**HEALTH INSURANCE ACT 1973**

**No. 42 of 1974**

An Act providing for Payments by way of Medical Benefits and Payments for Hospital Services and for other purposes.

BE IT ENACTED by the Queen, the Senate and the House of Representatives of Australia, as follows:—

PART I—PRELIMINARY

**Short title.**

**1.** This Act may be cited as the Health Insurance Act 1973.

**Commencement.**

**2.** This Act shall come into operation on the day on which it receives the Royal Assent.

**Interpretation.**

**3.** (1) In this Act, unless the contrary intention appears—

“agreement” means an agreement under section 30;

“amendment alleviating the operation of the means test”, in relation to a person, means an amendment of the Social Services Act 1947-1967, or the Repatriation Act 1920-1966, that operates to diminish or eliminate any reduction that would otherwise be made in the rate of pension or allowance payable to or in respect of a person by reason of his means as assessed as defined by—

(a) section 18 or 59 of the Social Services Act 1947-1967 or of that Act as amended at any time; or

(b) section 83 of the Repatriation Act 1920-1966 or of that Act as amended at any time,

as the case may be;

“approved bed”, in relation to a hospital, means a bed included in the number of beds at the hospital to which the approval under section 24 in relation to the hospital relates;

“Australian resident” means a person who is residing in Australia and includes—

(a) a person whose domicile is in Australia, other than a person in respect of whom the Commission is satisfied that the person’s permanent place of abode is outside Australia; and

(b) a person who has been in Australia, whether continuously or intermittently, during more than one-half of the year ending on the day on which the question whether he

is or is not an Australian resident arises, other than a person in respect of whom the Commission is satisfied that—

(i) the person’s usual place of abode is outside Australia; and

(ii) the person does not intend to take up residence in Australia,

but does not include—

(c) the head of a diplomatic mission established in Australia;

(d) a member of the staff (not being an Australian citizen) of a diplomatic mission established in Australia; or

(e) a member of the family of a person referred to in paragraph (c) or (d) who forms part of the household of that person and is not an Australian citizen;

“Commission” means the Health Insurance Commission established by the *Health Insurance Commission Act* 1973;

“dental practitioner” means a person registered or licensed as a dental practitioner or dentist under a law of a State or Territory that provides for the registration or licensing of dental practitioners or dentists;

“dependant”, in relation to an eligible pensioner, means—

(a) the wife of the pensioner;

(b) a woman who is living with the pensioner as his wife on a permanent and *bona fide* domestic basis, although not legally married to him;

(c) a child under the age of 16 years in the custody, care and control of the pensioner or of the wife or husband of the pensioner; or

(d) a person wholly or substantially dependent on the pensioner or on the wife or husband of the pensioner, being a person who—

(i) has attained the age of 16 years;

(ii) is receiving full-time education at a school, college or university;

(iii) is not in receipt of an invalid pension under Part III of the *Social Services Act* 1947-1973; and

(iv) except where the pensioner is a person to whom, or in respect of whom, there is being paid a service pension under the *Repatriation Act* 1920-1973—is wholly or substantially dependent on the pensioner;

“diagnostic service” means a professional service covered by—

(a) unless the regulations otherwise provide, item 631, 632, 641, 651 or 661 or an item in Part VII or Part VIII of the table; or

(b) any other prescribed item,

and includes any professional service given for health-screening purposes;

“eligible pensioner” means—

(a) a person to whom or in respect of whom—

(i) there is being paid an age pension, an invalid pension, a widow’s pension or a sheltered employment allowance under the Social Services Act 1947-1973; or

(ii) such a pension or allowance would be payable if the person were not receiving vocational training under Part VIII of that Act,

other than such a person to whom or in respect of whom such a pension or allowance would not be payable if any amendment of that Act, being—

(iii) an amendment alleviating the operation of the means test in relation to that person made after the date on which the Social Services Act 1967 received the Royal Assent; or

(iv) an amendment of a rate of pension, allowance or benefit made after the date of commencement of the Social Services Act (No. 4) 1973,

had not been made;

(b) a person to whom or in respect of whom there is being paid a service pension under the Repatriation Act 1920-1973, other than such a person to whom or in respect of whom such a pension would not be payable if—

(i) any amendment of that Act, being—

(A) an amendment alleviating the operation of the means test in relation to that person made after the date of commencement of the Repatriation Act 1966; or

(B) an amendment of a rate of pension, allowance or benefit under Division 5 of Part III made after the date of commencement of the Repatriation Act (No. 3) 1973,

had not been made; or

(ii) any amendment of the Social Services Act 1947-1967, being—

(A) an amendment alleviating the operation of the means test in relation to that person made after the date on which the *Social Services Act* 1967 received the Royal Assent; or

(B) an amendment of a rate of pension, allowance or benefit made after the date of commencement of the *Social Services Act* (*No.* 4) 1973,

had not been made; and

(c) a person to whom or in respect of whom there is being paid an allowance under the Tuberculosis Act 1948;

“eligible person” means an Australian resident and, except as otherwise prescribed, includes any other person in Australia;

“friendly society” means a society registered under a State Act or a law of a Territory providing for the registration of friendly or benefit societies;

“hospital” means premises approved as a hospital by the Minister under section 24;

“hospital patient”, in relation to a hospital, means an in-patient in respect of whom the hospital provides comprehensive care, including all necessary medical, nursing and diagnostic services and, if they are available at the hospital, dental and paramedical services, by means of its own staff or by other agreed arrangements;

“hospital treatment” means accommodation and nursing care for the purpose of permitting the provision of professional attention;

“in-patient”, in relation to a hospital, means a person who occupies an approved bed in a hospital for the purpose of hospital treatment but does not include—

(a) a member of the staff of the hospital who is receiving treatment in his or her own quarters; or

(b) except as provided by sub-section (2), a newly-born child whose mother also occupies a bed in the hospital;

“item” means an item in the table;

“medical benefit” means a medical benefit under Part II;

“medical expenses” means an amount payable in respect of a professional service;

“medical practitioner” means a person registered or licensed as a medical practitioner under a law of a State or Territory that provides for the registration or licensing of medical practitioners;

“net operating costs” means—

(a) in relation to all recognized hospitals in a State—net operating costs as defined by the agreement with that State; or

(b) in relation to a recognized hospital in an internal Territory—net operating costs as prescribed;

“nursing care ” means nursing care given by or under the supervision of a registered nurse;

“organization” means a society, body or group of persons, whether corporate or unincorporate;

“out-patient service”, in relation to a hospital, means a health service or procedure provided by the hospital to an eligible person other than an in-patient of the hospital;

“practitioner” means a medical practitioner or a dental practitioner;

“private hospital” means a hospital that is not a recognized hospital;

“private patient”, in relation to a hospital, means an in-patient of the hospital who is not a hospital patient;

“professional attention” means—

(a) medical or surgical treatment by or under the supervision of a medical practitioner;

(b) obstetric treatment by or under the supervision of a medical practitioner or a registered nurse with obstetric qualifications; or

(c) dental treatment by or under the supervision of a dental practitioner,

“professional service” means—

(a) a medical service specified in an item that is rendered by or on behalf of a medical practitioner; or

(b) a prescribed medical service specified in an item that is rendered in an operating theatre of a hospital by a dental practitioner approved by the Minister for the purposes of this definition;

“proprietor”, in relation to premises, includes an authority or body of persons that has lawful control of the premises;

“recognized hospital” means a hospital that is a recognized hospital for the purposes of an agreement or for the purposes of section 32;

“registered nurse” means—

(a) a person registered under a law of a State or Territory (other than the State of South Australia) as a general nurse; or

(b) a person registered under a law of the State of South Australia as a nurse;

“table” means the table of medical services set out in Schedule 1.

