receiving APP - 1 test (Item is subject to rule 18,19 and 25)	69.15	78.4
73057	1/11/1998	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	32.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Electrophoresis, quantitative and qualitative, of serum, urine or other body fluid all collected within a 28 day period, to demonstrate: (a)protein classes; or (b)presence and amount of paraprotein; including the preliminary quantitation of total protein, albumin and globulin - 1 specimen type	24.7	28
73058	1/11/1998	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	50.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Examination as described in Item 73057 of 2 or more specimen types	37.9	42.95
73059	1/11/1998	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	35.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Immunofixation or immunoelectrophoresis or isoelectric focusing of: (a)urine for detection of Bence Jones proteins; or (b)serum, plasma or other body fluid; and characterisation of a paraprotein or cryoglobulin- examination of 1 specimen type (eg. serum, urine or CSF)	26.75	30.35
73060	1/11/1998	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	44.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Examination as described in Item 73059 of 2 or more specimen types	33.05	37.45
73062	1/11/1998	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	44.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Electrophoresis and immunofixation or immunoelectrophoresis or isoelectric focussing of CSF for the detection of oligoclonal bands and including if required electrophoresis of the patient's serum for comparison purposes - 1 or more tests	33.05	37.45
73064	1/11/1998	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	20.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/1998	Detection and quantitation of cryoglobulins or cryofibrinogen - 1 or more tests	15.6	17.65
73066	1/11/2002	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	14.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	Quantitation of total immunoglobulin A by any method in serum, urine or other body fluid - 1 test	10.95	12.4

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71068	1/11/2002	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	14.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Quantitation of total immunoglobulin G by any method in serum, urine or other body fluid - 1 test	10.95	12.4
71069	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	22.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	2 tests described in items 71066, 71068, 71072 or 71074	17.1	19.35
71071	1/09/1992	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	30.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	3 or more tests described in items 71066, 71068, 71072 or 71074	23.25	26.35
71072	1/11/2002	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	14.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Quantitation of total immunoglobulin M by any method in serum, urine or other body fluid - 1 test	10.95	12.4
71073	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	106.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2005	Quantitation of all 4 immunoglobulin G subclasses	79.65	90.25
71074	1/11/2002	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	14.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Quantitation of total immunoglobulin D by any method in serum, urine or other body fluid - 1 test	10.95	12.4
71075	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	23	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Quantitation of immunoglobulin E (total), 1 test. (Item is subject to rule 25)	17.25	19.55
71076	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	106.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	A test described in item 71073 if rendered by a receiving APP - 1 test (Item is subject to rule 18)	79.65	90.25
71077	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	27.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Quantitation of immunoglobulin E (total) in the follow up of a patient with proven immunoglobulin-E-secreting myeloma, proven congenital immunodeficiency or proven allergic bronchopulmonary aspergillosis, 1 test. (Item is subject to rule 25)	20.3	23
71079	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	26.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Detection of specific immunoglobulin E antibodies to single or multiple potential allergens, 1 test (Item is subject to rule 25)	20.1	22.8
71081	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	40.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Quantitation of total haemolytic complement	30.45	34.5
71083	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	20.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Quantitation of complement components C3 and C4 or properdin factor B - 1 test	15.15	17.15
71085	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	28.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	2 tests described in item 71083	21.75	24.65
71087	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	37.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	3 or more tests described in item 71083	28.3	32.05
71089	1/09/1992	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	29.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Quantitation of complement components or breakdown products of complement proteins not elsewhere described in an item in this Schedule - 1 test (Item is subject to rule 6)	21.9	24.8
71090	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	29.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	A test described in item 71089, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	21.9	24.8
71091	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	52.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	2 tests described in item 71089 (Item is subject to rule 6)	39.65	44.95
71092	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	23.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Tests described in item 71090, other than that described in 71090, if rendered by a receiving APP - each test to a maximum of 2 tests (Item is subject to rule 6 and 18)	17.8	20.15
71093	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	76.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	3 or more tests described in item 71089 (Item is subject to rule 6)	57.35	65
71095	1/11/1997	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1997	1/01/2013	40.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1997	Quantitation of serum or plasma eosinophil cationic protein, or both, to a maximum of 3 assays in 1 year, for monitoring the response to therapy in glucocorticoid-treated asthma, in a child aged less than 12 years	30.45	34.5
71096	1/05/2007	ITable]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	40.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in item 71095 if rendered by a receiving APP. (Item is subject to rule 18)	30.45	34.5
71097	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	24.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Antinuclear antibodies - detection in serum or other body fluids, including quantitation if required	18.35	20.8
71099	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	26.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Double-stranded DNA antibodies - quantitation by 1 or more methods other than the Crithidia method	19.9	22.55
71101	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	17.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Antibodies to 1 or more extractable nuclear antigens - detection in serum or other body fluids	13.05	14.8
71103	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	52.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Characterisation of an antibody detected in a service described in item 71101 (including that service)	39.05	44.25
71106	1/07/1994	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/07/1994	1/01/2013	11.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Rheumatoid factor - detection by any technique in serum or other body fluids, including quantitation if required	8.5	9.65
71119	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	17.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Antibodies to tissue antigens not elsewhere specified in this Table - detection, including quantitation if required, of 1 antibody	13.05	14.75
71121	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	20.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Detection of 2 antibodies specified in item 71119	15.6	17.7
71123	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	24.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Detection of 3 antibodies specified in item 71119	18.2	20.65
71125	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	27.65	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Detection of 4 or more antibodies specified in item 71119	20.75	23.55
71127	1/09/1992	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	176.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2005	Functional tests for lymphocytes - quantitation other than by microscopy of: (a)proliferation induced by 1 or more mitogens; or (b)proliferation induced by 1 or more antigens; or (c)estimation of 1 or more mixed lymphocyte reactions; including a test described in item 65066 or 65070 (if performed). 1 of this item to a maximum of 2 in a 12 month period	132.3	149.9
71129	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	217.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	2 tests described in item 71127	163.4	185.2
71131	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	259.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	3 or more tests described in item 71127	194.55	220.45
71133	1/11/2002	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	10.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2002	Investigation of recurrent infection by qualitative assessment for the presence of defects in oxidative pathways in neutrophils by the nitroblue tetrazolium (NBT) reduction test	7.8	8.85
71134	1/11/2002	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	104.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Investigation of recurrent infection by quantitative assessment of oxidative pathways by flow cytometric technique, including a test described in 71131 (if performed)	78.05	88.45
71135	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	207.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2005	Quantitation of neutrophil function, comprising at least 2 of the following: (a)chemotaxis; (b)phagocytosis; (c)oxidative metabolism; (d)bactericidal activity; including any test described in items 65066, 65070, 71133 or 71134 (if performed), 1 of this item to a maximum of 2 in a 12 month period	156	176.8
71137	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	30.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2005	Quantitation of cell-mediated immunity by multiple antigen delayed type hypersensitivity intradermal skin testing using a minimum of 7 antigens, 1 of this item to a maximum of 2 in a 12 month period	22.7	25.75
71139	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	104.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2004	Characterisation of 3 or more leucocyte surface antigens by immunofluorescence or immunoenzyme techniques to assess lymphoid or myeloid cell populations, including a total lymphocyte count or total leucocyte count by any method, on 1 or more specimens of blood, CSF or serous fluid	78.05	88.45
71141	1/09/1992	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	197.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/1992	Characterisation of 3 or more leucocyte surface antigens by immunofluorescence or immunoenzyme techniques to assess lymphoid or myeloid cell populations on 1 or more disaggregated tissue specimens	148.05	167.75
71143	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	260	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1999	Characterisation of 6 or more leucocyte surface antigens by immunofluorescence or immunoenzyme techniques to assess lymphoid or myeloid cell populations for the diagnosis(but not monitoring) of an immunological or haematological malignancy, including a service described in 1 or both of items 71139 and 71141 (if performed), on a specimen of blood, CSF, serous fluid or disaggregated tissue	195	221
71145	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	404.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1999	Characterisation of 6 or more leucocyte surface antigens by immunofluorescence or immunoenzyme techniques to assess lymphoid or myeloid cell populations for the diagnosis (but not monitoring) of an immunological or haematological malignancy, including a service described in 1 or more of items 71139, 71141 and 71143 (if performed), on 2 or more specimens of disaggregated tissues or 1 specimen of disaggregated tissue and 1 or more specimens of blood, CSF or serous fluid	318.4	360.85
71146	1/05/2004	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2004	1/01/2013	104.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2004	Enumeration of CD34+ cells, only for the purposes of autologous or directed allogeneic haemopoietic stem cell transplantation, including a total white cell count on the pheresis collection	78.05	88.45
71147	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	40.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	HLA-B27 typing (Item is subject to rule 27)	30.45	34.5
71148	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	40.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	A test described in Item 71147 if rendered by a receiving APP. (Item is subject to rule 18 and 27)	30.45	34.5
71149	1/09/1992	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	108.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Complete tissue typing for 6 HLA-A and HLA-B Class I antigens (including any separation of leucocytes), including (if performed) a service described in item 71147	81.2	92.05
71151	1/09/1992	[Table]	6	P4	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/09/1992	1/01/2013	118.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/1992	Tissue typing for HLA-DR, HLA-DP and HLA-DQ Class II antigens (including any separation of leucocytes) - phenotyping or genotyping of 2 or more antigens	89.15	101.05
71153	1/05/2001	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2001	1/01/2013	34.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Investigations in the assessment or diagnosis of systemic inflammatory disease or vasculitis - antineutrophil cytoplasmic antibody immunofluorescence (ANCA test), antineutrophil proteinase 3 antibody (PR-3 ANCA test), antimyeloperoxidase antibody (MPO ANCA test) or antiglomerular basement membrane antibody (GBM test) - detection of 1 antibody (Item is subject to rule 6 and 23)	25.95	29.4
71154	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	34.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	A test described in Item 71153, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test. (Item is subject to rule 6, 18 and 23)	25.95	29.4
71155	1/05/2001	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2001	1/01/2013	47.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Detection of 2 antibodies described in Item 71153 (Item is subject to rule 6 and 23)	35.6	40.35
71156	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	12.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Tests described in Item 71153, other than that described in 71154, if rendered by a receiving APP - each test to a maximum of 3 tests (Item is subject to rule 6, 18 and 23)	9.65	10.95
71157	1/05/2001	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2001	1/01/2013	60.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Detection of 3 antibodies described in Item 71153 (Item is subject to rule 6 and 23)	45.25	51.3
71159	1/05/2001	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2001	1/01/2013	73.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Detection of 4 or more antibodies described in Item 71153 (Item is subject to rule 6 and 23)	54.9	62.2
71163	1/11/2003	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	24.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2003	Detection of one of the following antibodies (of 1 or more class or isotype) in the assessment or diagnosis of coeliac disease or other gluten hypersensitivity syndromes and including a service described in Item 71066 (if performed): a)Antibodies to gliadin; or b)Antibodies to endomysium; or c)Antibodies to tissue transglutaminase; - 1 test	18.6	21.05
71164	1/11/2003	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	39.9	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2003	Two or more tests described in 71163 and including a service described in 71066 (if performed)	29.95	33.95
71165	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	34.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Antibodies to tissue antigens (acetylcholine receptor, adrenal cortex, heart, histone, insulin, insulin receptor, intrinsic factor, islet cell, lymphocyte, neuron, ovary, parathyroid, platelet, salivary gland, skeletal muscle, skin basement membrane and intercellular substance, thyroglobulin, thyroid microsome or thyroid stimulating hormone receptor) - detection, including quantitation if required, of 1 antibody (Item is subject to rule 6)	25.95	29.4
71166	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	47.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Detection of 2 antibodies described in Item 71165 (Item is subject to rule 6)	35.6	40.35
71167	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	60.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Detection of 3 antibodies described in Item 71165 (Item is subject to rule 6)	45.25	51.3

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71168	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	73.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Detection of 4 or more antibodies described in item 71165 (Item is subject to rule 6)	54.9	62.2
71169	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	34.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	A test described in item 71165, if rendered by a receiving APP, where no tests in the item have been rendered by the referring APP - 1 test (Item is subject to rule 6 and 18)	25.95	29.4
71170	1/05/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	12.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2007	Tests described in item 71165, other than that described in 71169, if rendered by a receiving APP - each test to a maximum of 3 tests (Item is subject to rule 6 and 18)	9.65	10.95
71175	1/11/2021	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	50	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	A test, requested by a specialist or consultant physician, to diagnose neuromyelitis optica spectrum disorder (NMOSD) or myelin oligodendrocyte glycoprotein antibody-related demyelination (MARG), by the detection of one or more antibodies, for a patient: suspected of having NMOSD or MARG; and with any of the following: recurrent, bilateral or severe optic neuritis; recurrent longitudinal extensive transverse myelitis (LETM); area postrema syndrome (unexplained hiccups, nausea or vomiting); acute brainstem syndrome; symptomatic narcolepsy or acute diencephalic clinical syndrome with typical NMOSD magnetic resonance imaging lesions; symptomatic cerebral syndrome with typical NMOSD magnetic resonance imaging lesions; monophasic neuromyelitis optica (no recurrence, and simultaneous or closely related optic neuritis and LETM within 30 days of each other); acute disseminated encephalomyelitis; aseptic meningitis and encephalomyelitis; poor recovery from multiple sclerosis relapses Applicable not more than 4 times in 12 months	37.5	42.5
71180	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	34.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Antibody to cardiolipin or beta-2 glycoprotein I - detection, including quantitation if required; one antibody specificity (IgG or IgM)	25.95	29.4
71183	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	47.45	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Detection of two antibodies described in item 71180	35.6	40.35
71186	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	60.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Detection of three or more antibodies described in item 71180	45.25	51.3
71189	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	15.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Detection of specific IgG antibodies to 1 or more respiratory disease allergens not elsewhere specified.	11.65	13.2
71192	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	28.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	2 items described in item 71189.	21.3	24.1
71195	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	40.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	3 or more items described in item 71189.	30.05	34.05
71198	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	40.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Estimation of serum tryptase for the evaluation of unexplained acute hypotension or suspected anaphylactic event, assessment of risk in stinging insect anaphylaxis, exclusion of mastocytosis, monitoring of known mastocytosis.	30.45	34.5
71200	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	59.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2009	Detection and quantitation, if present, of free kappa and lambda light chains in serum for the diagnosis or monitoring of amyloidosis, myeloma or plasma cell dyscrasias.	44.7	50.7
71203	1/11/2007	ITable]	6	P4	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	40.55	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Determination of HLAB5701 status by flow cytometry or cytotoxity assay prior to the initiation of Abacavir therapy including Item 73323 if performed.	30.45	34.5
72813	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	71.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Examination of complexity level 2 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 1 or more separately identified specimens (Item is subject to rule 13)	53.65	60.8
72814	1/11/2018	ITable]	6	P5	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	N	C	1/11/2018	1/11/2018	74.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2021	Immunohistochemical examination of biopsy material or other labelled antibody techniques using the programmed cell death 1 (PD-1) antibody of tumour material from a patient diagnosed with non-small cell lung cancer	55.9	63.35
72816	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	86.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Examination of complexity level 3 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 1 separately identified specimen (Item is subject to rule 13)	64.8	73.4
72817	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	96.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Examination of complexity level 3 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 2 to 4 separately identified specimens (Item is subject to rule 13)	72.6	82.3
72818	1/11/2002	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	107.05	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Examination of complexity level 3 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 5 or more separately identified specimen (Item is subject to rule 13)	80.3	91
72823	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	97.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Examination of complexity level 4 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 1 separately identified specimen (Item is subject to rule 13)	72.9	82.6
72824	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	141.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Examination of complexity level 4 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 2 to 4 separately identified specimens (Item is subject to rule 13)	106.05	120.15
72825	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	180.25	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2002	Examination of complexity level 4 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 5 to 7 separately identified specimens (Item is subject to rule 13)	135.2	153.25
72826	1/11/2002	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2002	1/01/2013	194.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2008	Examination of complexity level 4 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 8 to 11 separately identified specimens (Item is subject to rule 13)	145.95	165.45
72827	1/11/2008	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	208.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2008	Examination of complexity level 4 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 12 to 17 separately identified specimens (Item is subject to Rule 13)	156.75	177.65
72828	1/11/2008	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	223.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2008	Examination of complexity level 4 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions -18 or more separately identified specimens (Item is subject to Rule 13)	167.5	189.85
72830	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	276.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Examination of complexity level 5 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 1 or more separately identified specimens (Item is subject to rule 13)	205.65	233.05
72836	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	417.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Examination of complexity level 6 biopsy material with 1 or more tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 1 or more separately identified specimens (Item is subject to rule 13)	312.9	354.65
72838	1/11/2007	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	466.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2007	Examination of complexicity level 7 biopsy material with multiple tissue blocks, including specimen dissection, all tissue processing, staining, light microscopy and professional opinion or opinions - 1 or more separately identified specimens. (Item is subject to rule 13)	350.15	396.85
72844	1/11/1998	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/1998	1/01/2013	34.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/1998	Enzyme histochemistry of skeletal muscle for investigation of primary degenerative or metabolic muscle diseases or of muscle abnormalities secondary to disease of the central or peripheral nervous system - 1 or more tests	23.1	26.15
72846	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	59.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2003	Immunohistochemical examination of biopsy material by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 1 to 3 antibodies except those listed in 72848 (Item is subject to rule 13)	44.7	50.7
72847	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	84.4	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2009	Immunohistochemical examination of biopsy material by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 4-6 antibodies (Item is subject to rule 13)	67.05	76
72848	1/11/2003	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	74.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2003	Immunohistochemical examination of biopsy material by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 1 to 3 of the following antibodies - oestrogen, progesterone and c-erb-B2 (HER2) (Item is subject to rule 13)	55.9	63.35
72849	1/11/2008	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	104.3	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2008	Immunohistochemical examination of biopsy material by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 7-10 antibodies (Item is subject to rule 13)	78.25	88.7
72850	1/11/2008	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	149.2	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2008	Immunohistochemical examination of biopsy material by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 11 or more antibodies (Item is subject to rule 13)	89.4	101.35
72851	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/11/2018	565	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Electron microscopic examination of biopsy material - 1 separately identified specimen (Item is subject to rule 13)	423.75	480.25
72852	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/11/2018	753	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	20/03/1997	Electron microscopic examination of biopsy material - 2 or more separately identified specimens (Item is subject to rule 13)	564.75	665.1
72855	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	184.35	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2001	Intraoperative consultation and examination of biopsy material by frozen section or tissue imprint or smear - 1 separately identified specimen (Item is subject to rule 13)	138.3	156.7
72856	20/03/1997	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	20/03/1997	1/01/2013	245.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2003	Intraoperative consultation and examination of biopsy material by frozen section or tissue imprint or smear - 2 to 4 separately identified specimens (Item is subject to rule 13)	184.35	208.95
72857	1/11/2003	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	286.75	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2003	Intraoperative consultation and examination of biopsy material by frozen section or tissue imprint or smear - 5 or more separately identified specimens (Item is subject to rule 13)	215.1	243.75
72858	1/11/2015	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2015	1/11/2015	180	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2015	A second opinion, provided in a written report, where the opinion and report together require no more than 30 minutes to complete, on a patient specimen, requested by a treating practitioner, where further information is needed for accurate diagnosis and appropriate patient management.	135	153
72859	1/11/2015	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/11/2015	1/11/2015	370	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/11/2015	A second opinion, provided in a written report, where the opinion and report together require more than 30 minutes to complete, on a patient specimen, requested by a treating practitioner, where further information is needed for accurate diagnosis and appropriate patient management.	277.5	314.5
72860	1/05/2019	ITable]	6	P5	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/03/2021	Retrieval and review of one or more archived formalin fixed paraffin embedded blocks to determine the appropriate samples for the purpose of conducting genetic testing, other than: (a) a service associated with a service to which Item72858 or 72859 applies; or (b) a service associated with, and rendered in the same patient episode as, a service to which an Item in Group P5, P6, P10 or P11 applies Applicable not more than once in a patient episode	63.75	72.25
73043	1/12/1991	ITable]	6	P6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	22.85	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Cytology (including serial examinations) of nipple discharge or smears from skin, lip, mouth, nose or anus for detection of precancerous or cancerous changes1 or more tests	17.15	19.45
73045	1/12/1991	ITable]	6	P6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	48.6	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/12/2017	Cytology (including serial examinations) for malignancy (other than an examination mentioned in item 73076); and including any Group P5 service, if performed on: (a)specimens resulting from washings or brushings from sites not specified in item 73041; or (b)a single specimen of sputum or urine; or (c)3 or more specimens of other body fluids; 1 or more tests	36.45	41.35
73047	1/12/1991	ITable]	6	P6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	94.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/1994	Cytology of a series of 3 sputum or urine specimens for malignant cells	71.05	80.5
73049	1/12/1991	ITable]	6	P6	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	68.15	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/05/2009	Cytology of material obtained directly from a patient by fine needle aspiration of solid tissue or tissues 1 identified site	51.15	57.95