(2) For the purposes of this Act—

(a) a newly-born child who occupies an approved bed in an intensive care facility in a hospital, being a facility approved by the Minister for the purposes of this sub-section, for the purpose of the provision of special care shall be deemed to be an in-patient of the hospital; and

(b) where there are two or more newly-born children of the same mother in a hospital—each such child in excess of one shall be deemed to be an in-patient of the hospital.

(3) Where an anaesthetic is administered to a patient—

(a) pre-medication of the patient in preparation for the administration of the anaesthetic; and

(b) pre-operative examination of the patient in preparation for the administration of the anaesthetic, being an examination carried out during the attendance at which the anaesthetic is administered,

shall, for the purposes of this Act, be deemed to form part of the professional service constituted by the administration of the anaesthetic.

(4) A reference in this Act to a professional attendance or to an attendance is a reference to an attendance by a medical practitioner on a patient, including an attendance at the medical practitioner’s rooms or surgery.

(5) Unless the Minister otherwise directs, a professional service, not being a service specified in an item in Part I of the table, shall be deemed to include all professional attendances necessary for the purposes of post-operative treatment of the person to whom the professional service is rendered.

(6) Where a professional service rendered to a person includes a medical procedure that would, but for this sub-section, itself be a professional service, that procedure shall, in respect of that person, be deemed not to be a professional service.

**Variations and alterations of table of medical services.**

**4.** (1) The regulations may provide that this Act shall have effect as if the table were varied—

(a) by omitting an item or rule of interpretation from the table;

(b) by inserting an item or rule of interpretation in the table; or

(c) by substituting another amount for an amount set out in an item in the table.

(2) The regulations may prescribe a table of medical services in accordance with the form of table set out in Schedule 1.

(3) On the commencement of a regulation prescribing a table of medical services—

(a) the table so prescribed has effect as if it were set out in Schedule 1 in the place of the table (in this sub-section referred to as “the superseded table”) in that Schedule; and

(b) the superseded table or, if another table has effect, by virtue of this section, in the place of the superseded table, that other table ceases to have effect.

(4) The regulations may amend a table that has effect by virtue of paragraph (3)(a) and, on the commencement of the amendment, the table as so amended has effect in the place of the first-mentioned table.

(5) In this section, a reference to a table of medical services shall be read as including a reference to rules for the interpretation of that table.

(6) Regulations under this section shall, unless sooner repealed, cease to be in force on the day next following the fifteenth sitting day of the House of Representatives after the expiration of a period of 12 months commencing on the day on which the regulations are notified in the Gazette, and shall be deemed to have been repealed on that first-mentioned day.

**Health insurance cards.**

**5.** (1) The Commission may, for the purpose of facilitating the handling of claims under this Act, issue to an eligible person a health insurance card setting out—

(a) the name of the eligible person and the number allotted to him by the Commission; and

(b) if the Commission thinks fit, the name or names of any child or children of whom the eligible person is a parent or guardian and the number allotted to that child or to each of those children.

(2) A health insurance card shall not contain any personal particulars other than those specified in sub-section (1).

**Persons in Australia may apply for application of Act to them.**

**6.** (1) A person who is in Australia but is not an eligible person may apply to the Commission for the application to him, during his stay in Australia, and to any child or children living with him in Australia, during the stay in Australia of that child or of those children, of this Act as if he or he and that child or each of those children were an eligible person or eligible persons.

(2) The Commission may approve an application under sub-section (1) subject to such conditions as it determines, including the payment of a premium by the applicant.

(3) An approval under sub-section (2) shall be expressed to relate to a specified period, which may commence on a date earlier than the date of the approval.

(4) Where an application under sub-section (1) has been approved, a person to whom the application relates shall, subject to any condition imposed under sub-section (2) and to sub-section (5), be treated as an eligible person for the purposes of this Act during the period to which the approval relates.

(5) A person to whom an application referred to in sub-section (4) relates shall not be treated as an eligible person for the purposes of this Act during any period during which he is outside Australia.

**Agreement for reciprocal treatment of visitors to Australia and other countries.**

**7.** (1) The Government of Australia may enter into an agreement with the Government of another country under which each Government agrees to arrange for visitors to the country of that Government from the country of that other Government to be treated, for the purpose of the provision of medical and hospital care, as if they were residents or citizens of the country of that Government.

(2) A visitor to Australia to whom an agreement under sub-section (1) relates shall, subject to the agreement, be treated as an eligible person for the purposes of this Act during his stay in Australia.

PART II—MEDICAL BENEFITS

**Interpretation.**

**8.** For the purposes of this Part, an internal Territory shall be deemed to form part of the State of New South Wales.

**Medical benefits calculated by reference to fees.**

**9.** Medical benefits under this Part shall be calculated by reference to the fees for medical services set out in the table.

**Entitlement to medical benefits.**

**10.** (1) Where, on or after a date to be fixed by Proclamation for the purposes of this section, medical expenses are incurred in respect of a professional service rendered in Australia to an eligible person, a medical benefit calculated in accordance with sub-section (2) is payable, subject to and in accordance with this Act, in respect of that professional service.

(2) A medical benefit under sub-section (1) in respect of a professional service is an amount equal to—

(a) 85 per centum of the fee specified in respect of that professional service in the table in relation to the State in which the service was rendered; or

(b) if the amount calculated under paragraph (a) is less by more than $5 than the fee from which it is calculated—an amount that is less by $5 than that fee.

(3) Where an amount calculated in accordance with sub-section (2) is not a multiple of 5 cents, the amount of cents shall be increased to the nearest higher amount that is a multiple of 5 cents.

**Increased fee in complex cases.**

**11.** (1) Where—

(a) a claim for a medical benefit in respect of a professional service is received by the Commission; and

(b) the claimant—

(i) being the practitioner who rendered the service, states in the claim that the service was of unusual length or complexity; or

(ii) not being the practitioner who rendered the service, forwards with the claim a statement by the practitioner who rendered the service that the service was of unusual length or complexity,

the Commission shall deal with the claim in accordance with the succeeding provisions of this section.