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73051	1/12/1991	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	170.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Cytology of material obtained directly from a patient at one identified site by fine needle aspiration of solid tissue or tissues if a recognized pathologist: (a)performs the aspiration; or (b)attends the aspiration and performs cytological examination during the attendance	127.8	144.8
73059	1/11/1997	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/01/2013	43	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Immunocytochemical examination of material obtained by procedures described in Items 73045, 73047, 73049, 73051, 73062, 73063, 73066 and 73067 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 1 to 3 antibodies except those listed in 73061 (Item is subject to rule 13)	32.25	36.55
73060	1/11/1997	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/1997	1/01/2013	57.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Immunocytochemical examination of material obtained by procedures described in Items 73045, 73047, 73049, 73051, 73062, 73063, 73066 and 73067for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 4 to 6antibodies (Item is subject to rule 13)	43.05	48.75
73061	1/11/2003	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2003	1/01/2013	51.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Immunocytochemical examination of material obtained by procedures described in Items 73045, 73047, 73049, 73051, 73062, 73063, 73066 and 73067 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 1 to 3 of the following antibodies - oestrogen, progesterone and c-erb-B2 (HER2) (Item is subject to rule 13)	38.4	43.55
73062	1/05/2009	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2013	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	Cytology of material obtained directly from a patient by fine needle aspiration of solid tissue or tissues 2 or more separately identified sites.	66.75	75.65
73063	1/05/2009	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2013	99.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Cytology of material obtained directly from a patient at one identified site by fine needle aspiration of solid tissue or tissues if an employee of an approved pathology authority attends the aspiration for confirmation of sample adequacy	74.55	84.45
73064	1/05/2009	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2013	71.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Immunocytochemical examination of material obtained by procedures described in Items 73045, 73047, 73049, 73051, 73062, 73063, 73066 and 73067 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 7 to 10 antibodies (Item is subject to rule 13)	53.8	60.95
73065	1/05/2009	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2009	1/01/2014	86	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Immunocytochemical examination of material obtained by procedures described in Items 73045, 73047, 73049, 73051, 73062, 73063, 73066 and 73067 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 11 or more antibodies (Item is subject to rule 13)	64.5	73.1
73066	1/07/2011	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	221.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Cytology of material obtained directly from a patient at 2 or more separately identified sites by fine needle aspiration of solid tissue or tissues if a recognized pathologist: (a)performs the aspiration; or (b) attends the aspiration and performs cytological examination during the attendance	166.1	188.25
73067	1/07/2011	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	129.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Cytology of material obtained directly from a patient at 2 or more separately identified sites by fine needle aspiration of solid tissue or tissues if an employee of an approved pathology authority attends the aspiration for confirmation of sample adequacy	96.9	109.8
73070	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	73070 A test, including partial genotyping, for oncogenic human papillomavirus that may be associated with cervical pre-cancer or cancer: (a) performed on a liquid based cervical specimen; and (b) for an asymptomatic patient who is at least 24 years and 9 months of age For any particular patient, once only in a 57 month period	26.25	29.75
73071	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	73071 A test, including partial genotyping, for oncogenic human papillomavirus that may be associated with cervical pre-cancer or cancer: (a) performed on a self-collected vaginal specimen; and (b) for an asymptomatic patient who is at least 30 years of age For any particular patient, once only in a 7 year period	26.25	29.75
73072	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	A test, including partial genotyping, for oncogenic human papillomavirus, performed on a liquid based cervical specimen: (a) for the investigation of a patient in a specific population that appears to have a higher risk of cervical pre-cancer or cancer; or (b) for the follow-up management of a patient with a previously detected oncogenic human papillomavirus infection or cervical pre-cancer or cancer; or (c) for the investigation of a patient with symptoms suggestive of cervical cancer; or (d) for the follow-up management of a patient after treatment of high grade squamous intraepithelial lesions or adenocarcinoma in situ of the cervix; or (e) for the follow-up management of a patient with glandular abnormalities; or (f) for the follow-up management of a patient exposed to diethylstilboestrol in utero	26.25	29.75
73073	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	A test, including partial genotyping, for oncogenic human papillomavirus: (a) performed on a self-collected vaginal specimen; and (b) for the follow-up management of a patient with oncogenic human papillomavirus infection or cervical pre-cancer or cancer that was detected by a test to which Item73071 applies For any particular patient, once only in a 21 month period	26.25	29.75
73074	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	A test, including partial genotyping, for oncogenic human papillomavirus: (a) performed on a liquid based vaginal vault specimen; and (b) for the investigation of a patient following a total hysterectomy	26.25	29.75
73075	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	A test, including partial genotyping, for oncogenic human papillomavirus, if: (a) the test is a repeat of a test to which Item73070, 73071, 73072, 73073, 73074 or this item applies; and (b) the specimen collected for the previous test is unsatisfactory	26.25	29.75
73076	1/12/2017	[Table]	6	P6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/2017	1/12/2017	46	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Cytology of a liquid-based cervical or vaginal vault specimen, where the stained cells are examined microscopically or by automated image analysis by or on behalf of a pathologist, if: (a) the cytology is associated with the detection of oncogenic human papillomavirus infection by: (i) a test to which Item73070, 73071, 73073, 73074 or 73075 applies; or (ii) a test to which Item73072 applies for a patient mentioned in paragraph(a) or (b) of that item; or (b) the cytology is associated with a test to which Item73072 applies for a patient mentioned in paragraph(c), (d), (e) or (f) of that item; or (c) the cytology is associated with a test to which Item73074 applies; or (d) the test is a repeat of a test to which this item applies, if the specimen collected for the previous test is unsatisfactory; or (e) the cytology is for the follow-up management of a patient treated for endometrial adenocarcinoma	34.5	39.1
73287	1/07/1993	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/01/2013	194.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	The study of the whole of every chromosome by cytogenetic or other techniques, performed on 1 or more of any tissue or fluid except blood (including a service mentioned in Item 73263, if performed) - 1 or more tests.	265.95	235.4
73289	1/07/1993	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1993	1/01/2013	218.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	The study of the whole of every chromosome by cytogenetic or other techniques, performed on blood (including a service mentioned in Item 73263, if performed) - 1 or more tests	269.25	305.15
73290	1/05/2010	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/01/2013	265.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	The study of the whole of each chromosome by cytogenetic or other techniques, performed on blood or bone marrow, in the diagnosis and monitoringof haematological malignancy (including a service in Items 73267 or 73269, if performed) - 1 or more tests.	265.95	235.4
73291	1/05/2010	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/01/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Analysis of one or more chromosome regions for specific constitutional genetic abnormalities of blood or fresh tissue in a)diagnostic studies of a person with developmental delay, intellectual disability, autism, or at least two congenital abnormalities, in whom cytogenetic studies (Item 73267 or 73269) are either normal or have not been performed; or b)studies of a relative for an abnormality previously identified in such an affected person. - 1 or more tests.	173.25	196.35
73292	1/05/2010	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/01/2013	589.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Analysis of chromosomes by genome-wide micro-array including targeted assessment of specific regions for constitutional genetic abnormalities in diagnostic studies of a person with developmental delay, intellectual disability, autism, or at least two congenital abnormalities (including a service in Items 73267, 73269 or 73291, if performed) - 1 or more tests.	442.45	502
73293	1/05/2010	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/01/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Analysis of one or more regions on all chromosomes for specific constitutional genetic abnormalities of fresh tissue in diagnostic studies of the products of conception, including exclusion of maternal cell contamination. - 1 or more tests.	173.25	196.35
73294	1/05/2010	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2010	1/01/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2010	Analysis of the PMP22 gene for constitutional genetic abnormalities causing peripheral neuropathy, either a)- a)diagnostic studies of an affected person; or b)studies of a relative for an abnormality previously identified in an affected person - 1 or more tests.	173.25	196.35
73295	1/02/2017	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/2017	1/02/2017	1200	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/08/2020	Detection of germline BRCA1 or BRCA2 pathogenic or likely pathogenic gene variants, in a patient with advanced (FIGO III-IV) high-grade serous or high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer for whom testing of tumour tissue is not feasible, requested by a specialist or consultant physician, to determine eligibility for olaparib under the Pharmaceutical Benefits Scheme (PBS) Maximum of one test per patient's lifetime	900	1112.1
73296	1/11/2017	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2017	1/11/2017	1200	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2021	Characterisation of germline gene variants: (a) including copy number variation in: (i) BRCA1 gene; and (ii) BRCA2 gene; and (iii) one or more of the genes STK11, PTEN, CDH1, PALB2 and TP53; and (b) in a patient: (i) with breast, ovarian, fallopian tube or primary peritoneal cancer; and (ii) for whom clinical and family history criteria (as assessed, by the specialist or consultant physician who requests the service, using a quantitative algorithm) place the patient at greater than 10% risk of having a pathogenic or likely pathogenic gene variation identified in one or more of the genes specified in subparagraph(a)(i), (ii) and (iii); requested by a specialist or consultant physician	900	1112.1
73297	1/11/2017	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2017	1/11/2017	400	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Characterisation of germline gene variants, including copy number variation: in one or more of the following genes: BRCA1; BRCA2; STK11; PTEN; CDH1; PALB2; TP53; and in a patient who: is a biological relative of a patient who has had a pathogenic or likely pathogenic gene variant identified in one or more of the genes mentioned in paragraph(a); and has not previously received a service to which Item73295, 73296 or 73302 applies; requested by a specialist or consultant physician	300	340
73298	1/05/2019	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	1200	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2019	Characterisation of germline gene variants in the following genes: (a) COL4A2; and (b) COL4A4; and (c) COL4A5; in a patient for whom clinical and relevant family history criteria have been assessed by a specialist or consultant physician, who requests the service to be strongly suggestive of Alport syndrome.	900	1112.1
73299	1/05/2019	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2019	1/05/2019	400	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2019	Characterisation of germline gene variants: (a) in the following genes: (i) COL4A2; and (ii) COL4A4; and (iii) COL4A5; (b) in a patient who: (i) is a first degree biological relative of a patient who has had a pathogenic mutation identified in one or more of the genes mentioned insubparagraph(a)(i), (ii) and (iii); and (ii) has not previously received a service which Item 73298 applies; requested by a specialist or consultant physician.	300	340
73300	1/05/2003	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/01/2013	101.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	Detection of mutation of the FMR1 gene where: (a) the patient exhibits intellectual disability, ataxia, neurodegeneration, or premature ovarian failure consistent with an FMR1 mutation; or (b) the patient has a relative with a FMR1 mutation 1 or more tests	76	86.15
73301	1/08/2020	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	1200	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/08/2020	A test of tumour tissue from a patient with advanced (FIGO III-IV), high-grade serous or high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer, requested by a specialist or consultant physician, to determine eligibility relating to BRCA status for access to olaparib under the Pharmaceutical Benefits Scheme (PBS). Applicable once per primary tumour diagnosis	900	1112.1
73302	1/08/2020	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/08/2020	400	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/08/2020	Characterisation of germline gene variants including copy number variants, in BRCA1 or BRCA2 genes, in a patient who has had a pathogenic or likely pathogenic variant identified in either gene by tumour testing and who has not previously received a service to which Items 73295, 73296 or 73297 applies, requested by a specialist or consultant physician. Applicable once per primary tumour diagnosis	300	340

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73303	1/04/2022	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2022	1/04/2022	1000	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2022	A test of tumour tissue from a patient with metastatic castration-resistant prostate cancer, including subsequent characterisation of germline gene variants should tumour tissue testing undertaken during the same service be inconclusive, requested by a specialist or consultant physician, to determine eligibility relating to BRCA status for access to olaparib under the Pharmaceutical Benefits Scheme. Applicable once per primary tumour diagnosis	750	912.1
73304	1/04/2022	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/04/2022	1/04/2022	1000	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2022	Detection of germline BRCA1 or BRCA2 pathogenic or likely pathogenic gene variants, in a patient with metastatic castration-resistant prostate cancer, for whom testing of tumour tissue is not clinically feasible, requested by a specialist or consultant physician, to determine eligibility for olaparib under the Pharmaceutical Benefits Scheme. Applicable once per lifetime	750	912.1
73305	1/05/2003	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2003	1/01/2013	202.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Detection of mutation of the FMR1 gene by Southern Blot analysis where the results in Item 73300 are inconclusive	152	172.3
73308	1/05/2006	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/01/2013	36.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	Characterisation of the genotype of a patient for Factor V Leiden gene mutation, or detection of the other relevant mutations in the investigation of proven venous thrombosis or pulmonary embolism - 1 or more tests	27.35	31
73309	1/05/2007	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	36.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 73308, if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	27.35	31
73311	1/05/2006	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/01/2013	36.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	Characterisation of the genotype of a person who is a first degree relative of a person who has proven to have 1 or more abnormal genotypes under Item 73308 - 1 or more tests	27.35	31
73312	1/05/2007	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	36.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 73311, if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	27.35	31
73314	1/05/2006	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/01/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	Characterisation of gene rearrangement or the identification of mutations within a known gene rearrangement, in the diagnosis and monitoring of patients with laboratory evidence of: (a)acute myeloid leukaemia; or (b)acute promyelocytic leukaemia; or (c)acute lymphoid leukaemia; or (d)chronic myeloid leukaemia;	173.25	196.35
73315	1/05/2007	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2009	A test described in Item 73314, if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18)	173.25	196.35
73317	1/05/2006	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/01/2013	36.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2006	Detection of the C282Y genetic mutation of the HFE gene and, if performed, detection of other mutations for haemochromatosis where: (a)the patient has an elevated transferrin saturation or elevated serum ferritin on testing of repeated specimens; or (b)the patient has a first degree relative with haemochromatosis; or (c)the patient has a first degree relative with homozygosity for the C282Y genetic mutation, or with compound heterozygosity for recognised genetic mutations for haemochromatosis (Item is subject to rule 20)	27.35	31
73318	1/05/2007	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	36.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 73317, if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18 and 20)	27.35	31
73320	1/05/2006	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2006	1/01/2013	40.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Detection of HLA-B27 by nucleic acid amplification includes a service described in 71147 unless the service in Item 73320 is rendered as a genotyping determinate service. (Item is subject to rule 27)	30.45	34.5
73321	1/05/2007	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	40.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	A test described in Item 73320, if rendered by a receiving APP - 1 or more tests. (Item is subject to rule 18 and 27)	30.45	34.5
73323	1/11/2007	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2007	1/01/2013	40.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	Determination of HLA-B57 status by molecular techniques prior to the initiation of Abacavir therapy including Item 73323 if performed.	30.45	34.5
73324	1/11/2008	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2008	1/01/2013	40.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2008	A test described in Item 73323 if rendered by a receiving APP 1 or more tests (Item is subject to Rule 18)	30.75	34.85
73325	1/07/2011	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	74.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Characterisation of mutations in: (a) the JAK2 gene; or (b) the MPL gene; or (c) both genes; in the diagnostic work-up, by, or on behalf of, the specialist or consultant physician, of a patient with clinical and laboratory evidence of: (i)polycythaemia vera; or (ii)essential thrombocythaemia; 1 or more tests	55.9	63.35
73326	1/07/2011	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Characterisation of the gene rearrangement FIP1L1-PDGFRA in the diagnostic work-up and management of a patient with laboratory evidence of: a)mast cell disease; or b)idiopathic hypereosinophilic syndrome; or c)chronic eosinophilic leukaemia; 1 or more tests	173.25	196.35
73327	1/07/2011	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2011	1/01/2013	51.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2011	Detection of genetic polymorphisms in the Thiopurine S-methyltransferase gene for the prevention of dose-related toxicity during treatment with thiopurine drugs; including (if performed) any service described in Item 65075. 1 or more tests	39	46.2
73332	1/05/2012	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2012	1/01/2013	315.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2012	An in situ hybridisation (ISH) test of tumour tissue from a patient with breast cancer requested by, or on the advice of, a specialist or consultant physician who manages the treatment of the patient to determine if the requirements relating to human epidermal growth factor receptor 2 (HER2) gene amplification for access to trastuzumab under the Pharmaceutical Benefits Scheme (PBS) or the Herceptin Program are fulfilled.	236.55	268.1
73333	1/11/2012	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	600	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Detection of germline mutations of the von Hippel-Lindau (VHL) gene: (a)in a patient who has a clinical diagnosis of VHL syndrome and: (i)a family history of VHL syndrome and one of the following: (A) haemangioblastoma (retinal or central nervous system); (B) pheochromocytoma; (C) renal cell carcinoma; or (D) or more haemangioblastomas; or (ii)one haemangioblastoma and a tumour or a cyst of: (A) the adrenal gland; or (B) the kidney; or (C)the pancreas; or (D) the epididymis; or (E) a broad ligament (other than epididymal and single renal cysts, which are common in the general population); or (a)in a patient presenting with one or more of the following clinical features suggestive of VHL syndrome: (i)haemangioblastomas of the brain, spinal cord, or retina; (ii)pheochromocytoma; (iii)functional extra-adrenal paraganglioma	450	512.1
73334	1/11/2012	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	340	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Detection of germline mutations of the von Hippel-Lindau (VHL) gene in biological relatives of a patient with a known mutation in the VHL gene	255	289
73335	1/11/2012	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2012	1/11/2012	470	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Detection of somatic mutations of the von Hippel-Lindau (VHL) gene in a patient with: (a)2 or more tumours comprising: (i)2 or more haemangioblastomas; or (ii)one haemangioblastoma and a tumour of: (A)the adrenal gland; or (B)the kidney; or (C)the pancreas; or (D)the epididymis; and (b)no germline mutations of the VHL gene identified by genetic testing	352.5	399.5
73336	1/12/2013	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/01/2014	1/12/2013	230.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/04/2020	A test of tumour tissue from a patient withstage III or stage IV metastatic cutaneous melanoma, requested by, or on behalf of, a specialist or consultant physician, to determine if the requirements relating to BRAF V600 mutation status for access to dabrafenib,vemurafenib or encorafenibunder the Pharmaceutical Benefits Scheme are fulfilled.	173.25	196.35
73337	1/01/2014	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/01/2014	1/01/2016	397.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	A test of tumour tissue from a patient diagnosed with non-small cell lung cancer, shown to have non-squamous histology or histology not otherwise specified, requested by, or on behalf of, a specialist or consultant physician, to determine: if the requirements relating to epidermal growth factor receptor (EGFR) gene status for access to an EGFR tyrosine kinase inhibitor under the Pharmaceutical Benefits Scheme are fulfilled; or if the requirements relating to EGFR status for access to pembrolizumab under the Pharmaceutical Benefits Scheme are fulfilled.	298.05	327.75
73338	1/04/2014	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/04/2014	22/08/2016	562.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A test of tumour tissue from a patient with metastatic colorectal cancer (stage IV), requested by a specialist or consultant physician, to determine if: (a) requirements relating to rat sarcoma oncogene (RAS) gene variant status for access to cetuximab or panitumumab under the Pharmaceutical Benefits Scheme are fulfilled, if: the test is conducted for all clinically relevant mutations on KRAS exons 2, 3 and 4 and NRAS exons 2, 3, and 4; or a clinically-relevant RAS variant is detected; and, in cases where no RAS variant is detected (b) the requirements relating to BRAF V600 gene variant status for access to encorafenib under the Pharmaceutical Benefits Scheme are fulfilled.	271.95	308.25
73339	1/11/2014	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	600	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Detection of germline mutations in the RET gene in patients with a suspected clinical diagnosis of multiple endocrine neoplasia type 2 (MEN2) requested by a specialist or consultant physician who manages the treatment of the patient. One test (Item is subject to rule 25)	300	340
73340	1/11/2014	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2014	1/11/2014	150	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2014	Detection of a known mutation in the RET gene in an asymptomatic relative of a patient with a documented pathogenic germline RET mutation requested by a specialist or consultant physician who manages the treatment of the patient. One test (Item is subject to rule 25)	150	170
73341	1/07/2015	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/07/2015	1/07/2015	400	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Fluorescence in situ hybridisation (FISH) test of tumour tissue from a patient with locally advanced or metastatic non-small cell lung cancer, which is of non-squamous histology or histology not otherwise specified, with documented evidence of anaplastic lymphoma kinase (ALK) immunoreactivity by immunohistochemical (IHC) examination giving a staining intensity score 0,1+ 0, and with documented absence of activating mutations of the epidermal growth factor receptor (EGFR) gene, requested by a specialist or consultant physician, to determine: if requirements relating to ALK gene rearrangement status for access to an anaplastic lymphoma kinase inhibitor under the Pharmaceutical Benefits Scheme are fulfilled; or if requirements relating to ALK status for access to pembrolizumab under the Pharmaceutical Benefits Scheme are fulfilled.	300	340
73342	1/01/2016	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/01/2016	1/01/2016	315.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2016	An in situ hybridisation (ISH) test of tumour tissue from a patient with metastatic adenocarcinoma of the stomach or gastro-oesophageal junction, with documented evidence of human epidermal growth factor receptor 2 (HER2) overexpression by immunohistochemical (IHC) examination giving a staining intensity score of 2+ or 3+ on the same tumour tissue sample, requested by, or on the advice of, a specialist or consultant physician who manages the treatment of the patient to determine if the requirements relating to HER2 gene amplification for access to trastuzumab under the Pharmaceutical Benefits Scheme are fulfilled.	236.55	268.1
73343	1/09/2017	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/08/2020	1/11/2021	589.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Detection of 17p chromosomal deletions by fluorescence in situ hybridisation or genome wide micro-array, in a patient with relapsed or refractory chronic lymphocytic leukaemia or small lymphocytic lymphoma, on a peripheral blood or bone marrow sample, requested by a specialist or consultant physician, to determine if the requirements for access to idelalisib, ibrutinib, venetoclax or acalabrutinib on the Pharmaceutical Benefits Scheme are fulfilled. For any particular patient, applicable not more than once in 12 months.	442.45	502
73344	1/01/2019	[Table]	6	P7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/01/2019	1/01/2019	400	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Fluorescence in situ hybridisation (FISH) test of tumour tissue from a patient with locally advanced or metastatic non-small-cell lung cancer, which is of non-squamous histology or histology not otherwise specified, with documented evidence of ROS proto-oncogene 1 (ROS1) immunoreactivity by immunohistochemical (IHC) examination giving a staining intensity score of 2+ or 3+; and with documented absence of both activating mutations of the epidermal growth factor receptor (EGFR) gene and anaplastic lymphoma kinase (ALK) immunoreactivity by IHC, requested by a specialist or consultant physician, to determine: if requirements relating to ROS1 gene arrangement status for access to crizotinib or entrectinib under the Pharmaceutical Benefits Scheme are fulfilled; or if requirements relating to ROS1 status for access to pembrolizumab under the Pharmaceutical Benefits Scheme are fulfilled.	300	340
73345	1/07/2018	[Table]	6	P7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	500	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2018	Testing of a patient for pathogenic cystic fibrosis transmembrane conductance regulator variants for the purpose of investigating, making or excluding a diagnosis of cystic fibrosis or a cystic fibrosis transmembrane conductance regulator related disorder when requested by a specialist or consultant physician who manages the treatment of the patient, not being a service associated with a service to which Item 73347, 73348, or 73349 applies. The patient must have clinical or laboratory findings suggesting there is a high probability suggestive of cystic fibrosis or a cystic fibrosis transmembrane conductance regulator related disorder.	375	425

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73346	1/07/2018	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	500	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2018	Testing of a pregnant patient whose carrier status for pathogenic cystic fibrosis transmembrane conductance regulator variants, as well as their reproductive partner carrier status is unknown, for the purpose of determining whether pathogenic cystic fibrosis transmembrane conductance regulator variants are present in the fetus, in order to make or exclude a diagnosis of cystic fibrosis or a cystic fibrosis transmembrane conductance regulator related disorder in the fetus when requested by a specialist or consultant physician who manages the treatment of the patient, not being a service associated with a service to which Item 73350 applies. The fetus must have ultrasonic findings of echogenic gut, with unknown familial cystic fibrosis transmembrane conductance regulator variants.	375	425
73347	1/07/2018	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	500	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2018	Testing of a prospective parent for pathogenic cystic fibrosis transmembrane conductance regulator variants for the purpose of determining the risk of their fetus having pathogenic cystic fibrosis transmembrane conductance regulator variants. This is indicated when the fetus has ultrasonic evidence of echogenic gut when requested by a specialist or consultant physician who manages the treatment of the patient, not being a service associated with a service to which Item 73345, 73348, or 73349 applies.	375	425
73348	1/07/2018	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	250	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2020	Testing of a patient with a laboratory-established family history of pathogenic cystic fibrosis transmembrane conductance regulator variants, for the purpose of determining whether the patient is an asymptomatic genetic carrier of the pathogenic cystic fibrosis transmembrane conductance regulator variants that have been laboratory established in the family history, not being a service associated with a service to which Item 73345, 73347, or 73349 applies. The patient must have a positive family history, confirmed by laboratory findings of pathogenic cystic fibrosis transmembrane conductance regulator variants, with a personal risk of being a heterozygous genetic carrier of at least 6%. (This includes family relatedness of: parents, children, full-siblings, half-siblings, grand-parents, grandchildren, aunts, uncles, first cousins, and first cousins once-removed, but excludes relatedness of second cousins or more distant relationships).	187.5	212.5
73349	1/07/2018	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	500	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2018	Testing of a patient for pathogenic cystic fibrosis transmembrane conductance regulator variants for the purpose of determining the reproductive risk of the patient with their reproductive partner because their reproductive partner is already known to have pathogenic cystic fibrosis transmembrane conductance regulator variants requested by a specialist or consultant physician who manages the treatment of the patient, not being a service associated with a service to which Item 73345, 73347, or 73348 applies.	375	425
73350	1/07/2018	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/07/2018	1/07/2018	250	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/2018	Testing of a pregnant patient, where one or both prospective parents are known to be a genetic carrier of pathogenic cystic fibrosis transmembrane conductance regulator variants for the purpose of determining whether pathogenic cystic fibrosis transmembrane conductance regulator variants are present in the fetus in order to make or exclude a diagnosis of cystic fibrosis or a cystic fibrosis transmembrane conductance regulator related disorder in the fetus, when requested by a specialist or consultant physician who manages the treatment of the patient, not being a service associated with a service to which Item 73346 applies. The fetus must be at 25% or more risk of cystic fibrosis or a cystic fibrosis transmembrane conductance regulator related disorder because of known familial cystic fibrosis transmembrane conductance regulator variants.	187.5	212.5
73351	1/02/2019	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/2019	1/02/2019	397.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/02/2019	A test of tumour tissue that is derived from a new sample from a patient with locally advanced (Stage IIIB) or metastatic (Stage IV) non-small cell lung cancer (NSCLC), who has progressed on or after treatment with an epidermal growth factor receptor tyrosine kinase inhibitor (EGFR TKI). The test is to be requested by a specialist or consultant physician, to determine if the requirements relating to EGFR T790M gene status for afatinib or osimertinib under the Pharmaceutical Benefits Scheme are fulfilled.	298.05	327.75
73352	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	1200	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Characterisation of germline variants causing familial hypercholesterolaemia (which must include the LDLR, PCSK9 and APOB genes), requested by a specialist or consultant physician, for a patient: (a) for whom no familial mutation has been identified; and (b) who has any of the following: (i) a Dutch Lipid Clinic Network score of at least 6; (ii) an LDL-cholesterol level of at least 6.5 mmol/L in the absence of secondary causes; (iii) an LDL-cholesterol level of between 5.0 and 6.5 mmol/L with signs of premature or accelerated atherogenesis Applicable only once per lifetime	900	1112.1
73353	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Detection of a familial mutation for a patient who has a first- or second-degree relative with a documented pathogenic germline gene variant for familial hypercholesterolaemia Applicable only once per lifetime	300	340
73354	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	1200	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Characterisation of germline gene variants, including copy number variation, in the MLH1, MSH2, MSH6, PMS2 and EPCAM genes, requested by a specialist or consultant physician, for:(a) a patient with suspected Lynch syndrome following immunohistochemical examination of neoplastic tissue that has demonstrated loss of expression of one or more mismatch repair proteins; or (b) a patient: (i) who has endometrial cancer; and (ii) who is assessed by the specialist or consultant physician as being at a risk of more than 10% of having Lynch syndrome, on the basis of clinical and family history criteria	900	1112.1
73355	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	1200	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Characterisation of germline gene variants, including copy number variation, in the APC and MUTYH genes, requested by a specialist or consultant physician, for a patient: (a) who has adenomatous polyposis; and (b) who is assessed by the specialist or consultant physician as being at a risk of more than 10% of having either of the following, on the basis of clinical and family history criteria: (i) familial adenomatous polyposis; (ii) MUTYH-associated polyposis	900	1112.1
73356	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	1200	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Characterisation of germline gene variants, including copy number variation, in the SMAD4, BMPR1A, STK11 and GREM1 genes, requested by a specialist or consultant physician, for a patient: (a) who has non-adenomatous polyposis; and (b) who is assessed by the specialist or consultant physician as being at a risk of more than 10% of having any of the following, on the basis of clinical and family history criteria: (i) juvenile polyposis syndrome; (ii) Peutz-Jeghers syndrome; (iii) hereditary mixed polyposis syndrome	900	1112.1
73357	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2021	Characterisation of germline gene variants, including copy number variation, in the genes mentioned in Item 73354, 73355 or 73356, requested by a specialist or consultant physician, for a patient: (a) who has abiological relative with a pathogenic mutation identified in one or more of those genes; and (b) who has not previously received a service to which any of Items 73354, 73355 and 73356 apply	300	340
73358	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	2600	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Characterisation, via whole exome or genome sequencing and analysis, of germline variants known to cause monogenic disorders, if: (a) the characterisation is: (i) requested by a consultant physician practising as a clinical geneticist; or (ii) requested by a consultant physician practising as a specialist paediatrician, following consultation with a clinical geneticist; and (b) the patient is aged 10 years or younger and is strongly suspected of having a monogenic condition, based on the presence of: (i) dysmorphic facial appearance and one or more major structural congenital anomalies; or (ii) intellectual disability or global developmental delay of at least moderate severity, as determined by a specialist paediatrician; and (c) the characterisation is performed following the performance for the patient of a service to which Item 73202 applies for which the results were non-informative; and (d) the characterisation is not performed in conjunction with a service to which Item 73359 applies Applicable only once per lifetime	1575	2012.1
73359	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	2600	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Characterisation, via whole exome or genome sequencing and analysis, of germline variants known to cause monogenic disorders, if: (a) the characterisation is: (i) requested by a consultant physician practising as a clinical geneticist; or (ii) requested by a consultant physician practising as a specialist paediatrician, following consultation with a clinical geneticist; and (b) the request for the characterisation states that singleton testing is inappropriate; and (c) the patient is aged 10 years or younger and is strongly suspected of having a monogenic condition, based on the presence of: (i) dysmorphic facial appearance and one or more major structural congenital anomalies; or (ii) intellectual disability or global developmental delay of at least moderate severity, as determined by a specialist paediatrician; and (d) the characterisation is performed following the performance for the patient of a service to which Item 73202 applies for which the results were non-informative; and (e) the characterisation is performed using a sample from the patient and a sample from each of the patient's biological parents; and (f) the characterisation is not performed in conjunction with a service to which Item 73358 applies Applicable only once per lifetime	2175	2812.1
73360	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	500	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Re-analysis of whole exome or genome data obtained in performing a service to which Item 73358 or 73359 applies, for characterisation of previously unreported germline gene variants related to the clinical phenotype, if: (a) the re-analysis is: (i) requested by a consultant physician practising as a clinical geneticist; or (ii) requested by a consultant physician practising as a specialist paediatrician, following consultation with a clinical geneticist; and (b) the patient is aged 55 years or younger and is strongly suspected of having a monogenic condition; and (c) the re-analysis is performed at least 18 months after: (i) a service to which Item 73358 or 73359 applies; or (ii) a service to which this item applies Applicable only twice per lifetime	375	425
73361	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Testing of a person (the person tested) for the detection of a single gene variant for diagnostic purposes, if: the person tested has a biological sibling (the sibling) with a known monogenic condition; and a service described in Item73358, 73359 or 73360 has identified the causative variant for the sibling's condition; and the results of the testing performed for the sibling are made available for the purpose of providing the detection for the person tested; and the detection is: requested by a consultant physician practising as a clinical geneticist; or requested by a consultant physician practising as a specialist paediatrician, following consultation with a clinical geneticist; and the detection is not performed in conjunction with a service to which Item73362 or 73363 applies Applicable only once per variant per lifetime	300	340
73362	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Testing of a person (the person tested) for the detection of a single gene variant for the purpose of reproductive decision making, if: the person tested has a first-degree relative (the relative) with a known monogenic condition; and a service described in Item73358, 73359 or 73360 has identified the causative variant for the relative's condition; and the results of the testing performed for the relative are made available for the purpose of providing the detection for the person tested; and the detection is requested by a consultant physician or specialist; and the detection is not performed in conjunction with Item 73359, 73361 or 73363 Applicable only once per variant per lifetime	300	340
73363	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Testing of a person (the person tested) for the detection of a single gene variant for segregation analysis in relation to another person (the patient), if: the patient has a known phenotype of a suspected monogenic condition; and a service described in Item73358 or 73360 has identified a potentially causative variant for the patient; and the person tested is a biological parent or other biological relative of the patient; and a sample from the person tested has not previously been tested in relation to the patient for a service to which Item73359 applies; and the results of the testing of the person tested for this service are made available for the purpose of providing the detection for the patient; and the detection is: requested by a consultant physician practising as a clinical geneticist; or requested by a consultant physician practising as a specialist paediatrician, following consultation with a clinical geneticist; and the detection is not performed in conjunction with Item73361 or 73362 Applicable only once per variant per lifetime	300	340
73364	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for: (i) the characterisation of MYC gene rearrangement; and (ii) if the results of the characterisation mentioned in subparagraph (i) are positive—the characterisation of either or both of BCL2 gene rearrangement and BCL6 gene rearrangement; and (b) is for a patient: (i) for whom MYC immunohistochemistry is non-negative; and (ii) with clinical or laboratory evidence, including morphological features, of diffuse large B-cell lymphoma or high grade B-cell lymphoma; and (c) is not performed in conjunction with Item 73365 Applicable only once per lifetime	300	340