(2) Where the Commission considers that the professional service referred to in the claim is of unusual length or complexity, the Commission shall—

(a) if the Commission considers that the service is of a kind in respect of which an increased fee may be fixed in accordance with principles furnished to the Commission under paragraph (b) or sub-section 12(5)—fix an increased fee for that service, in accordance with those principles, for the purposes of that claim; or

(b) in any other case—refer to the Medical Benefits Advisory Committee for its consideration and recommendation the question whether the fee specified in the item that relates to that service should, for the purpose of calculating the medical benefit under that claim, be increased, having regard to the unusual features of that service, and, if it is to be increased, what principles are to be followed in fixing the amount of the increased fee for that service for the purposes of that claim.

(3) Where the Commission receives a recommendation of the Committee under paragraph (2)(b) in favour of an increased fee in respect of a professional service to which a claim referred to in sub-section (1) relates, the Commission may fix an increased fee for that service, in accordance with the principles set out in that recommendation, for the purposes of that claim.

(4) Where an increased fee is fixed under paragraph (2)(a) or under sub-section (3) in respect of a professional service for the purposes of a claim referred to in sub-section (1), the Commission shall—

(a) inform the claimant, by notice in writing, of the amount of the increased fee so fixed; and

(b) calculate the medical benefit payable in respect of that professional service for the purposes of that claim as if the increased fee so fixed were set out in the item that relates to that professional service.

(5) Where the Commission considers that a professional service referred to in a claim under sub-section (1) is not of unusual length or complexity, the Commission shall inform the claimant, by notice in writing, accordingly.

**Appeal from decision on increased fee.**

**12.** (1) Where the Commission notifies a person under sub-section 11(4) or (5) of a decision of the Commission, the person may, within one month after the receipt of that notification, lodge with the Minister an appeal against that decision.

(2) The Minister shall refer an appeal under sub-section (1) to the Medical Benefits Advisory Committee for its consideration and recommendation whether the appeal should be allowed or dismissed and, if the appeal is to be allowed, what increased fee is to be fixed for the purposes of the claim to which the appeal relates.

(3) Where an appeal under sub-section (1) is against the amount of an increased fee fixed by the Commission and the appeal is to be allowed, the Committee shall not recommend an increased fee that is less than the amount of the increased fee to which the appeal relates.

(4) Where a recommendation of the Committee on an appeal under sub-section (1) specifies the amount of an increased fee to be fixed, the Committee may, in the recommendation, set out the principles followed by the Committee in calculating that amount.

(5) The Minister shall furnish to the Commission a statement of principles received by him in a recommendation referred to in subsection (4).

(6) When the Minister has received the recommendation of the Medical Benefits Advisory Committee on an appeal under sub-section (1), the Minister shall, in accordance with the recommendation, either allow or dismiss the appeal and, if he allows the appeal, shall give such directions to the Commission as are necessary to give effect to the recommendation of the Committee.

(7) Where the Minister allows or dismisses an appeal under this section he shall notify the appellant, in writing, accordingly.

**Spectacle lenses.**

**13.** The regulations may provide that, where, at an attendance, an examination of the patient’s eyes is made in consequence of which spectacle lenses are prescribed, the medical benefit in respect of any professional service or professional services covered by an item in Part I of the table that is, or are, rendered during that attendance is such portion as is prescribed of the medical benefit that would, but for the regulations, be payable in respect of that professional service or those professional services.

**Medical benefit not to exceed medical expenses incurred.**

**14.** A medical benefit payable in respect of a professional service shall not exceed the medical expenses incurred in respect of the professional service.

**Calculation of medical benefit payable where two or more operations are performed.**

**15.** (1) Subject to this section, for the purpose of calculating the amount of a medical benefit payable in respect of the medical expenses incurred in respect of two or more operations, each constituting a professional service covered by an item, that are performed on the one occasion on the one person—

(a) the amount specified in those items as fees, other than the greater or greatest of those amounts, shall be deemed to be reduced, as follows:—

(i) the greater or greatest of the amounts to be deemed to be reduced shall be deemed to be reduced by one-half; and

(ii) the other amount, or each of the other amounts, to be deemed to be reduced shall be deemed to be reduced by three-quarters; and

(b) the operations shall be deemed to constitute one professional service in respect of which the fee specified in the table in relation to the State in which the service was rendered is an amount equal to the aggregate of the amounts specified as fees in the items relating to those operations, being those amounts as reduced in accordance with paragraph (a).

(2) For the purposes of paragraph (1)(a)—

(a) where two or more amounts referred to in that sub-section are equal, one of those amounts shall be treated as being greater than the other or others of those amounts; and

(b) where, by virtue of a reduction in accordance with that subsection, an amount is not a multiple of 5 cents, the amount of cents shall be increased to the nearest higher amount that is a multiple of 5 cents.

(3) This section does not apply in relation to an operation, being one of two or more operations performed under the one anaesthetic on the one person, if the practitioner who performed the operation—

(a) did not perform, or assist at, the other operation or any of the other operations; and

(b) did not administer the anaesthetic.

(4) In this section, “operation” does not include a medical service specified in Division 2 of Part 10 of the table.

**Administration of anaesthetic and assistance at operation.**

**16.** (1) A medical benefit is not, except with the approval of the Commission, payable in respect of the administration of an anaesthetic in connexion with a professional service unless the anaesthetic is administered by a practitioner other than the practitioner who renders the professional service in connexion with which the anaesthetic is administered.

(2) A medical benefit in respect of assistance at an operation is not payable if the assistance is rendered by the anaesthetist or a practitioner assisting the anaesthetist.

(3) Where an item relates to a professional service constituted by—

(a) assistance at an operation;

(b) the administration of an anaesthetic; or

(c) assistance in the administration of an anaesthetic,

the amount of medical benefit payable in respect of that professional service is the same whether the assistance is rendered, or the anaesthetic is administered, by one or more than one practitioner.

(4) For the purpose of calculating the amount of medical benefit payable in respect of the medical expenses incurred in respect of the administration of an anaesthetic to a person for the purposes of two or more operations performed on that person while he is under that anaesthetic—

(a) the amounts specified as fees in the items that relate to the administration of an anaesthetic for the purposes of those operations, other than the greater or greatest of those amounts, shall be deemed to be reduced as prescribed; and

(b) the administration of the anaesthetic shall be deemed to constitute one professional service in respect of which the fee specified in the table in relation to the State in which the anaesthetic was administered is an amount equal to the aggregate of the amounts specified as fees in the items relating to the administration of an anaesthetic for the purposes of those operations, being those amounts as reduced in accordance with paragraph (a).

(5) For the purposes of paragraph (4)(a)—

(a) where two or more amounts referred to in that sub-section are equal, one of those amounts shall be treated as being greater than the other or others of those amounts; and

(b) where, by virtue of a reduction in accordance with that subsection, an amount is not a multiple of 5 cents, the amount of cents shall be increased to the nearest higher amount that is a multiple of 5 cents.