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73365	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of MYC gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of Burkitt lymphoma; and (c) is not performed in conjunction with item 73364 Applicable only once per lifetime	255	289
73366	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of either or both of the following: (i) CCND1 gene rearrangement; (ii) CCND2 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of mantle cell lymphoma Applicable only once per lifetime	300	340
73367	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the presence of isochromosome 7q; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of hepatosplenic T-cell lymphoma Applicable only once per lifetime	255	289
73368	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of either or both of the following: (i) DUSP22 gene rearrangement; (ii) TP63 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of ALK negative anaplastic large cell lymphoma Applicable only once per lifetime	300	340
73369	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of blood or bone marrow, requested by a specialist or consultant physician, that: (a) is for the characterisation of either or both of the following: (i) TCL1A gene rearrangement; (ii) MTCP1 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of T-cell prolymphocytic leukaemia Applicable only once per lifetime	300	340
73370	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	500	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of blood or bone marrow, requested by a specialist or consultant physician, that: (a) is for the characterisation of the following: (i) chromosome translocations t(4;14), t(14;16), t(14;20); (ii) 1q gain; (iii) 17p deletion; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of plasma cell myeloma Applicable only once per lifetime	375	425
73371	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the detection of chromosome 1p/19q co-deletion; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of glial neoplasm with probable oligodendroglial component Applicable only once per lifetime	255	289
73372	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the identification of IDH1/2 pathological variant status; and (b) is for a patient with: (i) negative IDH1 (R132H) immunohistochemistry; and (ii) clinical or laboratory evidence, including morphological features, of glial neoplasm Applicable only once per lifetime	255	289
73373	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of MGMT promoter methylation status; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of glioblastoma Applicable only once per lifetime	300	340
73374	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of copy number changes, gene rearrangements, or other molecular changes in one of the following genes: (i) MDM2; (ii) CDK4; (iii) FUS; (iv) DDIT3; (v) EWSR1; (vi) ETV6; (vii) NTRK1; (viii) NTRK3; (ix) COL1A1; (x) PDGFB; (xi) STAT6; (xii) PAX3; (xiii) PAX7; (xiv) SS18; (xv) BCOR; (xvi) CIC; (xvii) HEY1; (xviii) ALK; (xix) USP6; (xx) MAML2; (xxi) NCOA2; (xxii) FOXO1; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of sarcoma Applicable only once per lifetime	255	289
73375	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of copy number changes, gene rearrangements, or other molecular changes, in 2 or 3 of the genes mentioned in item 73374; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of sarcoma Applicable only once per lifetime	300	340
73376	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	800	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of copy number changes, gene rearrangements, or other molecular changes, in 4 or more of the genes mentioned in item 73374; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of sarcoma Applicable only once per lifetime	600	712.1
73377	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	250	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the detection of FOXL2.402CAG>CGG status; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of granulosa cell ovarian tumour Applicable only once per lifetime	187.5	212.5
73378	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of NUTM1 gene status at 15q14; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of midline NUT carcinoma Applicable only once per lifetime	255	289
73379	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of ETV6-NTRK3 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of secretory carcinoma of the breast Applicable only once per lifetime	255	289
73380	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of MAML2 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of mucoepidermoid carcinoma Applicable only once per lifetime	255	289
73381	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of ETV6-NTRK3 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of mammary analogue secretory carcinoma of the salivary gland Applicable only once per lifetime	255	289
73382	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of EWSR1 gene rearrangement, with or without PLAG1 gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of hyalinising clear cell carcinoma of the salivary gland Applicable only once per lifetime	255	289
73383	1/05/2020	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/05/2020	1/05/2020	400	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2020	Analysis of tumour tissue, requested by a specialist or consultant physician, that: (a) is for the characterisation of either or both of the following: (i) TFE3 gene rearrangement; (ii) TFEB gene rearrangement; and (b) is for a patient with clinical or laboratory evidence, including morphological features, of renal cell carcinoma Applicable only once per lifetime	300	340
73384	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	1736	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Genetic analysis, for a patient who is eligible for this service under clause 2.7.3A of the pathology services table (see PR.7.1), of samples from the patient and (if relevant) the patient's reproductive partner, for the purpose of providing an assay for pre-implantation genetic testing, requested by a specialist or consultant physician Applicable not more than once per patient episode per disorder (of a kind described in clause 2.7.3A (PR.7.1)) per reproductive relationship	1302	1648.1
73385	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	635	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Genetic analysis, for a patient who is eligible for this service under clause 2.7.3A of the pathology services table (see PR.7.1), of embryonic tissue from a sample from one embryo, if the analysis is: (a) for the purpose of providing a pre-implantation genetic test; and (b) requested by a specialist or consultant physician; and (c) performed in the assisted reproductive treatment cycle in which the embryo was produced Applicable not more than once per embryo	476.25	547.1
73386	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	1270	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Genetic analysis, for a patient who is eligible for this service under clause 2.7.3A of the pathology services table (see PR.7.1), of embryonic tissue from samples from 2 embryos, if the analysis is: (a) for the purpose of providing a pre-implantation genetic test; and (b) requested by a specialist or consultant physician; and (c) performed in the assisted reproductive treatment cycle in which the embryos were produced Applicable not more than once per assisted reproductive treatment cycle, and not more than once for the 2 embryos tested	952.5	1182.1
73387	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	1905	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Genetic analysis, for a patient who is eligible for this service under clause 2.7.3A of the pathology services table (see PR.7.1), of embryonic tissue from samples from 3 or more embryos, if the analysis is: (a) for the purpose of providing a pre-implantation genetic test; and (b) requested by a specialist or consultant physician; and (c) performed in the assisted reproductive treatment cycle in which the embryos were produced Applicable not more than once per assisted reproductive treatment cycle for the 3 or more embryos tested	1428.75	1817.1
73388	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	589.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Analysis of chromosomes by genome-wide microarray, of a sample from amniocentesis or chorionic villus sampling, including targeted assessment of specific regions for constitutional genetic abnormalities in diagnostic studies of a fetus, if one or more major fetal structural abnormalities have been detected on ultrasound; or nuchal translucency was greater than 3.5 mm Applicable only once per fetus	442.45	502
73389	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	340	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Analysis of products of conception from a patient with suspected hydatidiform mole for the characterisation of ploidy status Applicable once per pregnancy	255	289
73391	1/11/2021	ITable	6	P7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	589.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Analysis of chromosomes by genome-wide microarray in diagnostic studies of a patient with multiple myeloma Applicable once per lifetime	442.45	502
73521	1/12/1991	ITable	6	P8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	9.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/12/1991	Semen examination for presence of spermatozoa or examination of cervical mucus for spermatozoa (Huhner's test)	7.3	8.25
73523	1/12/1991	ITable	6	P8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	41.75	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2007	Semen examination (other than post-vasectomy semen examination), including: (a)measurement of volume, sperm count and motility, and (b)examination of stained preparations, and (c)morphology, and (if performed) (d)differential count and 1 or more chemical tests; (Item is subject to rule 25)	31.35	35.5
73525	1/12/1991	ITable	6	P8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	28.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1994	Sperm antibodies - sperm-penetrating ability - 1 or more tests	21.3	24.1
73527	1/12/1991	ITable	6	P8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	10	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/05/2002	Human chorionic gonadotrophin (HCG) - detection in serum or urine by 1 or more methods for diagnosis of pregnancy - 1 or more tests	7.5	8.5
73529	1/12/1991	ITable	6	P8	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	28.65	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/1999	Human chorionic gonadotrophin (HCG), quantitation in serum by 1 or more methods (except by latex, membrane, strip or other pregnancy test kit) for diagnosis of threatened abortion, or follow up of abortion or diagnosis of ectopic pregnancy, including any services performed in Item 73527 - 1 test	21.5	24.4
73801	1/12/1991	ITable	6	P9	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	6.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1994	Semen examination for presence of spermatozoa	5.2	5.9
73802	1/12/1991	ITable	6	P9	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	4.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1994	Leucocyte count, erythrocyte sedimentation rate, examination of blood film (including differential leucocyte count), haemoglobin, haematocrit or erythrocyte count - 1 test	3.45	3.9
73803	1/12/1991	ITable	6	P9	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	6.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1994	2 tests described in Item 73802	4.8	5.4
73804	1/12/1991	ITable	6	P9	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	8.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/07/1994	3 or more tests described in Item 73802	6.15	6.95
73805	1/12/1991	ITable	6	P9	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	4.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Microscopy of urine, excluding dipstick testing.	3.45	3.9

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73806	1/12/1991	[Table]	6	P9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	10.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1994	Pregnancy test by 1 or more immunochemical methods	7.65	8.65
73807	1/12/1991	[Table]	6	P9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	6.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1994	Microscopy for wet film other than urine, including any relevant stain	5.2	5.9
73808	1/12/1991	[Table]	6	P9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	8.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1994	Microscopy of Gram-stained film, including (if performed) a service described in Item 73805 or 73807	6.5	7.4
73809	1/12/1991	[Table]	6	P9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	2.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	Chemical tests for occult blood in faeces by reagent stick, strip, tablet or similar method	1.8	2
73810	1/12/1991	[Table]	6	P9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	6.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1994	Microscopy for fungi in skin, hair or nails - 1 or more sites	5.2	5.9
73811	1/12/1991	[Table]	6	P9	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/02/1992	1/01/2013	11.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/02/1992	Mantoux test	8.4	9.55
73812	1/11/2021	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	11.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Quantitation of glycated haemoglobin (HbA1c) performed in the management of established diabetes when performed: (a) as a point-of-care test; and (b) by or on behalf of a medical practitioner who works in a general practice that is accredited against the point of care testing accreditation module under the National General Practice Accreditation Scheme; and (c) using a method and instrument certified by the National Glycohemoglobin Standardisation Program (NGSP), if the instrument has a total coefficient variation less than 3.0% at 48 mmol/mol (6.5%). Applicable not more than 3 times per 12 months per patient.	8.85	10.05
73826	1/11/2021	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/11/2021	1/11/2021	11.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2021	Quantitation of glycated haemoglobin (HbA1c) performed by a participating nurse practitioner in the management of established diabetes when performed: (a) as a point-of-care test; and (b) by a nurse practitioner who works in a general practice that is accredited against the point of care testing accreditation module under the National General Practice Accreditation Scheme; and (c) using a method and instrument certified by the National Glycohemoglobin Standardisation Program (NGSP), if the instrument has a total coefficient variation less than 3.0% at 48 mmol/mol (6.5%). Applicable not more than 3 times per 12 months per patient.	8.85	10.05
73828	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	6.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Semen examination for presence of spermatozoa by a participating nurse practitioner		5.9
73829	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	4.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Leucocyte count, erythrocyte sedimentation rate, examination of blood film (including differential leucocyte count), haemoglobin, haematocrit or erythrocyte count by a participating nurse practitioner-1 test		3.9
73830	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	6.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	2 tests described in Item 73829 by a participating nurse practitioner		5.4
73831	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	8.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	3 or more tests described in Item 73829 by a participating nurse practitioner		6.95
73832	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	4.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Microscopy of urine,excluding dipstick testingby a participating nurse practitioner.		3.9
73833	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	10.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Pregnancy test by 1 or more immunochemical methods by a participating nurse practitioner		8.65
73834	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	6.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Microscopy for wet film other than urine, including any relevant stain by a participating nurse practitioner		5.9
73835	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	8.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Microscopy of Gram-stained film, including (if performed) a service described in Item 73832 or 73834 by a participating nurse practitioner		7.4
73836	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	2.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Chemical tests for occult blood in faeces by reagent stick, strip, tablet or similar method by a participating nurse practitioner		2
73837	1/11/2011	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	B	C	1/11/2011	1/01/2013	6.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Microscopy for fungi in skin, hair or nails by a participating nurse practitioner- 1 or more sites		5.9
73839	1/12/2015	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/12/2015	1/12/2015	16.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	16/03/2018	Quantitation of glycosylated haemoglobin performed for the diagnosis of diabetes in asymptomatic patients at high risk - not more than once in a 12 month period. (Item is subject to restrictions in rule PR.9.1 of explanatory notes to this category)	12.6	14.3
73840	1/12/2000	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/12/2000	1/01/2013	17	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	16/03/2018	Quantitation of glycosylated haemoglobin performed in the management of established diabetes – each test is a maximum of 4 tests in a 12 month period. (Item is subject to restrictions in rule PR.9.1 of explanatory notes to this category)	12.75	14.45
73844	1/01/2006	[Table]	6	P9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	C	1/01/2006	1/01/2013	20.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2011	Quantitation of urinary albumin/creatine ratio in urine on a random spot collection in the management of patients with established diabetes or patients at risk of microalbuminuria.	15.3	17.3
73899	1/11/2015	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2015	1/11/2015	5.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2015	Initiation of a patient episode that consists of a service described in Item 72858 or 72859 in circumstances other than those mentioned in Item 73900	4.5	5.1
73900	1/11/2015	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2015	1/11/2015	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2015	Initiation of a patient episode that consists of a service described in Item 72858 or 72859 if the service is rendered in a prescribed laboratory.	1.8	2.05
73920	1/07/2008	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/2008	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	Initiation of a patient episode by collection of a specimen for 1 or more services (other than those services described in Items 73922, 73924 or 73926) if the specimen is collected in an approved collection centre that the APA operates in the same premises as it operates a category GX or GY pathology laboratory	1.8	2.05
73922	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	8.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Initiation of a patient episode that consists of a service described in Item 73070, 73071, 73072, 73073, 73074, 73075 or 73076(in circumstances other than those described in Item 73923).	6.15	7
73923	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/2017	Initiation of a patient episode that consists of a service described in Item 73070, 73071, 73072, 73073, 73074, 73075 or 73076 if: (a) the person is a private patient in a recognised hospital; or (b) the person receives the service from a prescribed laboratory	1.8	2.05
73924	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	14.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	Initiation of a patient episode that consists of 1 or more services described in Items 72813, 72816, 72817, 72818, 72823, 72824, 72825, 72826, 72827, 72828, 72830, 72836 and 72838 (in circumstances other than those described in Item 73925) from a person who is an in-patient of a hospital.	11	12.5
73925	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	Initiation of a patient episode that consists of 1 or more services described in Items 72813, 72816, 72817, 72818, 72823, 72824, 72825, 72826, 72827, 72828, 72830, 72836 and 72838 if the person is: (a)a private patient of a recognised hospital;or (b) a private patient of a hospital who receives the service or services from a prescribed laboratory.	1.8	2.05
73926	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	8.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	Initiation of a patient episode that consists of 1 or more services described in Items 72813, 72816, 72817, 72818, 72823, 72824, 72825, 72826, 72827, 72828, 72830, 72836 and 72838 (in circumstances other than those described in Item 73927) from a person who is not a patient of a hospital.	6.15	7
73927	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	Initiation of a patient episode by a prescribed laboratory that consists of 1 or more services described in Items, 72813, 72816, 72817, 72818, 72823, 72824, 72825, 72826, 72827, 72828, 72830, 72836 and 72838 from a person who is not a patient of a hospital.	1.8	2.05
73928	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	5.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2008	Initiation of a patient episode by collection of a specimen for 1 or moreservices (other than those services described in Items 73922, 73924 or 73926) if the specimen is collected in an approved collection centre. Unless item 73920 or 73929 applies	4.5	5.1
73929	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services(other than those services described in Items 73922, 73924 or 73926) if the specimen is collected by an approved pathology practitioner for a prescribed laboratory or by an employee of an approved pathology authority, who conducts a prescribed laboratory, if the specimen is collected in an approved pathology collection centre	1.8	2.05
73930	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	5.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for a service for 1 or more services (other than those services described in Items 73922, 73924 or 73926) if the specimen is collected by an approved pathology practitioner or an employee of an approved pathology authority from a person who is an in-patient of a hospital other than a recognised hospital. Unless Item 73931 applies	4.5	5.1
73931	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services(other than those services described in Items 73922, 73924 or 73926) if: (the specimen is collected by an approved pathology practitioner for a prescribed laboratory or by an employee of an approved pathology authority, who conducts a prescribed laboratory, from a person who is a private patient in a hospital or (i) the person is a private patient in a recognised hospital and the specimen is collected by an approved pathology practitioner or an employee of an approved pathology authority	1.8	2.05
73932	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	10.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services (other than those services described in Items 73922, 73924 or 73926) if the specimen is collected by an approved pathology practitioner or an employee of an approved pathology authority from a person in the place where the person was residing. Unless item 73933 applies	7.7	8.75
73933	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services(other than those services described in Items 73922, 73924 or 73926) if the specimen is collected by an approved pathology practitioner for a prescribed laboratory or by an employee of an approved pathology authority, who conducts a prescribed laboratory, from a person in the place where the person is residing	1.8	2.05
73934	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	17.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services (other than those services described in Items 73922, 73924 and 73926) if the specimen is collected by an approved pathology practitioner or an employee of an approved pathology authority from a person in a residential aged care home or institution. Unless 73935 applies	13.2	15
73935	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services(other than those services described in Items 73922, 73924 or 73926) if the specimen is collected by an approved pathology practitioner or by an employee of an approved pathology authority, who conducts a prescribed laboratory, from a person in a residential aged care home or institution	1.8	2.05
73936	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	5.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services (other than those services described in Items 73922, 73924 or 73926) if the specimen is collected from the person by the person.	4.5	5.1
73937	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services(other than those services described in Items 73922, 73924 or 73926), if the specimen is collected from the person by the person and if: ()the service is performed in a prescribed laboratory or ()the person is a private patient in a recognised hospital	1.8	2.05
73938	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	7.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services (other than those services described in Items 73922, 73924 or 73926) if the specimen is collected by or on behalf of the treating practitioner. Unless item 73939 applies	6	6.8
73939	1/05/2007	[Table]	6	P10	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	2.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Initiation of a patient episode by collection of a specimen for 1 or more services(other than those services described in Items 73922, 73924 or 73926), if the specimen is collected by or on behalf of the treating practitioner and if: ()the service is performed in a prescribed laboratory or ()the person is a private patient in a recognised hospital	1.8	2.05
73940	1/05/2007	[Table]	6	P11	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/05/2007	1/01/2013	10.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2007	Receipt of a specimen by an approved pathology practitioner of an approved pathology authority from another approved pathology practitioner of a different approved pathology authority or another approved pathology authority (Item is subject to rules 14, 15 and 16)	7.7	8.75