**Medical benefit not payable in respect of certain medical expenses.**

**17.** (1) A medical benefit is not payable in respect of a professional service if—

(a) the medical expenses in respect of that service have been paid, or are payable, to a recognized hospital;

(b) the medical practitioner who rendered the service was acting on behalf of an organization that was, when the service was rendered, an organization prescribed for the purposes of this paragraph; or

(c) any part of the service was rendered on the premises of an organization that was, when the service was rendered, an organization referred to in paragraph (b) or an approved organization for the purposes of Part IV.

(2) Unless the Minister otherwise directs, a medical benefit is not payable in respect of a professional service if the medical expenses in respect of that service have been paid, or are payable, by an organizaton to which an approval under section 34 relates in respect of a person who was, when the service was rendered, a hospital patient occupying a bed in a hospital controlled by the organization that was an approved bed for the purposes of that section.

**Medical benefit not payable in respect of certain diagnostic services.**

**18.** (1) Subject to this section, a medical benefit is not payable in respect of a diagnostic service if—

(a) the medical expenses in respect of that service have been paid, or are payable, by a recognized hospital in respect of a patient of diagnostic that hospital; or

(b) the diagnostic service is rendered by a medical practitioner acting on his own behalf to a private patient of a recognized hospital.

(2) Where the Minister is satisfied that—

(a) a recognized hospital cannot make satisfactory arrangements for the provision by the hospital of diagnostic services to private patients at the hospital;

(b) the hospital incurs medical expenses in respect of the provision by a medical practitioner of diagnostic services to private patients at the hospital; and

(c) the hospital does not charge private patients at the hospital, in whole or in part, for diagnostic services so provided,

the Minister may direct, in writing, that sub-section (1) does not apply, for a period specified in the direction, in relation to that hospital in respect of a diagnostic service referred to in paragraph (1)(a).

**Medical benefit not payable in respect of certain professional services.**

**19.** A medical benefit is not payable in respect of a professional service that is a medical examination for the purposes of life insurance or admission to membership of a friendly society.

**Persons entitled to medical benefits.**

**20.** (1) Subject to this section, a medical benefit payable in respect of a professional service rendered in Australia is payable to the person who has incurred the medical expenses in respect of that professional service.

(2) Where a person to whom a medical benefit is payable under subsection (1) in respect of a professional service has not paid the medical expenses that he has incurred in respect of that professional service, he shall not be paid the medical benefit but, if he so requests, there shall be given to him, in lieu of that payment, a cheque for the amount of the medical benefit drawn in favour of the person who rendered the professional service or, if the professional service was rendered by that person on behalf of another person, in favour of that other person.

(3) A person to whom a medical benefit is payable under sub-section (1) (in this sub-section referred to as “the first party”) may enter into an agreement, in accordance with the prescribed form, with the medical practitioner, or other person, by whom, or on whose behalf, the professional service was rendered (in this sub-section referred to as “the second party”) under which—

(a) the first party assigns his right to the payment of the medical benefit to the second party; and

(b) the second party accepts the assignment in full payment of the medical expenses incurred by the first party in respect of that professional service.

(4) Where an agreement in respect of a medical benefit is entered into under sub-section (3), the medical benefit is payable in accordance with the agreement.

(5) A reference in sub-section (3) to a medical practitioner by whom a professional service was rendered does not include a reference to a medical practitioner who renders a professional service on behalf of another person or organization.

**Medical service outside Australia.**

**21.** (1) Subject to this section, where medical expenses are incurred in respect of a medical service specified in an item rendered outside Australia, on or after the date fixed for the purposes of section 10, to an Australian resident by, or on behalf of, a prescribed person, medical benefit is payable in respect of that medical service as if that medical service had been rendered in Australia by, or on behalf of, a medical practitioner.

(2) A medical benefit under sub-section (1) is payable to the person who has incurred the medical expenses in respect of the medical service and shall be paid to that person in such manner as the Commission determines.

(3) In this section, “prescribed person” means—

(a) a person authorized to practise as a medical practitioner under the law of the place where the medical service was rendered; or

(b) any other person approved by the Commission for the purposes of this definition.

(4) This section does not apply in relation to a medical service rendered in a country the Government of which is, when the service is rendered, a party to an agreement with the Government of Australia under section 7.

**Claims for medical benefits.**

**22.** A claim for a medical benefit in respect of a professional service shall be made, in accordance with the prescribed form, to the Commission.

**Undertakings with respect to pensioners.**

**23.** (1) The Minister shall request every medical practitioner whom he considers is engaged in Australia in rendering professional services to persons to undertake that, where a professional service is rendered in Australia, on or after the date fixed for the purposes of section 10, by the medical practitioner on his own behalf or by a person acting on behalf of the medical practitioner to a person who identifies himself to the person rendering the service as an eligible pensioner or a dependant of an eligible pensioner, the medical practitioner will ensure that—

(a) the person who has incurred the medical expenses in respect of the professional service is asked whether he wishes to make an assignment under sub-section 20(3) of his right to the payment of the medical benefit in respect of the professional service; and

(b) if the person indicates that he so wishes—arrangements are made for the making and acceptance of the assignment under that sub-section.

(2) An undertaking under sub-section (1) shall be in writing and shall be lodged with the Minister.

(3) An undertaking under sub-section (1) does not apply in relation to a professional service rendered by a consultant physician, or a specialist, in the practice of his specialty to a patient who has not been referred to him if the professional service would, if the patient had been referred to him, be covered by an item that specifies a fee for the service that is higher than the fee applicable to the service.

PART III—PAYMENTS FOR HOSPITAL SERVICES

**Approval of premises as hospital.**

**24.** (1) The proprietor of premises may apply, in accordance with the prescribed form, for the approval of the premises as a hospital.

(2) Where the Minister is satisfied that the premises in respect of which an application under sub-section (1) is made—

(a) are used, or to be used, for the reception and lodging of patients exclusively or principally for the purpose of hospital treatment; and

(b) are properly fitted, furnished and staffed for that purpose,

he shall, subject to sub-section (3), approve the premises as a hospital for the purposes of this Act and determine the number of beds at the hospital to which the approval relates.

(3) The Minister shall not approve premises under sub-section (2) if he is satisfied that—

(a) the premises are used, or are to be used, exclusively or principally for the care or treatment of mentally ill or mentally defective persons and are under the control of, or the subject of a grant for maintenance from, Australia or a State; or

(b) the premises are a nursing home for the purposes of the National Health Act 1953-1973.

(4) The approval of premises as a hospital under this section is subject to such conditions as are determined, from time to time, by the Minister for the purpose of ensuring that the needs and welfare of patients at the hospital are satisfactorily provided for.

**Issue of certificate of approval of premises as hospital.**

**25.** (1) Upon approval of premises as a hospital, the Minister shall cause to be issued to the proprietor of the hospital a certificate of approval in accordance with the authorized form.