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74990	1/02/2004	[Table]	6	P12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	7.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A pathology service to which an item in this table (other than this item or item 74991, 75861, 75862, 75863 or 75864) applies if: (a)the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a Commonwealth concession-card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this table applying to the service	6.15
74991	1/05/2004	[Table]	6	P12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	10.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A pathology service to which an item in this table (other than this item or items 74990, 75861, 75862, 75863 or 75864) applies if: (a)the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a Commonwealth concession-card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this table applying to the service; and (e) the service is provided at, or from, a practice location in a Modified Monash 2 area.	9.3
74992	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	1.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2009	A payment when the episode is bulk billed and includes item 73920.	1.2	1.4
74993	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	3.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	A payment when the episode is bulk billed and includes item 73922 or 73926.	2.85	3.2
74994	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	3.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	A payment when the episode is bulk billed and includes item 73924.	2.45	2.8
74995	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2015	A payment when the episode is bulk billed and includes item 73899, 73900, 73928, 73930 or 73936.	3	3.4
74996	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	3.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2009	A payment when the episode is bulk billed and includes item 73932 or 73940.	2.8	3.15
74997	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	3.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2009	A payment when the episode is bulk billed and includes item 73934.	2.5	2.85
74998	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2009	A payment when the episode is bulk billed and includes item 73938.	1.5	1.7
74999	1/11/2009	[Table]	6	P13	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/11/2009	1/11/2009	1.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/05/2012	A payment when the episode is bulk billed and includes item 73923, 73925, 73927, 73929, 73931, 73933, 73935, 73937 or 73939.	1.2	1.4
75861	1/01/2022	[Table]	6	P12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	11.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A pathology service to which an item in this table (other than this item or item 74990, 74991, 75862, 75863 or 75864) applies if: (a)the service is an unreferred service; and (b)the service is rendered to a person who is under the age of 16 or is a concessional beneficiary; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii) the other item in this Schedule applying to the service; and (e) the service is rendered at, or from, a practice location in: (i) a Modified Monash 3 area; or (ii) a Modified Monash 4 area	9.85
75862	1/01/2022	[Table]	6	P12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	12.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A pathology service to which an item in this table (other than this item or item 74990, 74991, 75861, 75863 or 75864) applies if: (a)the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a Commonwealth concession-card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii)the other item in this Schedule applying to the service; and (e)the service is rendered at, or from, a practice location in a Modified Monash 1 area	10.45
75863	1/01/2022	[Table]	6	P12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	13	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A pathology service to which an item in this table (other than this item or item 74990, 74991, 75861, 75862 or 75864) applies if: (a)the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a Commonwealth concession-card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i)this item; and (ii) the other item in this Schedule applying to the service; and (e)the service is rendered at, or from, a practice location in a Modified Monash 6 area	11.05
75864	1/01/2022	[Table]	6	P12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	14.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A pathology service to which an item in this table (other than this item or item 74990, 74991, 75862 or 75863) applies if: (a)the service is an unreferred service; and (b)the service is rendered to a person who is under the age of 16 or is a Commonwealth concession-card holder; and (c)the person is not an admitted patient of a hospital; and (d)the service is bulk-billed in respect of the fees for: (i) this item; and (ii) the other item in this Schedule applying to the service; and (e) the service is rendered at, or from, a practice location in a Modified Monash 7 area	12.15
75001	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	C	1/07/1995	1/07/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Note: In this Group, benefit is only payable where the service has been rendered to a patient by a dental practitioner who is registered in the specialty of orthodontics, except for the services covered by items 75009-75023 which may also be rendered by a medical practitioner who is a specialist in the practice of his or her specialty of oral and maxillofacial surgery. CONSULTATION/INITIAL PROFESSIONAL ATTENDANCE in a single course of treatment by an eligible orthodontist (AO)	66.75	75.65
75004	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	C	1/07/1995	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	PROFESSIONAL ATTENDANCE by an eligible orthodontist subsequent to the first professional attendance by the orthodontist in a single course of treatment (AO)	33.6	38.05
75006	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	79.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PRODUCTION OF DENTAL STUDY MODELS (not being a service associated with a service to which Item 75004 applies) prior to provision of a service to which: (a)Item 75030, 75033, 75034, 75036, 75037, 75039, 75045 or 75051 applies; or (b)an item in Group T8 or Groups G1 to G9 applies; in a single course of treatment	59.5	67.45
75009	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	70.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	RADIOGRAPHY ORTHODONTIC RADIOGRAPHY orthopantomography (panoramic radiography), including any consultation on the same occasion	53.25	60.35
75012	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	112.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	ORTHODONTIC RADIOGRAPHY/ANTEROPOSTERIOR CEPHALOMETRIC RADIOGRAPHY with cephalometric tracings OR LATERAL CEPHALOMETRIC RADIOGRAPHY with cephalometric tracings including any consultation on the same occasion	84.35	95.6
75015	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	154.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	ORTHODONTIC RADIOGRAPHY/ANTEROPOSTERIOR AND LATERAL CEPHALOMETRIC RADIOGRAPHY, with cephalometric tracings including any consultation on the same occasion	115.95	131.45
75018	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	196.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	ORTHODONTIC RADIOGRAPHY/ANTEROPOSTERIOR AND LATERAL CEPHALOMETRIC RADIOGRAPHY, with cephalometric tracings and orthopantomography including any consultation on the same occasion	147.75	167.45
75021	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	241.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	ORTHODONTIC RADIOGRAPHY/hand-wrist studies (including growth prediction) including any consultation on the same occasion	181.1	205.25
75023	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	48.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	INTRAORAL RADIOGRAPHY - single area, periapical or bitewing film	36.3	41.1
75024	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	474.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PRESURGICAL INFANT MAXILLARY ARCH REPOSITIONING PRESURGICAL INFANT MAXILLARY ARCH REPOSITIONING including supply of appliances and all adjustments of appliances and supervision - WHERE 1 APPLIANCE IS USED	468.1	536.5
75027	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	558.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PRESURGICAL INFANT MAXILLARY ARCH REPOSITIONING including supply of appliances and all adjustments of appliances and supervisionWHERE 2 APPLIANCES ARE USED	642.2	768.35
75030	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	762.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	DENTITION TREATMENT MAXILLARY ARCH EXPANSION not being a service associated with a service to which Item 75039, 75042, 75045 or 75048 applies, including supply of appliances, all adjustments of the appliances, removal of the appliances and retention	571.8	674.45
75033	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1265.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	MIXED DENTITION TREATMENT - Incisor alignment using fixed appliances in maxillary arch, including supply of appliances, all adjustments of appliances, removal of the appliances and retention	937.2	1161.7
75034	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	636	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	MIXED DENTITION TREATMENT - Incisor alignment with or without lateral arch expansion using a removable appliance in the maxillary arch, including supply of appliances, associated adjustments and retention	477	548.1
75036	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1725	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	MIXED DENTITION TREATMENT - lateral arch expansion and incisor alignment using fixed appliances in maxillary arch, including supply of appliances, all adjustments of appliances, removal of appliances and retention	1294.5	1638.1
75037	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	2173.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	MIXED DENTITION TREATMENT - lateral arch expansion and incisor correction - 2 arch (maxillary and mandibular) using fixed appliances in both maxillary and mandibular arches, including supply of appliances, all adjustments of appliances, removal of appliances and retention	1630.4	2085.95
75039	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	577.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PERMANENT DENTITION TREATMENTSINGLE ARCH (mandibular or maxillary) TREATMENT (correction and alignment) using fixed appliances, including supply of appliances - initial 3 months of active treatment	433.35	491.1
75042	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	215.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PERMANENT DENTITION TREATMENT - SINGLE ARCH (mandibular or maxillary) TREATMENT (correction and alignment) using fixed appliances, including supply of appliances - each 3 months of active treatment (including all adjustments and maintenance and removal of the appliances) after the first for a maximum of a further 33 months	162	183.6
75045	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1156.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PERMANENT DENTITION TREATMENT2 ARCH (mandibular and maxillary) TREATMENT (correction and alignment) using fixed appliances, including supply of appliances - initial 3 months of active treatment	867.45	1068.7
75048	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	296.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	PERMANENT DENTITION TREATMENT - 2 ARCH (mandibular and maxillary) TREATMENT (correction and alignment) using fixed appliances, including supply of appliances - each subsequent 3 months of active treatment (including all adjustments and maintenance, and removal of the appliances) after the first for a maximum of a further 33 months	222.45	252.15
75049	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	347.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	RETENTION, FIXED OR REMOVABLE, single arch (mandibular or maxillary) - supply of retainer and supervision of retention	260.4	295.1
75050	1/07/1995	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	670.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	RETENTION, FIXED OR REMOVABLE, 2-arch (mandibular and maxillary) - supply of retainers and supervision of retention	502.65	582.25
75051	1/12/1991	[Table]	7	C1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1028.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/1995	JAW GROWTH GUIDANCE JAW GROWTH guidance using removable or functional appliances, including supply of appliances and all adjustments to appliances	771.55	940.8
75150	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	C	1/07/1995	1/07/2021	89	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Note:(i) In this Group, benefit is only payable where the service has been rendered to a patient who has been referred by an eligibleorthodontist. (ii)While benefit is payable for simple extractions performed by a registered dental practitioner, benefit is only payable for surgical extractions and other surgical procedures where the service is rendered by amedical practitioner who is a specialist in the practice of his or her specialty of oral and maxillofacial surgery. CONSULTATION/INITIAL PROFESSIONAL attendance in a single course of treatment by an eligible oral and maxillofacial surgeon where the patient is referred to the surgeon by an eligible orthodontist (AOS)	66.75	75.65
75153	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	P	C	1/07/1995	1/07/2021	44.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	PROFESSIONAL ATTENDANCE by an eligible oral and maxillofacial surgeon subsequent to the first professional attendance by the surgeon in a single course of treatment where the patient is referred to the surgeon by an eligible orthodontist	33.6	38.05
75156	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	C	1/07/1995	1/07/2021	79.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	PRODUCTION OF DENTAL STUDY MODELS (not being a service associated with a service to which Item 75153 applies) prior to provision of a service: (a)to which Item 52321, 52322 or 75618 applies; or (b)to which an item in the series 52330 to 52382, 53600 to 53630, 53400 to 53400 or 53415 to 53429 applies; in a single course of treatment if the patient is referred by an eligible orthodontist (AOS)	59.5	67.45

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75200	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	57.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	SIMPLE EXTRACTIONS Removal of tooth or tooth fragment (other than treatment to which item 75400, 75403, 75406, 75409, 75412 or 75415 applies), if the patient is referred by an eligible orthodontist (ADS)	42.9	48.6
75203	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	85.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	REMOVAL OF TOOTH OR TOOTH FRAGMENT under general anaesthesia, if the patient is referred by an eligible orthodontist (ADS)	64.35	72.9
75206	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Removal of each additional tooth or tooth fragment at the same attendance at which a service to which item 75200 or 75203 applies is rendered, if the patient is referred by an eligible orthodontist (ADS)	21.35	24.2
75400	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	171.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	SURGICAL EXTRACTIONS Surgical removal of erupted tooth, if the patient is referred by an eligible orthodontist (ADS)	128.6	145.75
75403	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	196.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical removal of tooth with soft tissue impaction, if the patient is referred by an eligible orthodontist (ADS)	147.75	167.45
75406	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	224.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical removal of tooth with partial bone impaction, if the patient is referred by an eligible orthodontist (ADS)	168.3	190.75
75409	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	254.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical removal of tooth with complete bone impaction, if the patient is referred by an eligible orthodontist (ADS)	190.6	216
75412	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	141.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical removal of tooth fragment requiring incision of soft tissue only, if the patient is referred by an eligible orthodontist (ADS)	106.5	120.7
75415	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	171.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical removal of tooth fragment requiring removal of bone, if the patient is referred by an eligible orthodontist (ADS)	128.6	145.75
75600	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	241.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	OTHER SURGICAL PROCEDURES Surgical exposure, stimulation and packing of unerupted tooth, if the patient is referred by an eligible orthodontist (ADS)	181.1	205.25
75603	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	283.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical exposure of unerupted tooth for the purpose of fitting a traction device, if the patient is referred by an eligible orthodontist (ADS)	212.85	241.25
75606	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	283.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical repositioning of unerupted tooth, if the patient is referred by an eligible orthodontist (ADS)	212.85	241.25
75609	1/12/1991	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	423.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Transplantation of tooth bud, if the patient is referred by an eligible orthodontist (ADS)	317.75	360.15
75612	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	524.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical procedure for intra oral implantation of osseointegrated fixture (first stage), if the patient is referred by an eligible orthodontist (ADS)	393.25	445.7
75615	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	194.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Surgical procedure for fixation of trans mucosal abutment (second stage of osseointegrated implant), if the patient is referred by an eligible orthodontist (ADS)	145.6	165
75618	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	241	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Provision and fitting of a bite rising appliance or dental splint for the management of temporomandibular joint dysfunction syndrome, if the patient is referred by an eligible orthodontist (ADS)	180.75	204.85
75621	1/07/1995	[Table]	7	C2	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/07/1995	1/07/2021	241	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	The provision and fitting of surgical templates in conjunction with orthognathic surgical procedures in association with: (a)an item in the range: (14572)0 to 45754; or (i)(E)2342 to 52375; or (b)item 52380 or 52382; if the patient is referred by an eligible orthodontist (ADS)	180.75	204.85
75800	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	85.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	Note: Benefit is payable for services listed in this Group where they are rendered by a registered dental practitioner, CONSULTATING ATTENDANCE BY AN ELIGIBLE DENTAL PRACTITIONER involving consultation, diagnosis, treatment and prophylaxis, of not less than 30 minutes' duraticneach attendance to a maximum of 3 attendances in any period of 12 months	64.35	72.9
75803	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	341.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/1991	PROSTHODONTIC PROVISION AND FITTING OF ACRYLIC BASE PARTIAL DENTURE, including retainers1 TOOTH	257.4	291.7
75806	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	402.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF ACRYLIC BASE PARTIAL DENTURE, including retainers 2 TEETH	301.85	342.1
75809	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	476.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF ACRYLIC BASE PARTIAL DENTURE, including retainers 3 TEETH	357.45	405.1
75812	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	529.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF ACRYLIC BASE PARTIAL DENTURE, including retainers 4 TEETH	397.1	450.05
75815	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	646.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF ACRYLIC BASE PARTIAL DENTURE, including retainers 5 TO 9 TEETH	484.55	558.15
75818	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	762.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF ACRYLIC BASE PARTIAL DENTURE, including retainers 10 TO 12 TEETH	571.8	674.45
75821	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	614.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PROVISION AND FITTING OF CAST METAL BASE (cobalt chromium alloy) PARTIAL DENTURE including casting and retainers 1 TOOTH	460.6	536.2
75824	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	709.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF CAST METAL BASE (cobalt chromium alloy) PARTIAL DENTURE including casting and retainers2 TEETH	532.1	621.55
75827	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	815.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF CAST METAL BASE (cobalt chromium alloy) PARTIAL DENTURE including casting and retainers 3 TEETH	611.65	727.6
75830	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	900.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF CAST METAL BASE (cobalt chromium alloy) PARTIAL DENTURE including casting and retainers 4 TEETH	675.15	812.3
75833	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1101.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF CAST METAL BASE (cobalt chromium alloy) PARTIAL DENTURE including casting and retainers 5 TO 9 TEETH	825.95	1013.35
75836	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	1260.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	PROVISION AND FITTING OF CAST METAL BASE (cobalt chromium alloy) PARTIAL DENTURE including casting and retainers 10 TO 12 TEETH	945.15	1172.25
75839	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	28.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	PROVISION AND FITTING OF RETAINERS not being a service associated with a service to which item 75803, 75806, 75809, 75812, 75815, 75818, 75821, 75824, 75827, 75830, 75833 or 75836 appleseach retainer	21.35	24.2
75842	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	42.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ADJUSTMENT OF PARTIAL DENTURE not being a service associated with a service to which item 75803, 75806, 75809, 75812, 75815, 75818, 75821, 75824, 75827, 75830, 75833 or 75836 applies	31.8	36.05
75845	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	211.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	RELINING OF PARTIAL DENTURE by laboratory process and associated fitting	158.95	180.15
75848	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	264.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	REMODELLING AND FITTING OF PARTIAL DENTURE of more than 4 teeth	190.6	216
75851	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	127.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	REPAIR TO CAST METAL BASE OF PARTIAL DENTURE1 or more points	95.35	108.05
75854	1/12/1991	[Table]	7	C3	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	C	1/12/1991	1/07/2021	127.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/12/1991	ADDITION OF A TOOTH OR TEETH to a partial denture to replace extracted tooth or teeth including taking of necessary impression	95.35	108.05
10950	1/07/2004	[Table]	8	M3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH SERVICE Aboriginal or Torres Strait Islander health service provided to a person by an eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum of five services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year		55.1
10951	1/11/2004	[Table]	8	M3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	DIABETES EDUCATION SERVICE Diabetes education health service provided to a person by an eligible diabetes educator if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum of five services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year		55.1

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10952	1/07/2004	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	AUDIOLOGY Audiology health service provided to a person by an eligible audiologist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared can plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible audiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible audiologist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10953	1/01/2006	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/01/2006	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	EXERCISE PHYSIOLOGY Exercise physiology service provided to a person by an eligible exercise physiologist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or underboth a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10954	1/07/2004	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	DIETETICS SERVICES Dietetics health service provided to a person by an eligible dietician if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible dietician by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible dietician gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10955	1/11/2021	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2021	1/11/2021	50.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/11/2021	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged-care facility; if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which another item in this Group applies)	43.25
10956	1/07/2004	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	MENTAL HEALTH SERVICE Mental health service provided to a person by an eligible mental health worker if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible mental health worker by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible mental health worker gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10957	1/11/2021	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2021	1/11/2021	87.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/11/2021	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged-care facility; if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which another item in this Group applies)	74.1
10958	1/07/2004	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	OCCUPATIONAL THERAPY Occupational therapy health service provided to a person by an eligible occupational therapist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible occupational therapist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10959	1/11/2021	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2021	1/11/2021	145.1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/11/2021	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged-care facility; if the conference lasts for at least 40 minutes (other than a service associated with a service to which another item in this Group applies)	123.35
10960	1/07/2004	ITable1	8	M3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	PHYSIOTHERAPY Physiotherapy health service provided to a person by an eligible physiotherapist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or; if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care planas part of the management of the person's chronic condition andcomplex care needs; and (c)the person is referred to the eligible physiotherapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible physiotherapist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1

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10962	1/07/2004	ITable]	8	M3	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	10/12/2020	PODIATRY Podiatry health service provided to a person by an eligible podiatrist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements,multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible podiatrist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible podiatrist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10964	1/07/2004	ITable]	8	M3	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	10/12/2020	CHIROPRACTIC SERVICE Chiropractic health service provided to a person by an eligible chiropractor if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible chiropractor by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible chiropractor gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10966	1/07/2004	ITable]	8	M3	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	10/12/2020	OSTEOPATHY Osteopathy health service provided to a person by an eligible osteopath if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible osteopath by the medical practitioner using a referral form that has been issued by the Departmentor a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible osteopath gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10968	1/07/2004	ITable]	8	M3	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	10/12/2020	PSYCHOLOGY Psychology health service provided to a person by an eligible psychologist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements,multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible psychologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible psychologist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10970	1/07/2004	ITable]	8	M3	ITable]	ITable]	D	N	ITable]	N	N	N	N	N	N	P	B	1/11/2004	1/07/2021	64.8	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	10/12/2020	SPEECH PATHOLOGY Speech pathology health service provided to a person by an eligible speech pathologist if: (a)the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b)the service is recommended in the person's Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person's chronic condition and complex care needs; and (c)the person is referred to the eligible speech pathologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 20 minutes duration; and (g)after the service, the eligible speech pathologist gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and (h)for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services (including any services to which items 10950 to 10970, 93000, 93013, 93501 to 93513 and 93524 to 93538apply) in a calendar year	55.1
10983	1/07/2011	ITable]	8	M12	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/07/2011	1/07/2021	33.7	33.7	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	Attendance by a practice nurse, an Aboriginal health worker or an Aboriginal and Torres Strait Islander health practitioner on behalf of, and under the supervision of, a medical practitioner, to provide clinical support to a patient who: (a)is participating in a video conferencing consultation with a specialist, consultant physician or psychiatrist; and (b)is not an admitted patient
10987	1/11/2008	ITable]	8	M12	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/11/2008	1/07/2021	24.95	24.95	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2012	Follow up service provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner, on behalf of a medical practitioner, for an Indigenous person who has received a health assessment if: a)The service is provided on behalf of and under the supervision of a medical practitioner; and b)the person is not an admitted patient of a hospital; and c)the service is consistent with the needs identified through the health assessment; -to a maximum of 10 services per patient in a calendar year
10988	1/05/2006	ITable]	8	M12	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	P	E	1/05/2006	1/07/2021	12.5	12.5	ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/07/2012	Immunisation provided to a person by an Aboriginal and Torres Strait Islander health practitioner if: (a)the immunisation is provided on behalf of, and under the supervision of, a medical practitioner; and (b)the person is not an admitted patient of a hospital.
10989	1/05/2006	[Table]	8	M12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/05/2006	1/07/2021	12.5	12.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2012	Treatment of a person's wound (other than normal aftercare) provided by an Aboriginal and Torres Strait Islander health practitioner if: (a)the treatment is provided on behalf of, and under the supervision of, a medical practitioner; and (b)the person is not an admitted patient of a hospital.
10990	1/02/2004	ITable]	8	M1	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	7.65		ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	A medical service to which an item in this Schedule (other than this item or item 10991, 10992, 75855, 75856, 75857 or 75858) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (c) the person is not an admitted patient of a hospital; and (d) the service is bulk-billed in relation to the fees for: (i) this item; and (ii) the other item in this Schedule applying to the service
10991	1/05/2004	ITable]	8	M1	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	B	1/11/2004	1/07/2021	11.6		ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	A medical service to which an item in this Schedule (other than this item or item 10990, 10992, 75855, 75856, 75857 or 75858) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (c) the person is not an admitted patient of a hospital; and (d) the service is bulk-billed in relation to the fees for: (i) this item; and (ii) the other item in this Schedule applying to the service; and (e) the service is provided at, or from, a practice location in a Modified Monash 2 area	9.9
10992	1/01/2005	ITable]	8	M1	ITable]	ITable]	S	N	ITable]	N	N	N	N	N	N	N	B	1/01/2005	1/07/2021	11.6		ITable]	ITable]	ITable]	ITable]	ITable]	ITable]	1/01/2022	A medical service to which: (a) item685, 588, 591, 594, 599, 600, 5003, 5010, 5023, 5028, 5043, 5049, 5063, 5067, 5120, 5121, 5127, 5128, 5360, 5363, 5365 or 5367 applies; or (b) item761, 763, 766, 769, 772, 776, 788 or 789 of a Schedule (within the meaning of the Health Insurance (Section3C General Medical Services – Other Medical Practitioner) Determination2018) applies; if: (c) the service is an unreferred service; and (d) the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (e) the persons not an admitted patient of a hospital; and (f) the service is not provided in consulting rooms; and (g) the service is provided in any of the following areas: (i) a Modified Monash 2 area; (ii) a Modified Monash 3 area; (iii) a Modified Monash 4 area; (iv) a Modified Monash 5 area; (v) a Modified Monash 6 area; (vi) a Modified Monash 7 area; and (h) the service is provided by, or on behalf of, a medical practitioner whose practice location is not inan area mentioned in paragraphg); and (i) the service is bulk-billed in relation to the fees for: (i) this item; and (ii) the other item mentioned in paragraph(a) or (b) applying to the service	9.9

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10997	1/07/2007	[Table]	8	M12	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	E	1/07/2007	1/07/2021	12.5	12.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/07/2012	Service provided to a person with a chronic disease by a practice nurse or an Aboriginal and Torres Strait Islander health practitioner if: (a) the service is provided on behalf of and under the supervision of a medical practitioner; and (b) the person is not an admitted patient of a hospital; and (c) the person has a GP Management Plan, Team Care Arrangements or Multidisciplinary Care Plan in place; and (d) the service is consistent with the GP Management Plan, Team Care Arrangements or Multidisciplinary Care Plan to a maximum of 5 services per patient in a calendar year
75855	1/01/2022	[Table]	8	M1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	12.3		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A medical service to which an item in this table (other than this item or item 10990, 10991, 10992, 75856, 75857 or 75858) applies if: (a) the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (c) the person is not an admitted patient of a hospital: and (d) the service is bulk-billed in respect of the fees for: (i) this item and (ii) the other item in this Schedule applying to the service; and (e)the service is provided at, or from, a practice location in: (i) a Modified Monash 3 area; or (ii) a Modified Monash 4 area 10.5
75856	1/01/2022	[Table]	8	M1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	13.1		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A medical service to which an item in this table (other than this item or item 10990, 10991, 10992, 75855, 75857 or 75858) applies if: (a) the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (c) the person is not an admitted patient of a hospital: and (d) the service is bulk-billed in respect of the fees for: (i) this item and (ii)the other item in this Schedule applying to the service; and (e)the service is provided at, or from, a practice location in a Modified Monash 5 area 11.15
75857	1/01/2022	[Table]	8	M1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	13.85		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A medical service to which an item in this table (other than this item or item 10990, 10991, 10992, 75855, 75856 or 75858) applies if: (a) the service is an unreferred service; and (b) the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (c) the person is not an admitted patient of a hospital: and (d) the service is bulk-billed in respect of the fees for: (i) this item and (ii) the other item in this Schedule applying to the service; and (e)the service is provided at, or from, a practice location in a Modified Monash 6 area 11.8
75858	1/01/2022	[Table]	8	M1	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	1/01/2022	1/01/2022	14.65		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	A medical service to which an item in this table (other than this item or item 10990, 10991, 10992, 75855, 75856 or 75857) applies if: (a) the service is an unreferred service; and (b)the service is provided to a person who is under the age of 16 or is a concessional beneficiary; and (c) the person is not an admitted patient of a hospital: and (d) the service is bulk-billed in respect of the fees for: (i) this item and (ii)the other item in this Schedule applying to the service; and (e)the service is provided at, or from, a practice location in a Modified Monash 7 area 12.5
80000	1/11/2006	[Table]	8	M6	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	103.8		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing psychological assessment and therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting more than 30 minutes but less than 50 minutes, where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional attendance at consulting rooms) 88.25
80001	1/11/2017	[Table]	8	M6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	103.8		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing psychological assessment and therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting more than 30 minutes but less than 50 minutes, where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist. Psychological therapy services delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80001, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Psychological therapy services delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply. 88.25
80005	1/11/2006	[Table]	8	M6	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	129.7		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at a place other than consulting rooms. As per the service requirements outlined for item 80000. 110.25
80010	1/11/2006	[Table]	8	M6	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	152.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing psychological assessment and therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting at least 50 minutes, where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance , at least 15 kilometres by road from the clinical psychologist. Psychological therapy services delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80000, 80010, 80020, 80111, 80126, 80136, 80151 and 80161 apply). Psychological therapy services delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply. (Professional attendance at consulting rooms) 129.55
80011	1/11/2017	[Table]	8	M6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	152.4		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing psychological assessment and therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting at least 50 minutes, where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance , at least 15 kilometres by road from the clinical psychologist. Psychological therapy services delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80000, 80010, 80020, 80111, 80126, 80136, 80151 and 80161 apply). Psychological therapy services delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply. 129.55
80015	1/11/2006	[Table]	8	M6	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	178.3		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at a place other than consulting rooms As per the service requirements outlined for item 80010. 151.6
80020	1/11/2006	[Table]	8	M6	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	38.7		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing psychological therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 80020, 80021, 80123, 80121, 80145, 80146, 80170 and 80171 apply). GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT 32.9
80021	1/11/2017	[Table]	8	M6	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	38.7		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing psychological therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist. Group psychological therapy services delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80020, 80021, 80146 and 80171 apply). Group psychological therapy services delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 80020, 80120, 80145 and 80170 apply. - GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT 32.9
80100	1/11/2006	[Table]	8	M7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	73.55		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional attendance at consulting rooms) 62.55
80101	1/11/2017	[Table]	8	M7	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	73.55		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist. Focussed psychological strategies delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80001, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply. 62.55
80105	1/11/2006	[Table]	8	M7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	100.05		[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2006	Professional attendance at a place other than consulting rooms. As per the psychologist service requirements outlined for item 80100. 85.05