(2) Where the approval of premises as a hospital has been varied under section 29 and the certificate of approval has been forwarded to the Minister, the Minister shall cause to be issued to the proprietor of the hospital a new certificate of approval, in accordance with the prescribed form, setting out the approval as so varied.

**Display of certificate of approval.**

**26.** (1) The proprietor of a hospital shall cause the certificate of approval to be displayed in a prominent position in the hospital.

(2) Where the approval of premises as a hospital is revoked or varied the proprietor of the premises shall forthwith forward the certificate of approval to the Minister.

Penalty: $100.

**Inspection of hospitals.**

**27.** (1) The Minister may, by writing under his hand, authorize an officer or other person to inspect hospitals or any premises in respect of which an application for approval under section 24 has been made.

(2) The proprietor of premises referred to in sub-section (1) shall permit the officer or person so authorized to inspect the premises at any reasonable time.

Penalty: $100.

**Notice of person ceasing to be proprietor of hospital.**

**28.** (1) If the proprietor of a hospital ceases to be the proprietor of the hospital, he shall, by notice in writing, notify the Minister forthwith.

(2) If the proprietor of a hospital dies, the legal personal representative of the deceased proprietor shall, by notice in writing, notify the Minister forthwith.

Penalty: $100.

**Revocation or variation of approval of premises as hospital.**

**29.** (1) Where the Minister receives an application, in writing, by the proprietor of a hospital for a variation of the approval of the premises constituting the hospital, the Minister may vary that approval in accordance with the application.

(2) Where the Minister—

(a) considers that the nature of a hospital has changed since the approval of the hospital was given;

(b) receives a notice in writing under section 28 in respect of a hospital; or

(c) is satisfied that a condition determined by the Minister under sub-section 24(4) has not been complied with in respect of a hospital,

the Minister may revoke or vary the approval of the premises constituting the hospital.

(3) Where the Minister receives an application, in writing, by the proprietor of a hospital for revocation of the approval of the premises constituting the hospital, he shall revoke the approval accordingly.

**Agreements with States for provision of hospital services.**

**30.** (1) Australia may enter into an agreement with a State for the provision of hospital services by the State to eligible persons.

(2) An agreement referred to in sub-section (1) shall be substantially in accordance with the Heads of Agreement specified in Schedule 2 but may include provisions with respect to other matters.

(3) An agreement under this section shall not operate with respect to a period before a date to be fixed by Proclamation for the purposes of this section.

**Daily bed payments to recognized hospitals.**

**31.** (1) For the purposes of an agreement with a State or for the purposes of section 32, a daily bed payment, in relation to a recognized hospital, is a payment of $16 for each approved bed in the hospital for each day on which the bed is occupied by an eligible person who is an inpatient of the hospital.

(2) For the purposes of sub-section (1), a person shall be deemed not to occupy a bed on the day of his discharge from a hospital unless that day is also the day of his admission to the hospital.

**Payments to recognized hospitals in internal Territories.**

**32.** (1) The Minister may approve such hospitals in an internal Territory as he thinks fit as recognized hospitals for the purposes of this section.

(2) On and after the date fixed for the purposes of section 30, there is payable by Australia to each recognized hospital in an internal Territory daily bed payments in accordance with section 31.

(3) On and after the date fixed for the purposes of section 30, there is payable by Australia, in respect of each financial year or such other period as the Minister fixes, to each recognized hospital in an internal Territory, in addition to the daily bed payments under sub-section (2) in respect of that financial year or other period, an amount equal to the amount by which the aggregate of those daily bed payments is less than an amount equal to 50 per centum of the net operating costs of that hospital in respect of that financial year or other period.

**Daily bed payments to private hospitals.**

**33.** (1) On and after the date fixed for the purposes of section 30, there is payable by Australia to a private hospital in a State that is a party to an agreement or in an internal Territory a daily bed payment of $16 for each approved bed in the hospital for each day on which the bed is occupied by an eligible person who is an in-patient at the hospital.

(2) Where the charge made by a hospital referred to in sub-section (1) in respect of the occupancy for a day of an approved bed in the hospital (other than a bed that is an approved bed for the purposes of section 34) is less than the amount of the daily bed payment specified in that sub-section, the daily bed payment in respect of that bed for that day shall not exceed the amount of that charge.

(3) Where the average cost to a hospital referred to in sub-section (1) of maintaining an approved bed in the hospital (other than a bed that is an approved bed for the purposes of section 34) for a day is less than the amount of the daily bed payment specified in that sub-section, the daily bed payment in respect of each approved bed in that hospital (other than a bed that is an approved bed for the purposes of section 34) for that day shall not exceed the amount of that average cost.

(4) For the purposes of this section, a person shall be deemed not to occupy a bed on the day of his discharge from a hospital unless that day is also the day of his admission to the hospital.

**Supplementary daily bed payments to private hospitals.**

**34.** (1) This section applies to an organization that—

(a) is carried on otherwise than for the purpose of profit or gain to its individual members; and

(b) is—

(i) a religious organization;

(ii) an organization the principal objects or purposes of which are charitable or benevolent; or

(iii) an organization approved by the Minister for the purposes of this section.

(2) An organization to which this section applies may make application to the Minister, in accordance with the prescribed form, for approval to provide care and treatment without charge for eligible persons as hospital patients at a hospital (other than a recognized hospital) controlled by the organization, being a hospital in a State that is a party to an agreement or in an internal Territory.

(3) Where the Minister approves an application under sub-section (1), he shall determine the number of beds at the hospital to which the approval relates.

(4) There is payable by Australia to an organization to which this section applies a supplementary daily bed payment, at a rate fixed by the Minister, for each approved bed in a hospital controlled by the organization to which an approval under this section relates for each day on which the bed is occupied without charge by an eligible person who is a hospital patient at the hospital.

(5) A supplementary daily bed payment under sub-section (4) is not payable in respect of any period before the date fixed for the purposes of section 30.

(6) For the purposes of sub-section (4), a person shall be deemed not to occupy a bed on the day of his discharge from a hospital unless that day is also the day of his admission to the hospital.

(7) In fixing a rate for the purposes of sub-section (4), the Minister shall have regard to the loss of revenue of, and any increased cost to, the organization resulting from the provision of care and treatment without charge to eligible persons who are hospital patients occupying approved beds at the hospital.

(8) A supplementary daily bed payment under this section is payable in addition to a daily bed payment under section 33.

(9) Nothing in this section entitles an eligible person to admission as a hospital patient to a hospital controlled by an organization to which an approval under this section relates.

(10) In this section, “approved bed”, in relation to a hospital, means a bed included in the number of beds at the hospital to which the approval under this section relates.

**Claims by proprietors of private hospitals.**

**35.** A claim for a payment under this Part in respect of a private hospital—

(a) shall be made in accordance with the prescribed form to the Commission;

(b) shall relate to such period, and shall be submitted at such time, as the Commission determines; and

(c) shall be accompanied by such information relating to the claim as is shown in the prescribed form to be required or as the Minister determines.

**Power to call for returns from proprietors of private hospitals.**

**36.** The Minister may, by notice in writing, require the proprietor of a private hospital to furnish to him, within the time specified in the notice, such return or information in relation to matters relevant to the occupation of approved beds in the hospital as is specified in the notice, including a return or information verified by statutory declaration.

**Access to premises.**

**37.** (1) An authorized person may, with the consent of the occupier of any premises, enter the premises for the purpose of exercising the functions of an authorized person under this section.

(2) Where—

(a) an occupier of premises has refused consent to the entry, at a reasonable time, on the premises, of an authorized person; and

(b) an authorized person has reason to believe that there are on the premises books, documents or papers relating to the occupation of approved beds in a hospital,

the authorized person may, within one month of the refusal, make application to a Magistrate for a warrant authorizing the authorized person who makes the application to enter the premises for the purpose of exercising the functions of an authorized person under this section.

(3) If, on an application under sub-section (2), the Magistrate is satisfied, by information on oath—

(a) that there is reasonable ground for believing that there are on the premises to which the application relates any books, documents or papers relating to the occupation of approved beds in a hospital; and

(b) that the issue of a warrant is reasonably required for the purposes of this Act,

the Magistrate may grant a warrant, in accordance with the prescribed form, authorizing the authorized person, with such assistance as he thinks necessary, to enter the premises, during such hours of the day or night as the warrant specifies or, if the warrant so specifies, at any time, if necessary by force, for the purpose of exercising the functions of an authorized person under this section.

(4) Where an authorized person has entered any premises in pursuance of sub-section (1) or in pursuance of a warrant granted under subsection (3), he may exercise the functions of an authorized person under this section.

(5) A person shall not, without reasonable excuse, obstruct or hinder an authorized person acting in pursuance of a warrant under sub-section (3) or in pursuance of sub-section (4).

Penalty: $200.

(6) The functions of an authorized person under this section are to search for, inspect, take extracts from, or make copies of, any books, documents or papers relating to the occupation of approved beds in a hospital.

(7) In this section—

“authorized person” means a person authorized, in writing, by the Minister for the purposes of this section;

“occupier”, in relation to premises, includes the person in charge of the premises.

**Advances.**

**38.** (1) The Minister may direct the Commission to make such advances in respect of amounts that may become payable under this Part as the Minister determines.

(2) Advances under sub-section (1) may be made subject to such conditions as the Minister determines.

PART IV—HEALTH PROGRAM GRANTS

**Definitions.**

**39.** In this Part, unless the contrary intention appears—

“approved health service” means a health service in respect of which an approval is in force under section 41;

“approved organization” means an organization in respect of which an approval is in force under section 40.

**Approval of organizations.**

**40.** (1) An organization may apply, in accordance with the prescribed form, to the Minister for approval as an organization under this Part.

(2) The Minister may require an organization that makes an application under sub-section (1) to furnish to him such further information in relation to the organization as the Minister requires.

(3) The Minister may approve an organization to which an application under sub-section (1) relates and, if he does so, he shall, in the

instrument of approval, fix a date (which may be a date earlier than the date of the approval) on and from which the approval has effect.

(4) An organization that was, immediately before this Act receives the Royal Assent, entitled, by virtue of an authorization under section 25 of the National Health Act 1953-1973, to payments under that section shall, on the day on which this Act receives the Royal Assent, be deemed to have been approved by the Minister under sub-section (3), but that approval may be revoked by the Minister at any time.

**Approval of health services.**

**41.** (1) An approved organization may apply, in accordance with the prescribed form, to the Minister for approval of a health service provided, or to be provided, by the organization.

(2) The Minister may require an organization that makes an application under sub-section (1) to furnish to him such further information in relation to the health service to which the application relates as he requires.

(3) The Minister may approve a health service to which an application under sub-section (1) relates and, if he does so, he shall, in the instrument of approval, fix a date (which may be a date earlier than the date of the approval) on and from which the approval has effect.

**Entitlement to health program grant.**

**42.** Subject to this Part, an approved organization is entitled to be paid an amount equal to the costs incurred by the organization in providing, on or after a date to be fixed by Proclamation for the purposes of this section, an approved health service (including such part of the management expenses of the organization as the Minister considers to be attributable to the provision of the health service) or such proportion of those costs as the Minister determines from time to time.

**Conditions of payment of grant.**

**43.** (1) A payment (including an advance) under this Part to an approved organization may be made subject to such conditions as the Minister determines, including conditions relating to the terms and conditions in accordance with which the services of practitioners providing the approved health service to which the payment relates are made available to the organization.

(2) If a condition subject to which a payment (including an advance) under this Part has been made is not complied with by an approved organization, the Minister may direct that the whole or a part of that payment be recovered from the organization and, on the service by post on that organization of a copy of that direction, the amount specified in the direction is recoverable by Australia from that organization as a debt due to Australia.

**Minister to consult with Commission.**

**44.** Before giving an approval under section 40 or 41 or making a determination under section 42 or 43, the Minister shall consult with the Australian Hospitals and Health Services Commission on the matter and shall have regard to any recommendation made to him by that Commission.

**Claims for health program grants.**

**45.** (1) A claim for a payment under this Part shall be submitted to the Commission in accordance with such form, and at such times, as the Minister directs.

(2) Where a claim has been made under sub-section (1), the Minister may require the organization that made the claim to furnish to the Minister such further information in relation to the claim as the Minister requires.

(3) Where the Minister considers that the management expenses of an approved organization that are attributable to the provision of an approved health service are excessive, he may direct that such part only of those expenses as he directs shall be taken into account in ascertaining the amount that the organization is entitled to be paid under this Part in respect of the provision of that health service.

**Advances.**

**46.** (1) The Minister may direct the Commission to make such advances in respect of amounts that may become payable under this Part as the Minister determines.

(2) Advances under sub-section (1) may be made subject to such conditions as the Minister determines.

PART V—COMMITTEES AND REVIEW TRIBUNALS

*Division* 1*—Specialist Recognition Advisory Committees and the  
 Specialist Recognition Appeal Committee*

**Definitions.**

**47.** In this Division, unless the contrary intention appears—

“Committee” means a Specialist Recognition Advisory Committee or the Specialist Recognition Appeal Committee;

“member” means a member of a Committee, and includes a person appointed under section 53 to act in the place of a member.

**Establishment of Specialist Recognition Advisory Committees.**

**48.** (1) The Minister shall establish for—

(a) each State;

(b) the Australian Capital Territory; and

(c) the Northern Territory,

a Specialist Recognition Advisory Committee.

(2) Each Specialist Recognition Advisory Committee shall consist of five medical practitioners appointed by the Minister in accordance with section 50.

(3) The exercise or performance of the powers or functions of a Specialist Recognition Advisory Committee is not affected by reason only of there being a vacancy or vacancies in the membership of the Committee.

(4) A member of a Specialist Recognition Advisory Committee holds office for a period of 3 years.