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80110	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional attendance at consulting rooms)	88.25
80111	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.If the attendance is by video conference, and the patient is not an admitted patient; and the patient is located within a telehealth-eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist. Focussed psychological strategies delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80021, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply.	88.25
80115	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	130.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	Professional attendance at a place other than consulting rooms. As per the psychologist service requirements outlined for item 80110.	110.8
80120	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	26.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 80020, 80021, 80120, 80121, 80145, 80146, 80170 and 80171 apply). GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT	22.55
80121	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	26.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.If the attendance is by video conference, and the patient is not an admitted patient; and the patient is located within a telehealth-eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist. Group focussed psychological strategies delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80021, 80121, 80146 and 80171 apply). Group focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 80020, 80120, 80145 and 80170 apply. GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT	22.55
80125	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional services at consulting rooms)	55.1
80126	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.If the attendance is by video conference, and the patient is not an admitted patient; and the patient is located within a telehealth-eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the occupational therapist. Focussed psychological strategies delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80001, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply.	55.1
80130	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	91.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	Professional attendance at a place other than consulting rooms. As per the occupational therapist service requirements outlined for Item 80125.	77.6
80135	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional attendance at consulting rooms)	77.8
80136	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.If the attendance is by video conference, and the patient is not an admitted patient; and the patient is located within a telehealth-eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the occupational therapist. Focussed psychological strategies delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80001, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply.	77.8
80140	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	117.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	Professional attendance at a place other than consulting rooms. As per the occupational therapist service requirements outlined for Item 80135.	100.3
80145	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	23.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 80020, 80021, 80120, 80121, 80145, 80146, 80170 and 80171 apply). GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT	19.8
80146	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	23.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.If the attendance is by video conference, and the patient is not an admitted patient; and the patient is located within a telehealth-eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the occupational therapist. Group focussed psychological strategies delivered by video conference are time limited, being deliverable in up toten planned sessions in a calendar year (including services to which items 80021, 80121, 80146 and 80171 apply). Group focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 80020, 80120, 80145 and 80170 apply. GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT	19.8

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80150	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287, 2721 to 2727, 80000 to 80015, 80100 to 80115, 80125 to 80140, 80150 to 80165 apply). (Professional attendance at consulting rooms)	55.1
80151	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the social worker. Focussed psychological strategies delivered by video conference are time limited, being deliverable in up totten planned sessions in a calendar year (including services to which items 80001, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional attendance at consulting rooms)	55.1
80155	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	91.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	Professional attendance at a place other than consulting rooms. As per the social worker service requirements outlined for item 80150.	77.6
80160	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply). (Professional attendance at consulting rooms)	77.8
80161	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the social worker. Focussed psychological strategies delivered by video conference are time limited, being deliverable in up totten planned sessions in a calendar year (including services to which items 80001, 80011, 80101, 80111, 80126, 80136, 80151 and 80161 apply). Focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 283 to 287; 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply).	77.8
80165	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	117.95	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2006	Professional attendance at a place other than consulting rooms. As per the social worker service requirements outlined for item 80160.	100.3
80170	1/11/2006	ITable	8	M7	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	23.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year (including services to which items 80020, 80021, 80120, 80121, 80145, 80146, 80170 and 80171 apply). GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT	19.8
80171	1/11/2017	ITable	8	M7	ITable	ITable	S	N	ITable	N	N	N	N	N	N	P	B	1/11/2017	1/07/2021	23.25	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/09/2018	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics If: the attendance is by video conference; and the patient is not an admitted patient; and the patient is located within a telehealth eligible area; and the patient is, at the time of the attendance, at least 15 kilometres by road from the social worker. Group focussed psychological strategies delivered by video conference are time limited, being deliverable in up totten planned sessions in a calendar year (including services to which items 80021, 80121, 80146 and 80171 apply). Group focussed psychological strategies delivered by video conference time limits include the maximum ten planned sessions in a calendar year services to which items 80020, 80120, 80145 and 80170 apply. GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT	19.8
81000	1/11/2006	ITable	8	M8	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	76.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2014	Provision of a non-directive pregnancy support counselling service to a person who is currently pregnant or who has been pregnant in the preceding 12 months, by an eligible psychologist, where the patient is referred to the psychologist by a medical practitioner (including a general practitioner, but not a specialist or consultant physician), and lasting at least 30 minutes. The service may be used to address any pregnancy related issues for which non-directive counselling is appropriate. This service may be provided by a psychologist who is registered with Medicare Australia as meeting the credentialling requirements for provision of this service.It may not be provided by a psychologist who has a direct pecuniary interest in a health service that has as its primary purpose the provision of services for pregnancy termination. To a maximum of three non-directive pregnancy support counselling services per patient, per pregnancy from any of the following items -81000, 81005, 81010 and 4001	64.7
81005	1/11/2006	ITable	8	M8	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	76.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2014	Provision of a non-directive pregnancy support counselling service to a person who is currently pregnant or who has been pregnant in the preceding 12 months, by an eligible social worker, where the patient is referred to the social worker by a medical practitioner (including a general practitioner, but not a specialist or consultant physician), and lasting at least 30 minutes. The service may be used to address any pregnancy related issues for which non-directive counselling is appropriate. This service may be provided by a social worker who is registered with Medicare Australia as meeting the credentialling requirements for provision of this service.It may not be provided by a social worker who has a direct pecuniary interest in a health service that has as its primary purpose the provision of services for pregnancy termination. To a maximum of three non-directive pregnancy support counselling services per patient, per pregnancy from any of the following items -81000, 81005, 81010 and 4001	64.7
81010	1/11/2006	ITable	8	M8	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2006	1/07/2021	76.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2014	Provision of a non-directive pregnancy support counselling service to a person who is currently pregnant or who has been pregnant in the preceding 12 months, by an eligible mental health nurse, where the patient is referred to the mental health nurse by a medical practitioner (including a general practitioner, but not a specialist or consultant physician), and lasting at least 30 minutes. The service may be used to address any pregnancy related issues for which non-directive counselling is appropriate. This service may be provided by a mental health nurse who is registered with Medicare Australia as meeting the credentialling requirements for provision of this service.It may not be provided by a mental health nurse who has a direct pecuniary interest in a health service that has as its primary purpose the provision of services for pregnancy termination. To a maximum of three non-directive pregnancy support counselling services per patient, per pregnancy from any of the following items - 81000, 81005, 81010 and 4001	64.7
81100	1/05/2007	ITable	8	M9	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/05/2007	1/07/2021	83.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	DIABETES EDUCATION SERVICE - ASSESSMENT FOR GROUP SERVICES Diabetes education health service provided to a person by an eligible diabetes educator for the purposes of ASSESSING a person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs, and preparing the person for the group services, if: (a)the service is provided to a person who has type 2 diabetes; and (b)the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or a GP Management Planor, if the person is a resident of an aged care facility, their medical practitioner has contributed to a multidisciplinary care plan; and (c)the person is referred to an eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department of Health, or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 45 minutes duration; and (g)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner mentioned in paragraph (c); and (h)in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit. Benefits are payable once only in a calendar year for this or any other Assessment for Group Services item (including services to which items 81100, 81110,81120, 93284, 93286, 93606, 93607 and 93608apply).	70.65

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81105	1/05/2007	[Table]	8	M9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/05/2007	1/07/2021	20.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	DIABETES EDUCATION SERVICE - GROUP SERVICE Diabetes education health service provided to a person by an eligible diabetes educator, as a GROUP SERVICE for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment Item 81100, 81110,81120, 93284,93286, 93606, 93607 or 93608; and (b) the service is provided to a person who is part of a group of between 2 and 12 patients inclusive; and (c)the person is not an admitted patient of a hospital; and (d) the service is provided to a person involving the personal attendance by an eligible diabetes educator; and (e) the service is of at least 60 minutes duration; and (f)after the last service in the group services program provided to the person under Items 81105, 81115, 81125,93285, 93613, 93614 or 93615the eligible diabetes educator prepares, or contribute to, a written report to be provided to the referring medical practitioner; and (g) an attendance record for the group is maintained by the eligible diabetes educator; and (h)in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit; - to a maximum of eightGROUP SERVICES (including services to which itemsB1105,B1115,B1125,93285, 93613, 93614 and 93615apply) in a calendar year.	17.6
81110	1/05/2007	[Table]	8	M9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/05/2007	1/07/2021	83.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	EXERCISE PHYSIOLOGY SERVICE - ASSESSMENT FOR GROUPSERVICES Exercise physiology health service provided to a person by an eligible exercise physiologist for the purposes of ASSESSING a person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs, and preparing the person for the group services. If: (a)the service is provided to a person who has type 2 diabetes; and (b)the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or a GP Management Planor, if the person is a resident of an aged care facility, theirmedical practitioner has contributed to a multidisciplinary care plan; and (c)the person is referred to an eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department of Health, or a referral form that contains all the components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 45 minutes duration; and (g)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner mentioned in paragraph (c); and (h)in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit. Benefits are payable once only in a calendar year for this or any other Assessment for Group Services Item (including services to which items 81100, 81110,81120, 93284, 93286, 93606, 93607 and 93608 apply).	70.65
81115	1/05/2007	[Table]	8	M9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/05/2007	1/07/2021	20.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	EXERCISE PHYSIOLOGY SERVICE - GROUP SERVICE Exercise physiology health service provided to a person by an eligible exercise physiologist, as a GROUP SERVICE for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment Item 81100, 81110,81120, 93284, 93286, 93606, 93607 or 93608; and (b) the service is provided to a person who is part of a group of between 2 and 12 patients inclusive; and (c)the person is not an admitted patient of a hospital; and (d) the service is provided to a person involving the personal attendance by an eligible exercise physiologist; and (e) the service is of at least 60 minutes duration; and (f)after the last service in the group services program provided to the person under Items 81105, 81115,81125, 93285, 93613, 93614 or 93615the eligible exercise physiologist prepares, or contribute to, a written report to be provided to the referring medical practitioner; and (g) an attendance record for the group is maintained by the eligible exercise physiologist; and (h) in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit; - to a maximum of eightGROUP SERVICES (including services to which Items 81105, 81115,81125, 93285, 93613, 93614 and 93615apply) in a calendar year.	17.6
81120	1/05/2007	[Table]	8	M9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/05/2007	1/07/2021	83.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	DIETETICS SERVICE - ASSESSMENT FOR GROUP SERVICES Dietetics health service provided to a person by an eligible dietitian for the purposes of ASSESSING a person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs, and preparing the person for the group services. If: (a)the service is provided to a person who has type 2 diabetes; and (b)the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or a GP Management Planor, if the person is a resident of an aged care facility, their medical practitioner has contributed to a multidisciplinary care plan; and (c)the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department of Health, or a referral form that contains all components of the form issued by the Department; and (d)the person is not an admitted patient of a hospital; and (e)the service is provided to the person individually and in person; and (f)the service is of at least 45 minutes duration; and (g)after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph (c); and (h)in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit. Benefits are payable once only in a calendar year for this or any other Assessment for Group Services Item (including services to which items 81100, 81110,81120, 93284, 93286, 93606, 93607 and 93608 apply).	70.65
81125	1/05/2007	[Table]	8	M9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/05/2007	1/07/2021	20.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	DIETETICS SERVICE - GROUP SERVICE Dietetics health service provided to a person by an eligible dietitian, as a GROUP SERVICE for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment Item 81100, 81110,81120, 93284, 93286,93606, 93607 or 93608; and (b) the service is provided to a person who is part of a group of between 2 and 12 patients inclusive; and (c)the person is not an admitted patient of a hospital; and (d) the service is provided to a person involving the personal attendance by an eligible dietitian; and (e) the service is of at least 60 minutes duration; and (f)after the last service in the group services program provided to the person under Items 81105, 81115,81125, 93285, 93613, 93614 or93615, the eligible dietitian prepares, or contribute to, a written report to be provided to the referring medical practitioner; and (g) an attendance record for the group is maintained by the eligible dietitian; and (h) in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit; - to a maximum of eight GROUP SERVICES (including services to which Items 81105, 81115,81125, 93285, 93613, 93614 and 93615 apply) in a calendar year.	17.6
81300	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH SERVICE provided to a person who is of Aboriginal and Torres Strait Islander descent by an eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner.If: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offive services (including services to which items B1300 to B1360, 93048, 93061,93546 to 93558 and 93579 to 93593inclusive apply) in a calendar year	55.1
81305	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	DIABETES EDUCATION HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible diabetes educator.If: (a)either: a medical practitioner has identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible diabetes educator by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters; - to a maximum offive services (including services to which items B1300 to B1360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year	55.1
81310	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	AUDIOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible audiologist.If: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible audiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible audiologist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medicalpractitioner would reasonably be expected to be informed of - in relation to those matters; - to a maximum offive services (including services to which items B1300 to B1360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year	55.1
81315	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	EXERCISE PHYSIOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible exercise physiologist.If: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible exercise physiologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters; - to a maximum offive services (including services to which items B1300 to B1360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year	55.1

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81320	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	DIETETICS HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible dietitian if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible dietitian by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81325	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	MENTAL HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible mental health worker if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible mental health worker by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible mental health worker gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81330	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	A	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	OCCUPATIONAL THERAPY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible occupational therapist if (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible occupational therapist by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible occupational therapist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year	48.6	SS. 1
81335	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	PHYSIOTHERAPY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible physiotherapist if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible physiotherapist by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible physiotherapist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81340	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	PODIATRY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible podiatrist if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible podiatrist by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible podiatrist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81345	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	CHIROPRACTIC HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible chiropractor if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible chiropractor by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible chiropractor gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medicalpractitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81350	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	OSTEOPATHY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible osteopath if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible osteopath by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible osteopath gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81355	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	PSYCHOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible psychologist if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible psychologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible psychologist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
81360	1/11/2008	[Table]	8	M11	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2008	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	SPEECH PATHOLOGY HEALTH SERVICE provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible speech pathologist if: (a)either: a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; or the person's shared care plan identifies the need for follow-up allied health services; and (b)the person is referred to the eligible speech pathologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that substantially complies with the form issued by the Department; and (c)the person is not an admitted patient of a hospital; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 20 minutes duration; and (f)after the service, the eligible speech pathologist gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral - in relation to that service; or (ii) if the service is the first or the last service under the referral - in relation to the service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably be expected to be informed of - in relation to those matters - to a maximum offline services (including services to which items 81300 to 81360, 93048, 93061, 93546 to 93558 and 93579 to 93593 inclusive apply) in a calendar year		SS. 1
82000	1/07/2008	[Table]	8	M10	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2013	PSYCHOLOGY Psychology health service provided to a child, aged under 13 years, by an eligible psychologist where: (a) the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or (b) the child is referred by an eligible practitioner for the purpose of contributing to the child's pervasive developmental disorder (PDD) or disability treatment plan, developed by the practitioner; and (c) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (d) the psychologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (e) the child is not an admitted patient of a hospital; and (f) the service is provided to the child individually and in person; and (g) the service lasts at least 50 minutes in duration. These items are limited to a maximum of four services per patient, consisting of any combination of the following items 84947Z, 82000, 82005, 82010 and 82050		88.25

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82001	1/11/2021	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2021	1/11/2021	50.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a community case conference If the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which another item in this Group applies)		43.25
82002	1/11/2021	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2021	1/11/2021	87.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a community case conference If the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which another item in this Group applies)		74.1
82003	1/11/2021	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/11/2021	1/11/2021	145.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2021	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a community case conference If the conference lasts for at least 40 minutes (other than a service associated with a service to which another item in this Group applies)		123.35
82005	1/07/2008	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	SPEECH PATHOLOGY Speech pathology health service provided to a child, aged under 13 years, by an eligible speech pathologist where: (a) the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or (b) the child is referred by an eligible practitioner for the purpose of contributing to the child's pervasive developmental disorder (PDD) or disability treatment plan, developed by the practitioner; and (c) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (d) the speech pathologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (e) the child is not an admitted patient of a hospital; and (f) the service is provided to the child individually and in person; and (g) the service lasts at least 50 minutes in duration. These items are limited to a maximum of four services per patient, consisting of any combination of the following items ─ 82000, 82005, 82010 and 82030		77.8
82010	1/07/2008	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	OCCUPATIONAL THERAPY Occupational therapy health service provided to a child, aged under 13 years, by an eligible occupational therapist where: (a) the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or (b) the child is referred by an eligible practitioner for the purpose of contributing to the child's pervasive developmental disorder (PDD) or disability treatment plan, developed by the practitioner; and (c) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (d) the occupational therapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (e) the child is not an admitted patient of a hospital; and (f) the service is provided to the child individually and in person; and (g) the service lasts at least 50 minutes in duration. These items are limited to a maximum of four services per patient, consisting of any combination of the following items ─ 82000, 82005, 82010 and 82030		77.8
82015	1/07/2008	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	PSYCHOLOGY Psychology health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder (PDD) or an eligible disability by an eligible psychologist where: (a) the child has been diagnosed with PDD or an eligible disability; and (b) the child has received a PDD or disability treatment plan (while aged under 13 years) as prepared by an eligible practitioner; and (c) the child has been referred by an eligible practitioner for the provision of services that are consistent with the PDD or disability treatment plan; and (d) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (e) the psychologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (f) the child is not an admitted patient of a hospital; and (g) the service is provided to the child individually and in person; and (h) the service lasts at least 30 minutes in duration. These items are limited to a maximum of 20 services per patient, consisting of any combination of items ─ 82015, 82020, 82025 and 82035		88.25
82020	1/07/2008	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	SPEECH PATHOLOGY Speech pathology health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder (PDD) or an eligible disability by an eligible speech pathologist where: (a) the child has been diagnosed with PDD or an eligible disability; and (b) the child has received a PDD or disability treatment plan (while aged under 13 years) as prepared by an eligible practitioner; and (c) the child has been referred by an eligible practitioner for the provision of services that are consistent with the PDD or disability treatment plan; and (d) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (e) the speech pathologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (f) the child is not an admitted patient of a hospital; and (g) the service is provided to the child individually and in person; and (h) the service lasts at least 30 minutes in duration. These items are limited to a maximum of 20 services per patient, consisting of any combination of items ─ 82015, 82020, 82025 and 82035		77.8
82025	1/07/2008	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/07/2008	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	OCCUPATIONAL THERAPY Occupational therapy health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder (PDD) or an eligible disability by an eligible occupational therapist where: (a) the child has been diagnosed with PDD or an eligible disability; and (b) the child has received a PDD or disability treatment plan (while aged under 13 years) as prepared by an eligible practitioner; and (c) the child has been referred by an eligible practitioner for the provision of services that are consistent with the PDD or disability treatment plan; and (d) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (e) the occupational therapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (f) the child is not an admitted patient of a hospital; and (g) the service is provided to the child individually and in person; and (h) the service lasts at least 30 minutes in duration. These items are limited to a maximum of 20 services per patient, consisting of any combination of items ─ 82015, 82020, 82025 and 82035		77.8
82030	1/07/2011	[Table	B	M10	[Table	[Table	D	N	[Table	N	N	N	N	N	N	P	B	1/07/2011	1/07/2021	91.5	[Table	[Table	[Table	[Table	[Table	[Table	[Table	1/01/2013	AUDIOLOGY, OPTOMETRY, ORTHOPTIC OR PHYSIOTHERAPY Audiology, optometry, orthoptic or physiotherapy health service provided to a child, aged under 13 years, by an eligible audiologist, optometrist, orthoptist or physiotherapist where: (a) the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or (b) the child is referred by an eligible practitioner for the purpose of contributing to the child's pervasive developmental disorder (PDD) or disability treatment plan, developed by the practitioner; and (c) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (d) the audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (e) the child is not an admitted patient of a hospital; and (f) the service is provided to the child individually and in person; and (g) the service lasts at least 50 minutes in duration. These items are limited to a maximum of four services per patient, consisting of any combination of the following items - 82000, 82005, 82010 and 82030		77.8
82035	1/07/2011	ITable	B	M10	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	1/07/2011	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2013	AUDIOLOGY, OPTOMETRY, ORTHOPTIC OR PHYSIOTHERAPY Audiology, optometry, orthoptic or physiotherapy health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder (PDD) or eligible disability by an eligible audiologist, optometrist, orthoptist or physiotherapist where: (a) the child has been diagnosed with PDD or eligible disability; and (b) the child has received a PDD or disability treatment plan (while aged under 13 years) as prepared by an eligible practitioner; and (c) the child has been referred by an eligible practitioner for the provision of services that are consistent with the PDD ordisability treatmentplan; and (d) for a child with PDD, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner; and (e) the audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for provision of these services; and (f) the child is not an admitted patient of a hospital; and (g) the service is provided to the child individually and in person; and (h) the service lasts at least 30 minutes in duration. These items are limited to a maximum of 20 services per patient, consisting of any combination of items - 82015, 82020, 82025 and 82035		77.8
82100	1/11/2010	ITable	B	M13	ITable	ITable	D	N	ITable	N	N	N	N	N	N	F	B	1/11/2010	1/07/2021	55.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2018	Initial antenatal professional attendance by a participating midwife, lasting at least 40 minutes, including all of the following: (a)taking a detailed patient history; (b)performing a comprehensive examination; (c)performing a risk assessment; (d)based on the risk assessment - arranging referral or transfer of the patient's care to an obstetrician; (e)requesting pathology and diagnostic imaging services, when necessary; (f)discussing with the patient the collaborative arrangements for her maternity care and recording the arrangements in the midwife's written records in accordance with section 6 of the Health Insurance Regulations 2018. Payable once only for any pregnancy.		47.25
82105	1/11/2010	ITable	B	M13	ITable	ITable	D	N	ITable	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	33.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/11/2010	Short antenatal professional attendance by a participating midwife, lasting up to 40 minutes.	25.2	28.6
82110	1/11/2010	[Table	B	M13	[Table	[Table	D	N	[Table	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	55.55	[Table	[Table	[Table	[Table	[Table	[Table	[Table	1/11/2010	Long antenatal professional attendance by a participating midwife, lasting at least 40 minutes.	41.7	47.25
82115	1/11/2010	ITable	B	M13	ITable	ITable	D	N	ITable	N	N	N	N	N	N	F	B	1/11/2010	1/07/2021	331.9	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Professional attendance by a participating midwife, lasting at least 90 minutes, for assessment and preparation of a maternity care plan for a patient whose pregnancy has progressed beyond 28 weeks, where the participating midwife has had at least 2 antenatal attendances with the patient in the preceding 6 months, if: (a) the patient is not an admitted patient of a hospital; and (b) the participating midwife undertakes a comprehensive assessment of the patient; and (c)the participating midwife develops a written maternity care plan that contains: (i) outcomes of the assessment; and (ii) details of agreed expectations for care during pregnancy, labour and birth; and (iii) details of any health problems or care needs; and (iv) details of collaborative arrangements that apply to the patient; and (v) details of any medication taken by the patient during the pregnancy, and any additional medication that may be required by the patient; and (vi) details of any referrals or requests for pathology services or diagnostic imaging services for the patient during the pregnancy, and any additional referrals or requests that may be required for the patient; and (d) the maternity care plan is explained and agreed with the patient; and (e) the fee does not include any amount for the management of labour and birth; (Includes any antenatal attendance provided on the same occasion) Payable only once for any pregnancy; This item cannot be claimed if items 16590 or 16591 have previously been claimed during a single pregnancy, except in exceptional circumstances		282.15
82116	1/03/2022	ITable	B	M13	ITable	ITable	D	N	ITable	N	N	N	N	N	N	N	B	1/03/2022	1/03/2022	783.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Management of labour for up to 6 hours, not including birth, at a place other than a hospital if: (a) the attendance is by the participating midwife who: (i) provided the patient's antenatal care or (ii) is a member of a practice that has provided the patient's antenatal care; and (b) the total attendance time is documented in the patient notes; This item does not apply if birth is performed during the attendance; Only claimable once per pregnancy		695.95
82118	1/03/2022	ITable	B	M13	ITable	ITable	D	N	ITable	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	783.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/03/2022	Management of labour for up to 6 hours total attendance, including birth where performed or attendance and immediate post-birth care at an elective caesarean section if: (a) the patient is an admitted patient of a hospital; and (b) the attendance is by the first participating midwife who: (i) assisted or provided the patient's antenatal care; or (ii) is a member of a practice that has provided the patient's antenatal care; and (c) the total attendance time is documented in the patient notes; (Includes all hospital attendances related to the labour by the first participating midwife) Only claimable once per pregnancy; Not being a service associated with a service to which Item 82120 applies (H)		587.9