(5) A member of the Specialist Recognition Appeal Committee is not eligible to be appointed under this section to a Specialist Recognition Advisory Committee.

**Establishment of Specialist Recognition Appeal Committee.**

49. (1) There shall be a Specialist Recognition Appeal Committee, which shall consist of five medical practitioners appointed by the Minister in accordance with section 50.

(2) The exercise or performance of the powers or functions of the Specialist Recognition Appeal Committee is not affected by reason only of there being a vacancy or vacancies in the membership of the Committee.

(3) A member of the Specialist Recognition Appeal Committee holds office for a period of 3 years.

(4) A member of a Specialist Recognition Advisory Committee is not eligible to be appointed under this section to the Specialist Recognition Appeal Committee.

**Panels for appointments to Committees.**

50. (1) Before making appointments to a Committee, the Minister shall request each of the following bodies to nominate a panel of not less than three medical practitioners for consideration for appointment to the Committee:—

(a) the Australian Medical Association;

(b) the Royal Australasian College of Surgeons;

(c) the Royal Australasian College of Physicians;

(d) the Australian Council of the Royal College of Obstetricians and Gynaecologists; and

(e) the Royal Australian College of General Practitioners.

(2) When, in accordance with a request under sub-section (1), each of the bodies referred to in that sub-section has nominated a panel of medical practitioners for consideration for appointment to a Committee, the Minister shall appoint to the Committee one medical practitioner from each of the panels.

**Members of Committees under the National Health Act maybe deemed to be members of Committees under this Division.**

**51.** (1) The Minister may direct that a person who is a member of a Specialist Recognition Advisory Committee for a State or Territory under the National Health Act 1953-1973 shall be deemed to be a member of the Specialist Recognition Advisory Committee for that State or Territory under this Act during such period, not being a period that ends after the expiration of the period for which the person was appointed under that Act as a member of that first-mentioned Committee, as the Minister specifies in the direction.

(2) The Minister may direct that a person who is a member of the Specialist Recognition Appeal Committee under the National Health Act 1953-1973 shall be deemed to be a member of the Specialist Recognition Appeal Committee under this Act during such period, not being a period that ends after the expiration of the period for which the person was appointed under that Act as a member of that first-mentioned Committee, as the Minister specifies in the direction.

(3) Sections 54 and 55 apply in relation to a person referred to in sub-section (1) or (2) as if that person had been appointed a member of the relevant Committee under section 48 or 49.

**Election of Chairman of Committee.**

**52.** (1) The Minister shall convene a meeting of a Committee for the purpose of electing one of the members to be the Chairman of the Committee.

(2) Whenever a vacancy occurs in the office of Chairman of a Committee, the Minister shall convene a meeting of the Committee for the purpose of electing one of the members to be the new Chairman.

(3) The Minister shall appoint one of the members of a Committee to preside at a meeting of the Committee under this section.

(4) The quorum for a meeting of a Committee under this section is three members of the Committee.

(5) The election of a Chairman of a Committee at a meeting under this section shall be made by a majority of votes of the members of the Committee present and voting.

(6) In the event of an equality of votes on a question before a meeting of a Committee under this section, the member of the Committee presiding at the meeting shall adjourn the meeting until a time and place to be fixed by the Minister.

(7) A member of a Committee elected as a Chairman of the Committee holds that office until the expiration of the period of his appointment as a member of the Committee or, if he earlier ceases to be such a member, until he so ceases.

**Appointment of persons to act in place of member.**

**53.** (1) Subject to sub-section (2), the Minister may, if he becomes aware that a member of a Committee will be unable to attend a meeting or meetings of the Committee, appoint a person to act in the place of that member at the meeting or meetings that the member will be unable to attend.

(2) Before making an appointment under sub-section (1), the Minister shall consult with the body that nominated the panel from which the absent member was appointed.

(3) A person appointed to act in the place of a member of a Committee who is the Chairman of the Committee is not entitled to act as the Chairman of the Committee.

(4) The Minister may, at any time, terminate an appointment made by him under this section.

**Termination of appointment.**

**54.** The Minister may terminate the appointment of a member for misbehaviour or physical or mental incapacity.

**Resignation.**

**55.** A member may resign his office by writing under his hand delivered to the Minister.

**Appointment to vacant office.**

**56.** Where a vacancy occurs in the office of a member, the Minister shall request the body by whom the member was nominated to nominate a panel of not less than three medical practitioners for consideration for appointment to that office, and the Minister shall appoint one of those medical practitioners to that office.

**Irregularities in nomination of members.**

**57.** The validity of the appointment of a member from a panel of persons nominated under section 50 or 56 shall not be called into question by reason only of a defect or irregularity in connexion with the nomination of persons to that panel.

**Remuneration and allowances.**

**58.** (1) A member shall be paid such remuneration as the Parliament fixes but, until 1 January 1975, he shall be paid such remuneration as is prescribed.

(2) A member shall be paid such allowances (not including an annual allowance) as are prescribed.

**Meetings of Committees.**

**59.** (1) The Chairman of a Committee shall convene such meetings of the Committee as are necessary for the efficient conduct of its affairs.

(2) The Chairman of a Committee shall preside at all meetings of the Committee at which he is present.

(3) In the event of the absence of the Chairman of a Committee from a meeting of the Committee, the members present shall elect one of their number to preside at that meeting and the member so elected shall preside accordingly.

(4) The quorum for a meeting of a Committee is three members of the Committee.

(5) A question arising at a meeting of a Committee shall be decided by a majority of the votes of the members of the Committee present and voting and, for that purpose, the member presiding shall have a deliberative vote only.

(6) In the event of an equality of votes on a question before a meeting of a Committee, the question shall be deemed to be unresolved and the member presiding may direct that the question be reconsidered at a time and place fixed by him.

(7) In this section, “meeting” does not include a meeting under section 52.

**Proceedings at meetings.**

**60.** (1) Subject to this Act and the regulations, a Committee may regulate and conduct proceedings at its meetings as it thinks fit.

(2) The meetings of a Committee shall be held in private.

**Recognition of consultant physician,**

**61.** (1) The Minister may refer to a Specialist Recognition Advisory Committee the question whether a particular medical practitioner who is resident, or practises medicine, in the State or Territory for which the Committee is established should, having regard to his qualifications, experience and standing in the medical profession and the nature of his practice, be recognized for the purposes of this Act as a consultant physician, or as a specialist, in a particular specialty in respect of that State or Territory.

(2) A Committee shall consider a question referred to it under subsection (1) and may submit to the Minister—

(a) a recommendation that the medical practitioner to whom the question relates is to be recognized as a consultant physician, or as a specialist, in the specialty concerned; or

(b) a recommendation that the medical practitioner to whom the question relates is not to be recognized as a consultant physician, or as a specialist, in the specialty concerned.

(3) Subject to sub-section (4), on the receipt of a recommendation under sub-section (2), the Minister shall make a determination, for the purposes of this Act, giving effect to the recommendation.