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82120	1/11/2010	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	A	1/11/2010	1/03/2022	1567.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Management of labour between 6 and 12 hours total attendance, including birth where performed, if: (a) the patient is an admitted patient of a hospital; and (b) the attendance is by the first participating midwife who: (i) assisted or provided the patient's antenatal care; or (ii) is a member of a practice that provided the patient's antenatal care; and (c) the total attendance time is documented in the patient notes; (includes all hospital attendances related to the labour by the first participating midwife) Only claimable once per pregnancy; Not being a service associated with a service to which Item 82118 applies (H)	1175.8
82123	1/03/2022	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	783.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Management of labour between 6 and 12 hours total attendance, including birth where performed, if: (a) the patient is an admitted patient of a hospital; and (b) the attendance is by the second participating midwife who either: (i) assisted or provided the patient's antenatal care; or (ii) is a member of a practice that has provided the patient's antenatal care; and (c) the total attendance time is documented in the patient notes; (includes all hospital attendances related to the labour by the second participating midwife) Only claimable once per pregnancy; Not being a service associated with a service to which Item 82125 applies (H)	587.9
82125	1/11/2010	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	A	1/11/2010	1/03/2022	1567.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Management of labour between 6 and 12 hours total attendance, including birth where performed, if: (a) the patient is an admitted patient of a hospital; and (b) the attendance is by the second participating midwife who either: (i) assisted or provided the patient's antenatal care; or (ii) is a member of a practice that provided the patient's antenatal care; and (c) the total attendance time is documented in the patient notes; (includes all hospital attendances related to the labour by the second participating midwife) Only claimable once per pregnancy; Not being a service associated with a service to which Item 82123 or 82127 applies (H)	1175.8
82127	1/03/2022	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	A	1/03/2022	1/03/2022	783.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Management of labour for up to 6 hours total attendance, including birth where performed if: (a) the patient is an admitted patient of a hospital; and (b) the attendance is by a third participating midwife who either: (i) assisted or provided the patient's antenatal care; or (ii) is a member of a practice that has provided the patient's antenatal care; and (c) an attendance to which Item 82123 applies has been provided by a second participating midwife who is a member of a practice that has provided the patient's antenatal care; and (d) the total attendance time is documented in the patient notes; (includes all hospital attendances related to the labour by the third participating midwife) Only claimable once per pregnancy; Not being a service associated with a service to which Item 82125 applies (H)	587.9
82130	1/11/2010	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	55.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Short Postnatal Attendance Short postnatal professional attendance by a participating midwife, lasting up to 40 minutes, within 6 weeks after birth.	41.7	47.25
82135	1/11/2010	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	F	C	1/11/2010	1/07/2021	81.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Long Postnatal Attendance Long postnatal professional attendance by a participating midwife, lasting at least 40 minutes, within 6 weeks after birth.	61.3	69.45
82140	1/11/2010	[Table]	8	M13	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	F	B	1/11/2010	1/07/2021	55.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Six Week Postnatal Attendance Postnatal professional attendance by a participating midwife on a patient not less than 6 weeks but not more than 7 weeks after birth of a baby, including: (a)a comprehensive examination of patient and baby to ensure normal postnatal recovery; and (b)referral of the patient to a general practitioner for the ongoing care of the patient and baby. Payable once only for any pregnancy.		47.25
82200	1/11/2010	[Table]	8	M14	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2010	1/07/2021	10	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	Professional attendance by a participating nurse practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management.		8.5
82205	1/11/2010	[Table]	8	M14	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2010	1/07/2021	21.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	Professional attendance by a participating nurse practitioner lasting less than 20 minutes and including any of the following: a)taking a history; b)undertaking clinical examination; c)arranging any necessary investigation; d)implementing a management plan; e)providing appropriate preventive health care, for 1 or more health related issues, with appropriate documentation.		18.55
82210	1/11/2010	[Table]	8	M14	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2010	1/07/2021	41.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	Professional attendance by a participating nurse practitioner lasting at least 20 minutes and including any of the following: a)taking a detailed history; b)undertaking clinical examination; c)arranging any necessary investigation; d)implementing a management plan; e)providing appropriate preventive health care, for 1 or more health related issues, with appropriate documentation.		35.15
82215	1/11/2010	[Table]	8	M14	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2010	1/07/2021	60.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2010	Professional attendance by a participating nurse practitioner lasting at least 40 minutes and including any of the following: a)taking an extensive history; b)undertaking clinical examination; c)arranging any necessary investigation; d)implementing a management plan; e)providing appropriate preventive health care, for 1 or more health related issues, with appropriate documentation.		51.85
82300	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	160.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of BRAIN STEM EVOKED RESPONSE AUDIOMETRY, performed on a person by an eligible audiologist if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is a specialist in the specialty of otolaryngology head and neck surgery; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which Item 11300 applies has not been performed on the person on the same day.	136.2
82302	1/03/2022	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/03/2022	1/03/2022	160.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Audiology health service by telehealth for programming of an auditory implant, or the sound processor of an auditory implant, unilateral, performed on a patient by an eligible audiologist if: (a) the service is not performed for the purpose of a hearing screening; and (b) a service to which Item 11300, 11342 or 11345 applies has not been performed on the person on the same day. Applicable up to a total of 4 services to which this item or Item 82300 or 82304 apply on the same day	136.2
82304	1/03/2022	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/03/2022	1/03/2022	160.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/03/2022	Audiology health service by phone for programming of an auditory implant, or the sound processor of an auditory implant, unilateral, performed on a patient by an eligible audiologist if: (a) the service is not performed for the purpose of a hearing screening; and (b) a service to which Item 11300, 11342 or 11345 applies has not been performed on the person on the same day. Applicable up to a total of 4 services to which this item or Item 82300 or 82302 apply on the same day	136.2
82306	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	18.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of NON-DETERMINATE AUDIOMETRY performed on a person by an eligible audiologist if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is a specialist in the specialty of otolaryngology head and neck surgery; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which Item 11306 applies has not been performed on the person on the same day.	15.5
82309	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	21.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an AIR CONDUCTION AUDIOGRAM performed on a person by an eligible audiologist if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is: (i)a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11309 applies has not been performed on the person on the same day.	18.65
82312	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	30.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an AIR AND BONE CONDUCTION AUDIOGRAM OR AIR CONDUCTION AND SPEECH DISCRIMINATION AUDIOGRAM performed on a person by an eligible audiologist if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is: (i)a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11312 applies has not been performed on the person on the same day.	26.35
82315	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	40.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an AIR AND BONE CONDUCTION AND SPEECH DISCRIMINATION AUDIOGRAM performed on a person by an eligible audiologist if: (a) the service is performed pursuant to a written request made by an eligible practitionerto assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is: (i)a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11315 applies has not been performed on the person on the same day.	34.85
82318	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	50.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an AIR AND BONE CONDUCTION AND SPEECH DISCRIMINATION AUDIOGRAM WITH OTHER COCHLEAR TESTS performed on a person by an eligible audiologist if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is: (i)a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11318 applies has not been performed on the person on the same day.	43.05

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82324	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	27.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an IMPEDANCE AUDIOGRAM involving tympanometry and measurement of static compliance and acoustic reflex performed on a person by an eligible audiologist (not being a service associated with a service to which item 82309, 82312, 82315 or 82318 applies) if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is: (i) a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11324 applies has not been performed on the person on the same day.	23.25
82327	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	16.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an IMPEDANCE AUDIOGRAM involving tympanometry and measurement of static compliance and acoustic reflex performed on a person by an eligible audiologist (being a service associated with a service to which item 82309, 82312, 82315 or 82318 applies) if: (a) the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and (b) the eligible practitioner is: (i)a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (c) the service is not performed for the purpose of a hearing screening; and (d) the person is not an admitted patient of a hospital; and (e) the service is performed on the person individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11327 applies has not been performed on the person on the same day.	14
82332	1/11/2012	[Table]	8	M15	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	1/11/2012	1/07/2021	48.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2012	Audiology health service, consisting of an OTO-ACOUSTIC EMISSION AUDIOMETRY for the detection of permanent congenital hearing impairment, performed by an eligible audiologist on an infant or child in circumstances in which: (a) the service is performed pursuant to a written request made by an eligible practitioner who is: (i)a specialist in the specialty of otolaryngology head and neck surgery; or (ii) a specialist or consultant physician in the specialty of neurology; and (b) the infant or child is at risk due to 1 or more of the following factors: (i) admission to a neonatal intensive care unit; (ii) family history of hearing impairment; (iii) intra-uterine or perinatal infection (either suspected or confirmed); (iv) birthweight less than 1.5kg; (v) craniofacial deformity; (vi) birth asphxia; (vii) chromosomal abnormality, including Down Syndrome; (viii) exchange transfusion; and (c) middle ear pathology has been excluded by specialist opinion; and (d) the infant or child is not an admitted patient of a hospital; and (e) the service is performed on the infant or child individually and in person; and (f) after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and (g) a service to which item 11332 applies has not been performed on the infant or child on the same day.	41.45
82350	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Dietetics health service provided to an eligible patient by an eligible dietitian if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes in duration	55.1
82351	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Dietetics health service provided to an eligible patient by an eligible dietitian if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the dietitian; and (f) the service is of at least 20 minutes duration	55.1
82352	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 30 minutes but less than 50 minutes in duration.	88.25
82353	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and (f) the service is at least 30 minutes but less than 50 minutes in duration.	88.25
82354	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	129.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and the service is at least 30 minutes but less than 50 minutes in duration.	110.25
82355	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration.	129.55
82356	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and (f) the service is at least 50 minutes in duration.	129.55
82357	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	178.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration.	151.6
82358	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	38.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided in person; and (d) the service is at least 60 minutes in duration.	32.9
82359	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	38.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and (f) the service is at least 60 minutes in duration.	32.9
82360	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes but less than 50 minutes in duration.	62.55
82361	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and (f) the service is at least 20 minutes but less than 50 minutes in duration.	62.55
82362	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	100.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes but less than 50 minutes in duration.	85.05
82363	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration.	88.25
82364	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and (f) the service is at least 50 minutes in duration.	88.25
82365	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	130.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration.	110.8
82366	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	26.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided in person; and (d) the service is at least 60 minutes in duration.	22.55
82367	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	26.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and (f) the service is at least 60 minutes in duration.	22.55
82368	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible occupational therapist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes but less than 50 minutes in duration.	55.1

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82369	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and (f) the service is at least 20 minutes but less than 50 minutes in duration.	55.1
82370	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	91.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes but less than 50 minutes in duration.	77.6
82371	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration.	77.8
82372	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and (f) the service is at least 50 minutes in duration.	77.8
82373	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	117.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration.	100.3
82374	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	23.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided in person; and (d) the service is at least 60 minutes in duration	19.8
82375	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	23.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible occupational therapist If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and (f) the service is at least 60 minutes in duration.	19.8
82376	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes but less than 50 minutes in duration.	55.1
82377	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and (f) the service is at least 20 minutes but less than 50 minutes in duration	55.1
82378	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	91.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 20 minutes but less than 50 minutes in duration.	77.6
82379	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d)the service is at least 50 minutes in duration.	77.8
82380	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and (f) the service is at least 50 minutes in duration.	77.8
82381	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	117.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided to the person individually and in person; and (d) the service is at least 50 minutes in duration	100.3
82382	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	23.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to a person as part of a group of 6 to 10 patients (but not as an admitted patient of a hospital) by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the service is provided in person; and (d) the service is at least 60 minutes in duration.	19.8
82383	1/11/2019	[Table]	8	M16	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	1/11/2019	1/07/2021	23.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/11/2019	Eating disorder psychological treatment service provided to a person as part of a group of 6 to 10 patients (but not as an admitted patient of a hospital) by an eligible social worker If: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the person is not an admitted patient of a hospital; and (c) the attendance is by video conference; and (d) the patient is located within a telehealth eligible area; and (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and (f) the service is at least 60 minutes in duration.	19.8
90003	10/12/2020	[Table]	8	M32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	40.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	A flag fall service to which item 93312, 93313, 93316, 93319, 93322, 93323, 93326, 93327, 93375, 93378, 93381, 93382, 93383, 93384, 93385and 93386 applies. For the initial attendance at one residential aged care facility on one occasion, applicable to a maximum of one patient attended on.	40.35
90004	10/12/2020	[Table]	8	M32	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	10/12/2020	1/07/2021	48.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	A flag fall service to which any item in the following groups apply: Group M29 (other than 93517 and 93538) Group M30 (other than 93592 and 93593) Group M31 For the initial attendance at one residential aged care facility on one occasion, applicable to a maximum of one patient attended on.	41.65
91000	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Psychological therapy health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible clinical psychologist If: (a) the patient is affected by bushfire; and (b) the service is provided to the patient individually and in person; and (c) the service is at least 30 minutes but less than 50 minutes duration	88.25
91001	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Psychological therapy health service provided to a patient (but not as an admitted patient of a hospital) by an eligible clinical psychologist If: (a) the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c)the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 30 minutes but less than 50 minutes duration	88.25
91005	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	129.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Psychological therapy health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible clinical psychologist in accordance with the requirements of item 91000	110.25
91010	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Psychological therapy health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible clinical psychologist If: (a) the patient is affected by bushfire; and (b) the service is provided to the patient individually and in person; and (c)the service is at least 50 minutes duration	129.55
91011	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Psychological therapy health service provided to a patient (but not as an admitted patient of a hospital) by an eligible clinical psychologist If: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c) the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 50 minutes duration	129.55
91015	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	178.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Psychological therapy health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible clinical psychologist in accordance with the requirements of item 91010	151.6
91100	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible psychologist If: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually and in person; and (c)the service is at least 20 minutes but less than 50 minutes duration	62.55
91101	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient (but not as an admitted patient of a hospital) by an eligible psychologist If: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c)the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 20 minutes but less than 50 minutes duration	62.55
91105	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	100.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible psychologist in accordance with the requirements of item 91100	85.05
91110	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible psychologist If: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually and in person; and (c)the service is at least 50 minutes duration	88.25
91111	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient (but not as an admitted patient of a hospital) by an eligible psychologist If: (a) the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c)the attendance is by video conference; and (d) the patient is not an admitted patient; and (e)the service is at least 50 minutes duration	88.25
91115	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	130.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible psychologist in accordance with the requirements of item 91110	110.8
91125	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible occupational therapist If: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually and in person; and (c) the service is at least 20 minutes but less than 50 minutes duration	55.1

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91126	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a)the patient is affected by bushfire; and (b) the service is provided to the patient individually; and (c)the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 20 minutes but less than 50 minutes duration	55.1
91130	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	91.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible occupational therapist in accordance with the requirements of Item 91125	77.6
91135	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a) the patient is affected by bushfire; and (b)the service is provided to the patient individually and in person; and (c)the service is at least 50 minutes duration	77.8
91136	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c)the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 50 minutes duration	77.8
91140	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	117.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible occupational therapist in accordance with the requirements of Item 91135	100.3
91150	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible social worker if: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually and in person; and (c)the service is at least 20 minutes but less than 50 minutes duration	55.1
91151	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient (but not as an admitted patient of a hospital) by an eligible social worker if: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c) the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 20 minutes but less than 50 minutes duration	55.1
91155	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	91.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible social worker in accordance with the requirements of Item 91150	77.6
91160	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient in consulting rooms (but not as an admitted patient of a hospital) by an eligible social worker if: (a) the patient is affected by bushfire; and (b)the service is provided to the patient individually and in person; and (c) the service is at least 50 minutes duration	77.8
91161	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient (but not as an admitted patient of a hospital) by an eligible social worker if: (a)the patient is affected by bushfire; and (b)the service is provided to the patient individually; and (c)the attendance is by video conference; and (d)the patient is not an admitted patient; and (e)the service is at least 50 minutes duration	77.8
91165	17/01/2020	[Table]	8	M17	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	17/01/2020	1/07/2021	117.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	17/01/2020	Focussed psychological strategies health service provided to a patient at a place other than consulting rooms (but not as an admitted patient of a hospital) by an eligible social worker in accordance with the requirements of Item 91160	100.3
91166	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Psychological therapy health service provided by telehealth attendance by an eligible clinical psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 30 minutes but less than 50 minutes duration	88.25
91167	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Psychological therapy health service provided by telehealth attendance by an eligible clinical psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	129.55
91169	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Focussed psychological strategies health service provided by telehealth attendance by an eligible psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 20 minutes but less than 50 minutes duration	62.55
91170	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	88.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Focussed psychological strategies health service provided by telehealth attendance by an eligible psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	88.25
91172	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Focussed psychological strategies health service provided by telehealth attendance by an eligible occupational therapist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 20 minutes but less than 50 minutes duration	55.1
91173	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Focussed psychological strategies health service provided by telehealth attendance by an eligible occupational therapist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes in duration	77.8
91175	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Focussed psychological strategies health service provided by telehealth attendance by an eligible social worker if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d)on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 20 minutes but less than 50 minutes duration	55.1
91176	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Focussed psychological strategies health service provided by telehealth attendance by an eligible social worker if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	77.8
91178	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	21.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a participating nurse practitioner lasting less than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care.	18.55
91179	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	41.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a participating nurse practitioner lasting at least 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking an detailed history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care.	35.15
91180	13/03/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	60.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance by a participating nurse practitioner lasting at least 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking an extensive history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care.	51.85

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91181	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Psychological therapy health service provided by phone attendance by an eligible clinical psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 30 minutes but less than 50 minutes duration	88.25
91182	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	152.4	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Psychological therapy health service provided by phone attendance by an eligible clinical psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	129.55
91183	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	73.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Focussed psychological strategies health service provided by phone attendance by an eligible psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 20 minutes but less than 50 minutes duration	62.55
91184	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Focussed psychological strategies health service provided by phone attendance by an eligible psychologist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	88.25
91185	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Focussed psychological strategies health service provided by phone attendance by an eligible occupational therapist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 20 minutes but less than 50 minutes duration	55.1
91186	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Focussed psychological strategies health service provided by phone attendance by an eligible occupational therapist if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	77.8
91187	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Focussed psychological strategies health service provided by phone attendance by an eligible social worker if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 20 minutes but less than 50 minutes duration	55.1
91188	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Focussed psychological strategies health service provided by phone attendance by an eligible social worker if: (a) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; or (iii) a specialist or consultant physician specialising in the practice of his or her field of paediatrics; and (b) the service is provided to the person individually; and (c) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (d) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (e) the service is at least 50 minutes duration	77.8
91189	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	21.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Phone attendance by a participating nurse practitioner lasting less than 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a short history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care.	18.55
91190	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	41.35	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Phone attendance by a participating nurse practitioner lasting at least 20 minutes if the attendance includes any of the following that are clinically relevant: (a) taking a detailed history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care.	35.15
91191	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	60.85	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Phone attendance by a participating nurse practitioner lasting at least 40 minutes if the attendance includes any of the following that are clinically relevant: (a) taking an extensive history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care.	51.85
91192	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	10	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Telehealth attendance by a participating nurse practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management.	8.5
91193	13/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	10	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Phone attendance by a participating nurse practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management.	8.5
91211	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	33.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Short antenatal telehealth attendance by a participating midwife, lasting up to 40 minutes.	28.6
91212	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	55.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Long antenatal telehealth attendance by a participating midwife, lasting at least 40 minutes.	47.25
91214	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	55.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Short postnatal telehealth attendance by a participating midwife, lasting up to 40 minutes.	47.25
91215	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	C	1/01/2021	1/07/2021	81.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Long postnatal telehealth attendance by a participating midwife, lasting at least 40 minutes.	61.3	69.45
91218	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	33.6	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Short antenatal phone attendance by a participating midwife, lasting up to 40 minutes.	28.6
91219	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	C	1/01/2021	1/07/2021	55.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Long antenatal phone attendance by a participating midwife, lasting at least 40 minutes.	61.7	47.25
91221	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	55.55	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Short postnatal phone attendance by a participating midwife, lasting up to 40 minutes.	47.25
91222	13/03/2020	ITable	8	M19	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	13/03/2020	1/07/2021	81.7	ITable	ITable	ITable	ITable	ITable	ITable	ITable	20/04/2020	Long postnatal phone attendance by a participating midwife, lasting at least 40 minutes.	69.45
93000	30/03/2020	ITable	8	M18	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Telehealth attendance by an eligible allied health practitioner if: (a) the service is provided to a person who has: (i) a chronic condition; and (ii) complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b) the service is recommended in the person's Team Care Arrangements or multidisciplinary care plan as part of the management of the person's chronic condition and complex care needs; and (c) the person is referred to the eligible allied health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d) the service is provided to the person individually; and (e) the service is of at least 20 minutes duration; and (f) after the service, the eligible allied health practitioner gives a written report to the referring medical practitioner mentioned in paragraph (c): (i) if the service is the only service under the referral—in relation to that service; or (ii) if the service is the first or last service under the referral—in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters; to a maximum of 5 services (including any services to which this item, Item 93013 or any item in Part 1 of the Schedule to the Allied Health Determination applies) in a calendar year	55.1

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93013	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Phone attendance by an eligible allied health practitioner if: (a) the service is provided to a person who has: (i) a chronic condition; and (ii) complex care needs being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (b) the service is recommended in the person's Team Care Arrangements or multidisciplinary care plan as part of the management of the person's chronic condition and complex care needs; and (c) the person is referred to the eligible allied health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and (d) the service is provided to the person individually; and (e) the service is of at least 20 minutes duration; and (f) after the service, the eligible allied health practitioner gives a written report to the referring medical practitioner mentioned in paragraph (c). (i) if the service is the only service under the referral—in relation to that service; or (ii) if the service is the first or last service under the referral—in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of —in relation to those matters; to a maximum of 5 services (including any services to which this item, Item 93000 or any item in Part 1 of the Schedule to the Allied Health Determination applies) in a calendar year	55.1
93026	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	76.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Non directive pregnancy support counselling health service provided to a person who is currently pregnant or who has been pregnant in the preceding 12 months by an eligible psychologist, eligible social worker or eligible mental health nurse as a telehealth attendance if: (a) the person is concerned about a current pregnancy or a pregnancy that occurred in the 12 months preceding the provision of the first service; and (b) the person is referred by a medical practitioner who is not a specialist or consultant physician; and (c) the service is provided to the person individually; and (d) the eligible psychologist, eligible social worker or eligible mental health nurse does not have a direct pecuniary interest in a health service that has as its primary purpose the provision of services for pregnancy termination; and (e) the service is at least 30 minutes duration; to a maximum of 3 services (including services to which items 81000, 81005, 81010 in the Allied Health Determination, item 4001 of the general medical services table and item 93029, 92136 and 92138 apply) for each pregnancy. The service may be used to address any pregnancy related issues for which non directive counselling is appropriate	64.7
93029	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	76.1	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Non directive pregnancy support counselling health service provided to a person, who is currently pregnant or who has been pregnant in the preceding 12 months by an eligible psychologist, eligible social worker or eligible mental health nurse as a phone attendance if: (a) the person is concerned about a current pregnancy or a pregnancy that occurred in the 12 months preceding the provision of the first service; and (b) the person is referred by a medical practitioner who is not a specialist or consultant physician; and (c) the service is provided to the person individually; and (d) the eligible psychologist, eligible social worker or eligible mental health nurse does not have a direct pecuniary interest in a health service that has as its primary purpose the provision of services for pregnancy termination; and (e) the service is at least 30 minutes duration; to a maximum of 3 services (including services to which items 81000, 81005, 81010 in the Allied Health Determination, item 4001 of the general medical services table and item 93029, 92136 and 92138 apply) for each pregnancy. The service may be used to address any pregnancy related issues for which non directive counselling is appropriate	64.7
93032	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Psychology health service provided by telehealth attendance to a child aged under 13 years by an eligible psychologist (b) if: (a) the person referred to the eligible psychologist by an eligible practitioner: (i) to assist with the diagnosis of the child by the practitioner; or (ii) to contribute to the child's PDD or disability treatment and management plan, developed by the practitioner; and (b) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; or (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (c) the eligible psychologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of that service; and (d) the service is provided to the child individually; and (e) the service is at least 50 minutes duration; to a maximum of 4 services (including services to which this item, Items 93033, 93040 and 93041 or items 82000, 82005, 82010 and 82030 in the Allied Health Determination apply). Up to 4 services may be provided to the same child on the same day	88.25
93033	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Speech pathology, occupational therapy, audiology, optometry, orthoptic or physiotherapy health service provided by telehealth attendance to a child aged under 13 years by an eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist if: (a) the child was referred to the eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist by an eligible practitioner: (i) to assist with the diagnosis of the child by the practitioner; or (ii) to contribute to the child's PDD or disability treatment and management plan, developed by the practitioner; and (b) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; or (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (c) the eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of that service; and (d) the service is provided to the child individually; and (e) the service is at least 50 minutes duration; to a maximum of 4 services (including services to which this item, Items 93032, 93040 or 93041, or items 82000, 82005, 82010 and 82030 in the Allied Health Determination apply). Up to 4 services may be provided to the same child on the same day	77.8
93035	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Psychology health service provided by telehealth attendance to a child aged under 15 years for treatment of a pervasive developmental disorder (PDD) or eligible disability by an eligible psychologist, if: (a) the child has been diagnosed with a PDD or an eligible disability; and (b) the child, while aged under 13 years, received a PDD or disability treatment and management plan as prepared by the eligible practitioner; and (c) the child was referred by an eligible practitioner for services consistent with the child's PDD or disability treatment and management plan; and (d) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; (ii) for a child with disability, a specialist or consultant physician practising in his or her field of specialty, or a general practitioner; and (e) the eligible psychologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of those services; and (f) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring eligible practitioner on assessments carried out, treatment provided and recommendations on future management of the child's condition; and (g) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (h) the service is provided to the child individually; and (i) the service is at least 30 minutes duration; to a maximum of 20 services (including services to which this item, Items 93036, 93043 and 93044, or Items 82015, 82020, 82025 and 82035 in the Allied Health Determination apply). Up to 4 services may be provided to the same child on the same day	88.25
93036	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Speech pathology, occupational therapy, audiology, optometry, orthoptic or physiotherapy health service provided by telehealth attendance to a child aged under 15 years for treatment of a pervasive developmental disorder (PDD) or eligible disability by an eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist if: (a) the child has been diagnosed with a PDD or an eligible disability; and (b) the child, while aged under 13 years, received a PDD or disability treatment and management plan as prepared by the eligible practitioner; and (c) the child was referred by an eligible practitioner for services consistent with the child's PDD or disability treatment and management plan; and (d) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (e) the eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of those services; and (f) on the completion of the course of treatment, the eligible speech pathologist gives a written report to the referring eligible practitioner on assessments carried out, treatment provided and recommendations on future management of the child's condition; and (g) the service is provided to the child individually; and (i) the service is at least 30 minutes duration; to a maximum of 20 services (including services to which this item, Item 93035, 93043 and 93044, or Items 82015, 82020 82025 and 82035 in the Allied Health Determination apply)	77.8
93040	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Psychology health service provided by phone attendance to a child aged under 13 years by an eligible psychologist if: (a) the child was referred to the eligible psychologist by an eligible practitioner: (i) to assist with the diagnosis of the child by the practitioner; or (ii) to contribute to the child's PDD or disability treatment and management plan, developed by the practitioner; and (b) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; or (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (c) the eligible psychologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of that service; and (d) the service is provided to the child individually; and (e) the service is at least 50 minutes duration; to a maximum of 4 services (including services to which this item, Items 93032, 93033 and 93041, or items 82000, 82010 and 82030 in the Allied Health Determination apply). Up to 4 services may be provided to the same child on the same day	88.25
93041	30/03/2020	ITable	8	MLB	ITable	ITable	D	N	ITable	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	ITable	ITable	ITable	ITable	ITable	ITable	ITable	1/01/2022	Speech pathology, occupational therapy, audiology, optometry, orthoptic or physiotherapy health service provided by phone attendance to a child aged under 13 years by an eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist if: (a) the child was referred to the eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist by an eligible practitioner: (i) to assist with the diagnosis of the child by the practitioner; or (ii) to contribute to the child's PDD or disability treatment and management plan, developed by the practitioner; and (b) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; or (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (c) the eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of that service; and (d) the service is provided to the child individually; and (e) the service is at least 50 minutes duration; to a maximum of 4 services (including services to which this item, Items 93032, 93033 and 93040 or items 82005, 82010 and 82030 in the Allied Health Determination apply). Up to 4 services may be provided to the same child on the same day	77.8

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93043	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Psychology health service provided by phone attendance to a child aged under 15 years for treatment of a pervasive developmental disorder (PDD) or eligible disability by an eligible psychologist, if: (a) the child has been diagnosed with a PDD or an eligible disability; and (b) the child, while aged under 13 years, received a PDD or disability treatment and management plan as prepared by the eligible practitioner; and (c) the child was referred by an eligible practitioner for services consistent with the child's PDD or disability treatment and management plan; and (d) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; (ii) for a child with disability, a specialist or consultant physician practising in his or her field of specialty, or a general practitioner; and (e) the eligible psychologist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of those services; and (f) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring eligible practitioner on assessments carried out, treatment provided and recommendations on future management of the child's condition; and (g) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (h) the service is provided to the child individually; and (i) the service is at least 30 minutes duration; to a maximum of 20 services (including services to which this item, Items 93032, 93035, 93036 and 93044 or Items 82020, 82025 and 82035 in the Allied Health Determination apply)		88.25
93044	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Speech pathology, occupational therapy, audiology, optometry, orthoptic or physiotherapy health service provided by phone attendance to a child aged under 15 years for treatment of a pervasive developmental disorder (PDD) or eligible disability by an eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist if: (a) the child has been diagnosed with a PDD or an eligible disability; and (b) the child, while aged under 13 years, received a PDD or disability treatment and management plan as prepared by the eligible practitioner; and (c) the child was referred by an eligible practitioner for services consistent with the child's PDD or disability treatment and management plan; and (d) the eligible practitioner is: (i) for a child with PDD, a consultant physician specialising in the practice of his or her field of psychiatry or paediatrics; (ii) for a child with disability, a specialist or consultant physician practising in his or her specialty, or a general practitioner; and (e) the eligible speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the Department of Human Services as meeting the credentialing requirements for the provision of those services; and (f) on the completion of the course of treatment, the eligible speech pathologist gives a written report to the referring eligible practitioner on assessments carried out, treatment provided and recommendations on future management of the child's condition; and (g) the service is provided to the child individually; and (i) the service is at least 30 minutes duration; to a maximum of 20 services (including services to which this item, Items 93035, 93036 and 93043 or Items 82015, 82025 and 82035 in the Allied Health Determination apply).		77.8
93048	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	C	1/01/2021	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible allied health practitioner if: (a) a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; and (b) the person is referred to the eligible allied health practitioner by a medical practitioner using a referral form issued by the Department or a referral form that contains all the components of the form issued by the Department; and (c) the service is provided to the person individually; and (d) the service is of at least 20 minutes duration; and (e) after the service, the eligible allied health practitioner gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral—in relation to that service; or (ii) if the service is the first or the last service under the referral—in relation to that service; and (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters; to a maximum of 5 services (including any services to which this item or Item 93061 or any item in Part 6 of Schedule 2 to the Allied Health Determination applies) in a calendar year	48.6	55.1
93061	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance provided to a person who is of Aboriginal or Torres Strait Islander descent by an eligible allied health practitioner if: (a) a medical practitioner has undertaken a health assessment and identified a need for follow-up allied health services; and (b) the person is referred to the eligible allied health practitioner by a medical practitioner using a referral form issued by the Department or a referral form that contains all the components of the form issued by the Department; and (c) the service is provided to the person individually; and (d) the service is of at least 20 minutes duration; and (e) after the service, the eligible allied health practitioner gives a written report to the referring medical practitioner mentioned in paragraph (b): (i) if the service is the only service under the referral—in relation to that service; or (ii) if the service is the first or the last service under the referral—in relation to that service; or (iii) if neither subparagraph (i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters; to a maximum of 5 services (including any services to which this item or Item 93060 or any item in Part 6 of Schedule 2 to the Allied Health Determination applies) in a calendar year		55.1
93074	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Dietetics health service provided by telehealth attendance to an eligible patient by an eligible dietitian: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is of at least 20 minutes in duration		55.1
93076	30/03/2020	[Table]	8	MLB	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 30 minutes but less than 50 minutes in duration.		88.25
93079	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		129.55
93084	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 20 minutes but less than 50 minutes in duration.		62.55
93087	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		88.25
93092	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible occupational therapist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually person; and (c) the service is at least 20 minutes but less than 50 minutes in duration.		55.1
93095	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible occupational therapist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		77.8
93100	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible social worker if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 20 minutes but less than 50 minutes in duration.		55.1
93103	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by telehealth attendance to an eligible patient by an eligible social worker if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		77.8
93108	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Dietetics health service provided by phone attendance to an eligible patient by an eligible dietitian: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is of at least 20 minutes in duration		55.1
93110	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 30 minutes but less than 50 minutes in duration.		88.25
93113	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible clinical psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		129.55
93118	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 20 minutes but less than 50 minutes in duration.		62.55
93121	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible psychologist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		88.25
93126	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible occupational therapist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually person; and (c) the service is at least 20 minutes but less than 50 minutes in duration.		55.1
93129	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible occupational therapist if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		77.8
93134	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible social worker if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 20 minutes but less than 50 minutes in duration.		55.1
93137	30/03/2020	[Table]	8	MLB	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	30/03/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Eating disorder psychological treatment service provided by phone attendance to an eligible patient by an eligible social worker if: (a) the service is recommended in the patient's eating disorder treatment and management plan; and (b) the service is provided to the patient individually; and (c) the service is at least 50 minutes in duration.		77.8

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93200	20/04/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	29.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Follow-up telehealth attendance provided by a practice nurse or an Aboriginal and Torres Strait Islander health practitioner, on behalf of a medical practitioner, for an Indigenous person who has received a health check if: (a) the service is provided on behalf of and under the supervision of a medical practitioner; and (b) the service is consistent with the needs identified through the health assessment.	24.95
93201	20/04/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	14.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Telehealth attendance provided by a practice nurse or an Aboriginal and Torres Strait Islander health practitioner to a person with a chronic disease if: (a) the service is provided on behalf of and under the supervision of a medical practitioner; and (b) the person has a GP management plan, team care arrangements or multidisciplinary care plan in place and the service is consistent with the plan or arrangements.	12.5
93202	20/04/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	29.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Follow-up phone attendance provided by a practice nurse or an Aboriginal and Torres Strait Islander health practitioner, on behalf of a medical practitioner, for an Indigenous person who has received a health check if: (a) the service is provided on behalf of and under the supervision of a medical practitioner; and (b) the service is consistent with the needs identified through the health assessment.	24.95
93203	20/04/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	20/04/2020	1/07/2021	14.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	20/04/2020	Phone attendance provided by a practice nurse or an Aboriginal and Torres Strait Islander health practitioner to a person with a chronic disease if: (a) the service is provided on behalf of and under the supervision of a medical practitioner; and (b) the person has a GP management plan, team care arrangements or multidisciplinary care plan in place and the service is consistent with the plan or arrangements.	12.5
93284	22/05/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	83.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Telehealth attendance by an eligible dietitian to provide a dietetics health service to a person for assessing the person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs and preparing the person for the group services if: (a) the person has type 2 diabetes; and (b) the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a GP management plan or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (c) the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and (d) the service is provided to the person individually; and (e) the service is of at least 45 minutes duration; and (f) after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph (c); payable once in a calendar year for this or any other assessment for group services item (including services to which this item, Item 92286, or Items 81100, 81110 and 81120 of the Allied Health Determination apply)	70.65
92285	22/05/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	20.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	22/05/2020	Telehealth attendance by an eligible dietitian to provide a dietetics health service, as a group service for the management of type 2 diabetes if: (a) the person has been assessed as suitable for a type 2 diabetes group service under assessment items 81100, 81110 or 81120 of the Allied Health Determination or items 92284 or 92286; and (b) the service is provided to a person who is part of a group of between 2 and 12 patients; and (c) the service is of at least 60 minutes duration; and (d) after the last service in the group services program provided to the person under this item or items 81105, 81115 or 81125 of the Allied Health Determination, the eligible dietitian prepares, or contributes to, a written report to be provided to the referring medical practitioner; and (e) an attendance record for the group is maintained by the eligible dietitian; sub maximum of 8 group services in a calendar year (including services to which this item or items 81105, 81115 and 81125 of the Allied Health Determination apply)	17.6
92286	22/05/2020	[Table]	8	M18	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	P	B	22/05/2020	1/07/2021	83.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2022	Phone attendance by an eligible dietitian to provide a dietetics health service to a person for assessing the person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs and preparing the person for the group services if: (a) the person has type 2 diabetes; and (b) the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a GP management plan or, if the person is a resident of an aged care facility, the person's medical practitioner has contributed to a multidisciplinary care plan; and (c) the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and (d) the service is provided to the person individually; and (e) the service is of at least 45 minutes duration; and (f) after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph (c); payable once in a calendar year for this or any other assessment for group services item (including services to which this item, item 92284, or in items 81100, 81110 and 81120 of the Allied Health Determination apply)	70.65
93312	10/12/2020	[Table]	8	M25	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychological therapy health service provided to a person (but not as an admitted patient of a hospital), by an eligible clinical psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 30 minutes but less than 50 minutes duration	88.25
93313	10/12/2020	[Table]	8	M25	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychological therapy health service provided to a person (but not as an admitted patient of a hospital), by an eligible clinical psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	129.55
93316	10/12/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital) by an eligible psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	62.55
93319	10/12/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital), by an eligible psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	88.25
93322	10/12/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person(but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93323	10/12/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8
93326	10/12/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital) by an eligible social worker if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93327	10/12/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital) by an eligible social worker if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8

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93330	7/08/2020	[Table]	8	M25	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Psychological therapy health service provided to a person in consulting rooms (but not as an admitted patient of a hospital), by an eligible clinical psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 30 minutes but less than 50 minutes duration	88.25
93331	7/08/2020	[Table]	8	M25	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Psychological therapy health service provided by telehealth attendance by an eligible clinical psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 30 minutes but less than 50 minutes duration	88.25
93332	7/08/2020	[Table]	8	M25	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Psychological therapy health service provided by phone attendance by an eligible clinical psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 30 minutes but less than 50 minutes duration	88.25
93333	7/08/2020	[Table]	8	M25	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Psychological therapy health service provided to a person in consulting rooms (but not as an admitted patient of a hospital), by an eligible clinical psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	129.55
93334	7/08/2020	[Table]	8	M25	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Psychological therapy health service provided by telehealth attendance by an eligible clinical psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	129.55
93335	7/08/2020	[Table]	8	M25	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Psychological therapy health service provided by phone attendance by an eligible clinical psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	129.55
93350	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided to a person in consulting rooms (but not as an admitted patient of a hospital) by an eligible psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f)the service is at least 20 minutes but less than 50 minutes duration	62.55
93351	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by telehealth attendance by an eligible psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	62.55
93352	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	73.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by phone attendance by an eligible psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	62.55
93353	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided to a person in consulting rooms (but not as an admitted patient of a hospital), by an eligible psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	88.25
93354	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by telehealth attendance by an eligible psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	88.25
93355	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by phone attendance by an eligible psychologist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	88.25
93356	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided to a person in consulting rooms (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93357	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by telehealth attendance by an eligible occupational therapist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93358	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by phone attendance by an eligible occupational therapist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93359	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided to a person in consulting rooms (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8

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93360	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by telehealth attendance by an eligible occupational therapist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes in duration	77.8
93361	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by phone attendance by an eligible occupational therapist if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes in duration	77.8
93362	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided to a person in consulting rooms (but not as an admitted patient of a hospital) by an eligible social worker if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93363	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by telehealth attendance by an eligible social worker if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93364	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by phone attendance by an eligible social worker if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93365	7/08/2020	[Table]	8	M26	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided to a person in consulting rooms (but not as an admitted patient of a hospital) by an eligible social worker if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8
93366	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by telehealth attendance by an eligible social worker if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8
93367	7/08/2020	[Table]	8	M26	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	7/08/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	9/10/2020	Focussed psychological strategies health service provided by phone attendance by an eligible social worker if: (b) the person is referred by a medical practitioner working in general practice, a psychiatrist or a paediatrician who makes a written record of the need for additional mental health treatment services; and (c) the service is provided to the person individually; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8
93375	10/12/2020	[Table]	8	M27	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychological therapy health service provided to a person (but not as an admitted patient of a hospital), by an eligible clinical psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	88.25
93376	10/12/2020	[Table]	8	M27	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	152.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychological therapy health service provided to a person (but not as an admitted patient of a hospital), by an eligible clinical psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible clinical psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	129.55
93381	10/12/2020	[Table]	8	M28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	75.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital) by an eligible psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	62.55
93382	10/12/2020	[Table]	8	M28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	103.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person(but not as an admitted patient of a hospital), by an eligible psychologist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible psychologist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	88.25
93383	10/12/2020	[Table]	8	M28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person(but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93384	10/12/2020	[Table]	8	M28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person (but not as an admitted patient of a hospital) by an eligible occupational therapist if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible occupational therapist gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8

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93385	10/12/2020	[Table]	8	M28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person [but not as an admitted patient of a hospital] by an eligible social worker if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 20 minutes but less than 50 minutes duration	55.1
93386	10/12/2020	[Table]	8	M28	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	91.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Focussed psychological strategies health service provided to a person [but not as an admitted patient of a hospital] by an eligible social worker if: (a) the person is a care recipient in a residential aged care facility; and (b) the person is referred by: (i) a medical practitioner, either as part of a GP Mental Health Treatment Plan or as part of a psychiatrist assessment and management plan; or (ii) a specialist or consultant physician specialising in the practice of his or her field of psychiatry; and (c) the service is provided to the person individually and in person; and (d) at the completion of a course of treatment, the referring medical practitioner reviews the need for a further course of treatment; and (e) on the completion of the course of treatment, the eligible social worker gives a written report to the referring medical practitioner on assessments carried out, treatment provided and recommendations on future management of the person's condition; and (f) the service is at least 50 minutes duration	77.8
93501	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Aboriginal and Torres Strait Islander health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner if all of the following apply: (a) the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs;(b) the service is provided to a person whose chronic or complex care needs is being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii) a shared care plan; or (iii) a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d) the service is provided to the person individually and in person; and (e) the service is at least 30 minutes in duration; and (f) after the service, the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93502	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Diabetes education health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible diabetes educator if all of the following apply: (a) the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b) the service is provided to a person whose chronic or complex care needs is being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii) a shared care plan; or (iii) a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c) the person is referred to the eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d) the service is provided to the person individually and in person; and (e) the service is at least 30 minutes in duration; and (f) after the service, the eligible diabetes educator gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93503	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Audiology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible audiologist if all of the following apply: (a) the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b) the service is provided to a person whose chronic or complex care needs is being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c) the person is referred to the eligible audiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d) the service is provided to the person individually and in person; and (e) the service is at least 30 minutes in duration; and (f) after the service, the eligible audiologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93504	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Exercise physiology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible exercise physiologist if all of the following apply: (a) the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs;(b) the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93505	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Dietetics health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible dietitian if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible dietitian by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible dietitian gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93506	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Mental health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible mental health worker if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible mental health worker by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible mental health worker gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93507	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Occupational therapy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible occupational therapist if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible occupational therapist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93508	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Physiotherapy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible physiotherapist if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible physiotherapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible physiotherapist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93509	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Podiatry health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible podiatrist if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible podiatrist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible podiatrist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6

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93510	10/12/2020	ITable1	B	M29	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Chiropractic health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible chiropractor if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible chiropractor by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible chiropractor gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93511	10/12/2020	ITable1	B	M29	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Osteopathy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible osteopath if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible osteopath by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible osteopath gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93512	10/12/2020	ITable1	B	M29	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Psychology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible psychologist if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible psychologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible psychologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93513	10/12/2020	ITable1	B	M29	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Speech pathology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible speech pathologist if all of the following apply: (a)the person's chronic or complex care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (b)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c)the person is referred to the eligible speech pathologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible speech pathologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93518	10/12/2020	ITable1	B	M29	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	15/09/2021	Additional exercise physiology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible exercise physiologist if all of the following apply: (a) the person's chronic or complex care needs are assessed as requiring additional exercise physiology therapy services in a calendar year; (b) the service is provided to a person whose chronic or complex care needs are being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii) a shared care plan; or (iii) GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c) the person is referred to the eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department; (d) the service is provided to the person individually and in person; (e) the service is at least 20 minutes in duration; (f) after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner (i) if the service is the only service under the referral – in relation to that service; or (ii) if the service is the first or last service under the referral – in relation to that service; or (iii) if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of – in relation to those matters	55.1
93519	10/12/2020	ITable1	B	M29	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	15/09/2021	Additional occupational therapy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible occupational therapist if all of the following apply: (a) the person's chronic or complex care needs are assessed as requiring additional occupational therapy services in a calendar year; (b)the service is provided to a person whose chronic or complex care needs are being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii) a shared care plan; or (iii) a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c) the person is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d) the service is provided to the person individually and in person; (e) the service is at least 20 minutes in duration; (f) after the service, the eligible occupational therapist gives a written report to the referring medical practitioner: (i) if the service is the only service under the referral – in relation to that service; or (ii) if the service is the first or last service under the referral – in relation to that service; or (iii) if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of – in relation to those matters	55.1
93520	10/12/2020	ITable1	B	M29	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	15/09/2021	Additional physiotherapy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible physiotherapist if all of the following apply: (a) the person's chronic or complex care needs are assessed as requiring additional physiotherapy services in a calendar year; (b) the service is provided to a person whose chronic or complex care needs are being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii) a shared care plan; or (iii) a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (c) the person is referred to the eligible physiotherapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d) the service is provided to the person individually and in person; (e) the service is at least 20 minutes in duration; (f) after the service, the eligible physiotherapist gives a written report to the referring medical practitioner: (i) if the service is the only service under the referral – in relation to that service; or (ii) if the service is the first or last service under the referral – in relation to that service; or (iii) if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of – in relation to those matters	55.1
93524	10/12/2020	ITable1	B	M29	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Aboriginal and Torres Strait Islander health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	55.1
93525	10/12/2020	ITable1	B	M29	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Diabetes education health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible diabetes educator if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which Items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	55.1

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93526	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Audiology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible audiologist if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible audiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible audiologist gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93527	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Exercise physiology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible exercise physiologist if all of the following apply: (a) the service is provided to a person whose chronic or complex care needs is being managed under: (i) a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93528	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Dietetics health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible dietitian if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible dietitian by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible dietitian gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93529	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Mental health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible mental health worker if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible mental health worker by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible mental health worker gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93530	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Occupational therapy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible occupational therapist if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible occupational therapist gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93531	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Physiotherapy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible physiotherapist if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible physiotherapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible physiotherapist gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93532	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Podiatry health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible podiatrist if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible podiatrist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible podiatrist gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93533	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Chiropractic health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible chiropractor if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible chiropractor by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible chiropractor gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93534	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Osteopathy health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible osteopath if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible osteopath by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible osteopath gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93535	10/12/2020	[Table]	8	M29	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychology health service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible psychologist if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible psychologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible psychologist gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1

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93536	10/12/2020	ITable	B	M29	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Speech pathology service provided to a care recipient in a residential aged care facility, at a residential aged care facility, by an eligible speech pathologist if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible speech pathologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible speech pathologist gives a written report to the referring medical practitioner: (i) if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93537	10/12/2020	ITable	B	M29	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Telehealth attendance provided to a care recipient in a residential aged care facility, by an eligible allied health practitioner, if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible allied health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible allied health practitioner gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93538	10/12/2020	ITable	B	M29	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Phone attendance provided to a care recipient in a residential aged care facility, by an eligible allied health practitioner, if all of the following apply: (a)the service is provided to a person whose chronic or complex care needs is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93469 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; (b)the person is referred to the eligible allied health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible allied health practitioner gives a written report to the referring medical practitioner: (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93546	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Aboriginal and Torres Strait Islander health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93547	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Diabetes education health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible diabetes educator if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible diabetes educator by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93548	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Audiology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible audiologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible audiologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible audiologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93549	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Exercise physiology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible exercise physiologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible exercise physiologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93550	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Dietetics health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible dietitian if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible dietitian by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible dietitian gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93551	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Mental health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible mental health worker if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible mental health worker by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible mental health worker gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93552	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Occupational therapy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible occupational therapist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible occupational therapist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible occupational therapist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93553	10/12/2020	ITable	B	M50	ITable	ITable	S	N	ITable	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable	ITable	ITable	ITable	ITable	ITable	ITable	10/12/2020	Physiotherapy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible physiotherapist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible physiotherapist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible physiotherapist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6

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93554	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Podiatry health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible podiatrist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible podiatrist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible podiatrist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93555	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Chiropractic health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible chiropractor if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible chiropractor by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible chiropractor gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93556	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Osteopathy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible osteopath if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible osteopath by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible osteopath gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93557	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible psychologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible psychologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible psychologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93558	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Speech pathology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible speech pathologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person's health care needs are assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; (c)the person is referred to the eligible speech pathologist by a medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (d)the service is provided to the person individually and in person; and (e)the service is at least 30 minutes in duration; and (f)after the service, the eligible speech pathologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93571	10/12/2020	[Table]	8	MSO	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/09/2021	Additional exercise physiology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible exercise physiologist if all of the following apply: (a) the person's health care needs are assessed as requiring additional exercise physiology therapy services in a calendar year; (b) the service is provided to a person: (i) whose need for allied health treatment services has been identified by: A. a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or B. a shared care plan; or (ii) who is referred to the eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c) the service is provided to the person individually and in person; (d) the service is at least 20 minutes in duration; (e) after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner: (i) if the service is the only service under the referral – in relation to that service; or (ii) if the service is the first or last service under the referral – in relation to that service; or (iii) if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of – in relation to those matters	55.1
93572	10/12/2020	[Table]	8	MSO	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/09/2021	Additional occupational therapy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible occupational therapist if all of the following apply: (a) the person's health care needs are assessed as requiring additional occupational therapy services in a calendar year; (b) the service is provided to a person: (i) whose need for allied health treatment services has been identified by: A. a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or B. a shared care plan; or (ii) who is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c) the service is provided to the person individually and in person; (d) the service is at least 20 minutes in duration; (e) after the service, the eligible occupational therapist gives a written report to the referring medical practitioner: (i) if the service is the only service under the referral – in relation to that service; or (ii) if the service is the first or last service under the referral – in relation to that service; or (iii) if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of – in relation to those matters	55.1
93573	10/12/2020	[Table]	8	MSO	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	15/09/2021	Additional physiotherapy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible physiotherapist if all of the following apply: (a) the person's health care needs are assessed as requiring additional physiotherapy health services in a calendar year; (b) the service is provided to a person: (i) whose need for allied health treatment services has been identified by: A. a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or B. a shared care plan; or (ii) who is referred to the eligible physiotherapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c) the service is provided to the person individually and in person; (d) the service is at least 20 minutes in duration; (e) after the service, the eligible physiotherapist gives a written report to the referring medical practitioner: (i) if the service is the only service under the referral—in relation to that service; or (ii) if the service is the first or last service under the referral—in relation to that service; or (iii) if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of – in relation to those matters	55.1
93579	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Aboriginal and Torres Strait Islander health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible Aboriginal health worker or eligible Aboriginal and Torres Strait Islander health practitioner gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	55.1
93580	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Diabetes education health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible diabetes educator if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	55.1
93581	10/12/2020	[Table]	8	MSO	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Audiology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible audiologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible audiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible audiologist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	55.1

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93582	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Exercise physiology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible exercise physiologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93583	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Dietetics health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible dietitian if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible dietitian by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible dietitian gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93584	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Mental health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible mental health worker if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible mental health worker by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e) after the service, the eligible mental health worker gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93585	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Occupational therapy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible occupational therapist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible occupational therapist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93586	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Physiotherapy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible physiotherapist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible physiotherapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible physiotherapist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93587	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Podiatry health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible podiatrist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible podiatrist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible podiatrist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93588	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Chiropractic health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible chiropractor if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible chiropractor by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c) the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible chiropractor gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93589	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Osteopathy health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible osteopath if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible osteopath by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible osteopath gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93590	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Psychology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an eligible psychologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the eligible psychologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the eligible psychologist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93591	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Speech pathology health service provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an speech pathologist if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the speech pathologist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the speech pathologist gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1
93592	10/12/2020	[Table]	B	MSD	[Table]	[Table]	S	N	[Table]	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	10/12/2020	Telehealth attendance provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an by an eligible allied health practitioner if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the by an eligible allied health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c)the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the by an eligible allied health practitioner gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	SS.1

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93593	10/12/2020	ITable1	8	M30	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	64.8	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Phone attendance provided to a care recipient in a residential aged care facility of Aboriginal or Torres Strait Islander descent, at a residential aged care facility, by an by an eligible allied health practitioner if all of the following apply: (a)the service is provided to a person whose need for allied health treatment services has been identified by: (i)a health assessment service to which items 228, 715, 92004, 92011, 92016, 92023, 93470 or 93479 applies; or (ii)a shared care plan; or (b)the person is referred to the by an eligible allied health practitioner by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; (c) the service is provided to the person individually and in person; and (d)the service is at least 20 minutes in duration; and (e)after the service, the by an eligible allied health practitioner gives a written report to the referring medical practitioner (i)if the service is the only service under the referral—in relation to that service; or (ii)if the service is the first or last service under the referral—in relation to that service; or (iii)if neither subparagraph(i) nor (ii) applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of—in relation to those matters	55.1
93606	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Diabetes education health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible diabetes educator for assessing the person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs and preparing the person for the group services if: (a)the person's type 2 diabetes is assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; and (b)the service is provided to a person whose type 2 diabetes is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93468 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; and (c)the person is referred to an eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 45 minutes duration; and (f)after the service, the eligible diabetes educator gives a written report to the referring medical practitioner	82.6
93607	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Exercise physiology health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible exercise physiologist for assessing the person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs and preparing the person for the group services if: (a)the person's type 2 diabetes is assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; and (b)the service is provided to a person whose type 2 diabetes is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93468 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; and (c)the person is referred to an eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 45 minutes duration; and (f)after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner not more than once in a calendar year	82.6
93608	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	97.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Dietetics health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible dietitian for assessing the person's suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient's needs and preparing the person for the group services if: (a)the person's type 2 diabetes is assessed, including taking a comprehensive patient history and identifying an appropriate treatment program based on the person's needs; and (b)the service is provided to a person whose type 2 diabetes is being managed under: (i)a multidisciplinary care plan for a residential aged care recipient to which items 232, 731, 92027, 92058, 92071, 92102, 93468 or 93475 applies; or (ii)a shared care plan; or (iii)a GP Management Plan and Team Care Arrangements, where the chronic or complex condition was being treated prior to the person receiving residential care; and (c)the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and (d)the service is provided to the person individually and in person; and (e)the service is of at least 45 minutes duration; and (f)after the service, the eligible dietitian gives a written report to the referring medical practitioner	82.6
93613	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	20.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Diabetes education health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible diabetes educator as a group service for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment item81100, 81110, 81120,93284, 93286, 93606, 93607 or 93608; and (b)the service is provided to a person who is part of a group of between 2 and 12 patients; and (c)the service is provided in person; and (d)the service is of at least 60 minutes duration; and (e)after the last service in the group services program provided to the person under item 81105, 81115, 81125, 93285, 93613, 93614, 93615 the eligible diabetes educator prepares, or contributes to, a written report to be provided to the referring medical practitioner	17.6
93614	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	20.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Exercise physiology health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible exercise physiologist as a group service for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment item81100, 81110, 81120,93284, 93286, 93606, 93607 or 93608; and (b)the service is provided to a person who is part of a group of between 2 and 12 patients; and (c)the service is provided in person; and (d)the service is of at least 60 minutes duration; and (e)after the last service in the group services program provided to the person under item 81105, 81115, 81125, 93285, 93613, 93614, 93615 the eligible exercise physiologist prepares, or contributes to, a written report to be provided to the referring medical practitioner	17.6
93615	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	20.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Dietetics health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible dietitian as a group service for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment item81100, 81110, 81120,93284, 93286, 93606, 93607 or 93608; and (b)the service is provided to a person who is part of a group of between 2 and 12 patients; and (c)the service is provided in person; and (d)the service is of at least 60 minutes duration; and (e)after the last service in the group services program provided to the person under item 81105, 81115, 81125, 93285, 93613, 93614, 93615 the eligible dietitian prepares, or contributes to, a written report to be provided to the referring medical practitioner	17.6
93620	10/12/2020	ITable1	8	M31	ITable1	ITable1	S	N	ITable1	N	N	N	N	N	N	N	B	10/12/2020	1/07/2021	20.7	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	10/12/2020	Additional exercise physiology health service provided to a care recipient in a residential aged care facility with type 2 diabetes, at a residential aged care facility, by an eligible exercise physiologist as a group service for the management of type 2 diabetes if: (a)the person has been assessed as suitable for a type 2 diabetes group service under assessment item81100, 81110, 81120,93284, 93286, 93606, 93607 or 93608; and (b)the person has received 6 services, to which an item in subgroup 2 of Group M31 or 81105, 81115, 81125 applied (in total for all items), in that calendar year. (c)the service is provided to a person who is part of a group of between 2 and 12 patients; and (d)the service is provided in person; and (e)the service is of at least 60 minutes duration; and (f)after the last service to which this item applies was provided to a person in a calendar year, the eligible exercise physiologist gives a written report to the referring medical practitioner	17.6
88011	1/01/2014	ITable1	10	U0	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	54.05	54.05	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Comprehensive oral examination Evaluation of all teeth, their supporting tissues and the oral tissues in order to record the condition of these structures. This evaluation includes recording an appropriate medical history and any other relevant information.
88012	1/01/2014	ITable1	10	U0	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	44.9	44.9	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Periodic oral examination An evaluation performed on a patient of record to determine any changes in the patient's dental and medical health status since a previous comprehensive or periodic examination.
88013	1/01/2014	ITable1	10	U0	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	28.2	28.2	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Oral examination - limited A limited oral problem-focussed evaluation carried out immediately prior to required treatment. This evaluation includes recording an appropriate medical history and any other relevant information.
88022	1/01/2014	ITable1	10	U0	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	31.25	31.25	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Intraoral periapical or bitewing radiograph - per exposure Taking and interpreting a radiograph made with the film inside the mouth.
88025	1/01/2014	ITable1	10	U0	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	63.15	63.15	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Intraoral radiograph - occlusal, maxillary, mandibular - per exposure Taking and interpreting an occlusal, maxillary or mandibular intraoral radiograph. This radiograph shows a more extensive view of teeth and maxillary or mandibular bone.
88111	1/01/2014	ITable1	10	U1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	55.2	55.2	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Removal of plaque and/or stain Removal of dental plaque and/or stain from the surfaces of all teeth and/or implants.
88114	1/01/2014	ITable1	10	U1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	92.05	92.05	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Removal of calculus - first visit Removal of calculus from the surfaces of teeth.
88115	1/01/2014	ITable1	10	U1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	59.85	59.85	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Removal of calculus - subsequent visit This item describes procedures in item 88114 when, because of the extent or degree of calculus, an additional visit(s) is required to remove deposits from the teeth.
88121	1/01/2014	ITable1	10	U1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	35.45	35.45	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Topical application of remineralisation and/or cariostatic agents, one treatment Application of remineralisation and/or cariostatic agents to the surfaces of the teeth. This may include activation of the agent. Not to be used as an intrinsic part of the restoration.
88161	1/01/2014	ITable1	10	U1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	47.25	47.25	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2015	Fissure and/or tooth surface sealing - per tooth (First four services on a day) Sealing of non-carious pits, fissures, smooth surfaces or cracks in a tooth with an adhesive material. Any preparation prior to application of the sealant is included in this item number.
88162	1/01/2014	ITable1	10	U1	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	23.65	23.65	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Fissure and/or tooth surface sealing - per tooth (subsequent services) Sealing of non-carious pits, fissures, smooth surfaces or cracks in a tooth with an adhesive material. Any preparation prior to application of the sealant is included in this item number.
88213	1/01/2014	ITable1	10	U2	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	71.5	71.5	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Treatment of acute periodontal infections - per visit This item describes the treatment of acute periodontal infection(s). It may include establishing drainage and the removal of calculus from the affected tooth (teeth). Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88221	1/01/2014	ITable1	10	U2	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	54.35	54.35	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Clinical periodontal analysis and recording This is a special examination performed as part of the diagnosis and management of periodontal disease. The procedure consists of assessing and recording a patient's periodontal condition. All teeth and six sites per tooth must be recorded. Written documentation of these measurements must be retained.
88311	1/01/2014	ITable1	10	U3	ITable1	ITable1	D	N	ITable1	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	134.75	134.75	ITable1	ITable1	ITable1	ITable1	ITable1	ITable1	1/01/2014	Removal of a tooth or part(s) thereof - first tooth extracted on a day A procedure consisting of the removal of a tooth or part(s) thereof. Inclusive of the insertion of sutures, normal post-operative care and suture removal.

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88314	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	172.2	172.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Sectional removal of a tooth or part(s) thereof - first tooth extracted on a day The removal of a tooth or part(s) thereof in sections. Bone removal may be necessary. Inclusive of the insertion of sutures, normal postoperative care and suture removal.
88316	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	84.95	84.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Additional extraction requiring removal of a tooth or part(s) thereof, or sectional removal of a tooth. Additional extraction provided on the same day as a service described in Item 88311 or 88314 is provided to the patient.
88322	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	218.65	218.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Surgical removal of a tooth or tooth fragment not requiring removal of bone or tooth division - first tooth extracted on a day Removal of a tooth or tooth fragment where an incision and the raising of a mucoperiosteal flap is required, but where removal of bone or sectioning of the tooth is not necessary to remove the tooth. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88323	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	249.7	249.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Surgical removal of a tooth or tooth fragment requiring removal of bone - first tooth extracted on a day Removal of a tooth or tooth fragment where removal of bone is required after an incision and a mucoperiosteal flap raised. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88324	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	335.9	335.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Surgical removal of a tooth or tooth fragment requiring both removal of bone and tooth division - first tooth extracted on a day Removal of a tooth or tooth fragment where both removal of bone and sectioning of the tooth are required after an incision and a mucoperiosteal flap raised. The tooth will be removed in portions. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88326	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	178.9	178.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Additional extraction requiring surgical removal of a tooth or tooth fragment Additional surgical extraction provided on the same day as a service described in Item 88322, 88323 or 88324 is provided to the patient.
88351	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	164.15	164.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Repair of skin and subcutaneous tissue or mucous membrane The surgical cleaning and repair of a facial skin wound in the region of the mouth or jaws, or the repair of oral mucous membrane, where the wounds involve the subcutaneous tissues. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88384	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	195.85	195.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Repositioning of displaced tooth/teeth - per tooth A procedure following trauma where the position of the displaced tooth/teeth is corrected by manipulation. Stabilizing procedures are itemised separately. Inclusive of the insertion of sutures, normal postoperative care and suture removal.
88386	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	202.05	202.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Splinting of displaced tooth/teeth - per tooth A procedure following trauma where the position of the displaced tooth/teeth may be stabilised by splinting. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88387	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	395.65	395.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Replantation and splinting of a tooth Replantation of a tooth which has been avulsed or intentionally removed. It may be held in the correct position by splinting. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88392	1/01/2014	[Table]	10	U3	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	99.4	99.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Drainage of abscess Drainage and/or removal of an abscess other than through a root canal or at the time of extraction. The drainage may be through an incision or inserted tube. Inclusive of the insertion of sutures, normal post-operative care and suture removal.
88411	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	35.75	35.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Direct pulp capping A procedure where an exposed pulp is directly covered with a protective dressing or cement.
88412	1/01/2015	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2015	1/01/2022	122.5	122.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2015	Incomplete endodontic therapy (tooth not suitable for further treatment) A procedure where in assessing the suitability of a tooth for endodontic treatment a decision is made that the tooth is not suitable for treatment.
88414	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	78.05	78.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Pulpotomy Amputation within the pulp chamber of part of the vital pulp of a tooth. The pulp remaining in the canal(s) is then covered with a protective dressing or cement.
88415	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	219.75	219.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Complete chemo-mechanical preparation of root canal - one canal Complete chemo-mechanical preparation including removal of pulp or necrotic debris from a canal.
88416	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	104.7	104.7	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Complete chemo-mechanical preparation of root canal - each additional canal Complete chemo-mechanical preparation including removal of pulp or necrotic debris from each additional canal of a tooth with multiple canals.
88417	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	214.05	214.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Root canal obturation - one canal The filling of a root canal, following chemo-mechanical preparation.
88418	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	100.1	100.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Root canal obturation - each additional canal The filling, following chemo-mechanical preparation, of each additional canal in a tooth with multiple canals.
88419	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	141.5	141.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Extirpation of pulp or debridement of root canal(s) - emergency or palliative The partial or thorough removal of pulp and/or debris from the root canal system of a tooth. This is an emergency or palliative procedure distinct from visits for scheduled endodontic treatment.
88421	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	122.5	122.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Resorbable root canal filling - primary tooth The placement of resorbable root canal filling material in a primary tooth.
88455	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	108.45	108.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Additional visit for irrigation and/or dressing of the root canal system - per tooth Additional debridement irrigation and short-term dressing required where evidence of infection or inflammation persists following prior opening of the root canal and removal of its contents.
88458	1/01/2014	[Table]	10	U4	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	144.65	144.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Interim therapeutic root filling - per tooth A procedure consisting of the insertion of a long-term provisional (temporary) root canal filling with therapeutic properties which facilitates healing/development of the root and periradicular tissues over an extended time.
88511	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	106.95	106.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Metallic restoration - one surface - direct Direct metallic restoration involving one surface of a tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88512	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	131.15	131.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Metallic restoration - two surfaces - direct Direct metallic restoration involving two surfaces of a tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88513	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	156.9	156.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Metallic restoration - three surfaces - direct Direct metallic restoration involving three surfaces of a tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88514	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	178.4	178.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Metallic restoration - four surfaces - direct Direct metallic restoration involving four surfaces of a tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88515	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	203.65	203.65	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Metallic restoration - five surfaces - direct Direct metallic restoration involving five surfaces of a tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88521	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	118.45	118.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - one surface - anterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving one surface of an anterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88522	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	143.8	143.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - two surfaces - anterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving two surfaces of an anterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88523	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	170.35	170.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - three surfaces - anterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving three surfaces of an anterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88524	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	196.9	196.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - four surfaces - anterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving four surfaces of an anterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88525	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	231.35	231.35	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - five surfaces - anterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving five surfaces of an anterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88531	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	126.5	126.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - one surface - posterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving one surface of an posterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88532	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	158.85	158.85	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - two surfaces - posterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving two surfaces of an posterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88533	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	190.95	190.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - three surfaces - posterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving three surfaces of an posterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88534	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	215.2	215.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - four surfaces - posterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving four surfaces of an posterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88535	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	248.55	248.55	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adhesive restoration - five surfaces - posterior tooth - direct Direct restoration, using an adhesive technique and a tooth-coloured material, involving five surfaces of an posterior tooth. Inclusive of the preparation of the tooth, placement of a lining, contouring of the adjacent and opposing teeth, placement of the restoration and normal post-operative care.
88572	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	50.05	50.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Provisional (intermediate/temporary) restoration - per tooth The provisional (intermediate) restoration of a tooth designed to last until the definitive restoration can be constructed or the tooth is removed. This item should only be used where the provisional (intermediate) restoration is not an intrinsic part of treatment. It does not include provisional (temporary) sealing of the access cavity during endodontic treatment or during construction of indirect restorations.
88574	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	42.15	42.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Metal band The cementation of a metal band for diagnostic, protective purposes or for the placement of a provisional (intermediate) restoration.
88575	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	28.75	28.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Pin retention - per pin Use of a pin to aid the retention and support of direct or indirect restorations in a tooth.

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88579	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	99.4	99.4	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Bonding of tooth fragment The direct bonding of a tooth fragment as an alternative to placing a restoration.
88586	1/01/2018	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2018	1/01/2022	263.8	263.8	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2018	Crown-metallic-with tooth preparation-preformed Placing a preformed metallic crown as a coronal restoration for a tooth.
88587	1/01/2018	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2018	1/01/2022	156.5	156.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2018	Crown-metallic-minimal tooth preparation-preformed Placing a preformed metallic crown as a coronal restoration for a tooth and where minimal or no restoration of the tooth is required. Commonly referred to as a 'Half' crown.
88597	1/01/2014	[Table]	10	U5	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	90.45	90.45	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Post - direct Insertion of a post into a prepared root canal to provide an anchor for an artificial crown or other restoration.
88721	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	448.05	448.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Partial maxillary denture - resin, base only Provision of a resin base for a removable dental prosthesis for the maxilla where some natural teeth remain.
88722	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	448.05	448.05	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Partial mandibular denture - resin, base only Provision of a resin base for a removable dental prosthesis for the mandible where some natural teeth remain.
88723	1/01/2018	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2018	1/01/2022	336	336	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2018	Provisional partial maxillary denture Provision of a patient removable partial dental prosthesis replacing the natural teeth and adjacent tissues in the maxilla which is designed to last until the definitive prosthesis can be constructed. This item should only be used where a provisional denture is not an intrinsic part of item 88721.
88724	1/01/2018	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2018	1/01/2022	336	336	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2018	Provisional partial mandibular denture Provision of a patient removable partial dental prosthesis replacing the natural teeth and adjacent tissues in the mandible which is designed to last until the definitive prosthesis can be constructed. This item should only be used where a provisional denture is not an intrinsic part of item 88722.
88731	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	45.2	45.2	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Retainer - per tooth A retainer or attachment fitted to a tooth to aid retention of a partial denture. The number of retainers should be indicated.
88733	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	37.1	37.1	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Tooth/teeth (partial denture) An item to describe each tooth added to the base of a new partial denture. The number of teeth should be indicated.
88736	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	9.3	9.3	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Immediate tooth replacement - per tooth Provision within a denture to allow immediate replacement of an extracted tooth. The number of teeth so replaced should be indicated.
88741	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	53.9	53.9	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Adjustment of a denture Adjustment of a denture to improve comfort, function or aesthetics. This item does not apply to routine adjustments following the insertion of a new denture or the maintenance or repair of an existing denture.
88761	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	147.95	147.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Reattaching pre-existing clasp to denture Repair, insertion and adjustment of a denture involving re-attachment of a pre-existing clasp.
88762	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	154.6	154.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Replacing/adding clasp to denture - per clasp Repair, insertion and adjustment of a denture involving replacement or addition of a new clasp to denture.
88764	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	147.95	147.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Repairing broken base of a partial denture Repair, insertion and adjustment of a broken resin partial denture base.
88765	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	154.6	154.6	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Replacing/adding new tooth to denture - per tooth Repair, insertion and adjustment of a denture involving replacement with or addition of a new tooth or teeth to a previously existing denture.
88766	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	147.95	147.95	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Reattaching existing tooth on denture - per tooth Repair, insertion and adjustment of a denture involving re-attachment of a pre-existing denture tooth or teeth.
88768	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	156.5	156.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Addition to partial denture to replace an extracted or decorronated tooth - per tooth Modification, insertion and adjustment of a partial denture involving an addition to accommodate the loss of a natural tooth or its coronal section.
88776	1/01/2014	[Table]	10	U7	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	47.25	47.25	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Impression - dental appliance repair/modification An item to describe taking an impression where required for the repair or modification of a dental appliance.
88911	1/01/2014	[Table]	10	U9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	70.15	70.15	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Palliative care An item to describe interim care to relieve pain, infection, bleeding or other problems not associated with other treatment.
88942	1/01/2014	[Table]	10	U9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	137.5	137.5	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Sedation - intravenous Sedative drug(s) administered intravenously, usually in increments. The incremental administration may continue while dental treatment is being provided.
88943	1/01/2014	[Table]	10	U9	[Table]	[Table]	D	N	[Table]	N	N	N	N	N	N	N	E	1/01/2014	1/01/2022	68.75	68.75	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	[Table]	1/01/2014	Sedation - inhalation Nitrous oxide gas mixed with oxygen is inhaled by the patient while dental treatment is being provided.

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