(4) Where—

(a) a recommendation under sub-section (2) is that a medical practitioner is not to be recognized as a consultant physician, or as a specialist, in a specialty; and

(b) the specialty is one in respect of which he is registered as a consultant physician or as a specialist, as the case may be, under the law of the State or Territory for which the Committee is established,

the Minister shall not make a determination giving effect to that recommendation.

(5) Where the Minister makes a determination under sub-section (3), he shall—

(a) notify the Commission, in writing, accordingly; and

(b) where the determination is that the medical practitioner is not to be recognized—notify the medical practitioner, in writing, accordingly.

(6) A determination under sub-section (3) ceases to have effect when the medical practitioner to whom the determination relates ceases to be resident or to practise medicine, as the case may be, in the State or Territory for which the Committee is established.

(7) Nothing in this section prevents the recognition, for the purposes of this Act, as a consultant physician, or as a specialist, in a specialty, of a medical practitioner in relation to whom no determination under this section is in force.

(8) A determination of the Minister that a medical practitioner is not to be recognized as a consultant physician, or as a specialist, in a specialty does not affect entitlement to medical benefit in respect of a professional service rendered before the date of the determination.

**Appeal against refusal of recognition as consultant physician.**

**62.** (1) Where the Minister notifies a medical practitioner that the Minister has determined that the medical practitioner is not to be recognized, for the purposes of this Act, as a consultant physician, or as a specialist, in a specialty, the medical practitioner may, within 1 month after the receipt of that notification, lodge notice of appeal with the Specialist Recognition Appeal Committee and may accompany the notice with a statement of the case in support of the appeal.

(2) The Committee shall consider an appeal so lodged and, if the Committee is of the opinion that the appeal should be allowed, the Committee shall allow the appeal, but otherwise shall dismiss the appeal.

(3) Where the Committee allows or dismisses an appeal, it shall notify the appellant and the Minister, in writing, accordingly.

(4) Where the Committee allows an appeal, the Minister shall make the appropriate determination in relation to the appellant.

**Committee may inform itself in any manner.**

**63.** For the purposes of the consideration of any matter the subject of a reference or an appeal, a Committee may inform itself in such manner as it thinks fit.

**Chairman may engage consultants.**

**64.** With the approval of the Minister, the Chairman of a Committee may, on behalf of Australia, engage as consultants to the Committee persons having suitable qualifications and experience.

*Division* 2*–Medical Benefits Advisory Committee*

**Definitions.**

**65.** In this Division, unless the contrary intention appears—

“Chairman” means the Chairman of the Committee;

“Committee ” means the Medical Benefits Advisory Committee;

“Deputy Chairman” means the Deputy Chairman of the Committee;

“member” means a member of the Committee, and includes a person appointed under section 70 to act in the place of a member;

“reference” means a reference to the Committee under section 67.

**Establishment of Medical Benefits Advisory Committee.**

**66.** (1) The Minister may establish a Medical Benefits Advisory Committee consisting of eight members, including at least five medical practitioners.

(2) The members of the Committee shall be appointed by the Minister and four of the members who are required to be medical practitioners shall be so appointed after consultation by the Minister with the Australian Medical Association or such other associations or colleges of medical practitioners as the Minister considers appropriate.

(3) Subject to this Act, each member holds office for such period as is specified by the Minister in the instrument of his appointment and is eligible for re-appointment.

(4) An act or decision of the Committee is not affected by reason only of there being a vacancy or vacancies in the membership of the Committee.

**Functions of Committee.**

**67.** (1) The functions of the Committee are—

(a) in pursuance of a reference to it by the Minister, to consider—

(i) in what manner, and to what extent, a particular treatment or combination of treatments should be specified in an item or items and the appropriate fee or fees that should be specified in that item or those items; or

(ii) whether the scope of, or the amount of the fee set out in, an item is anomalous, having regard to the other items,

and to make recommendations, in writing, to the Minister arising out of that consideration; and

(b) in pursuance of a reference to it by the Commission under section 11, to determine whether a fee with respect to a professional service should be increased for the purposes of a particular claim and, if it is to be so increased, to formulate the principles to be followed in fixing the increased fee, and to make recommendations, in writing, to the Commission accordingly; and

(c) in pursuance of a reference to it by the Minister under section 12, to determine whether an appeal under that section should be allowed or dismissed and, if the appeal is to be allowed, to determine the amount of the increased fee to be fixed with respect to the professional service concerned and, if the Committee thinks fit, to formulate the principles followed by the Committee in fixing that increased fee.

(2) In this section, “treatment” means a medical, surgical, obstetric or dental treatment.

**Election of Chairman and Deputy Chairman.**

**68.** (1) The Minister shall convene a meeting of the Committee for the purpose of electing one of the members to be the Chairman and another of the members to be the Deputy Chairman.

(2) Whenever a vacancy occurs in the office of Chairman or Deputy Chairman, the Minister shall convene a meeting of the Committee for the purpose of electing one of the members to be the new Chairman or Deputy Chairman.

(3) The Minister shall appoint one of the members to preside at a meeting convened under this section.

(4) The quorum for a meeting under this section is five members, including three medical practitioners.

(5) The election of a Chairman or Deputy Chairman at a meeting convened under this section shall be made by a majority of votes of the members present and voting.

(6) In the event of an equality of votes on a question before a meeting convened under this section, the member presiding at the meeting shall adjourn the meeting until a time and place to be fixed by the Minister.

(7) The member elected as the Chairman or the Deputy Chairman holds that office until the expiration of the period of his appointment as a member or, if he earlier ceases to be a member, until he so ceases.

**Exercise of powers and functions of Chairman by Deputy Chairman.**

**69.** The Deputy Chairman may, during any period when the Chairman is absent from duty or absent from Australia or, for any other reason, is unable to perform the duties of his office, exercise the powers of the Chairman.

**Appointment of person to act in place of member.**

**70.** (1) Subject to sub-section (2), the Minister may, if he becomes aware that a member will be unable to attend a meeting or meetings of the Committee, appoint a person to act in the place of that member at the meeting or meetings that the member will be unable to attend.

(2) A person appointed to act in the place of a member who is a medical practitioner shall himself be a medical practitioner.

(3) A person appointed to act in the place of a member who is the Chairman or the Deputy Chairman is not entitled to act as the Chairman or the Deputy Chairman, as the case may be.

(4) The Minister may, at any time, terminate an appointment made by him under this section.

**Termination of appointment.**

**71.** The Minister may terminate the appointment of a member for misbehaviour or physical or mental incapacity.

**Resignation of members.**

**72.** A member may resign his office by writing under his hand delivered to the Minister.

**Appointment to vacant office.**

**73.** (1) Subject to sub-section (2), where a vacancy occurs in the office of a member, the Minister may appoint a person to that office.

(2) Where an office referred to in sub-section (1) was occupied by a medical practitioner who had been appointed after a consultation referred to in sub-section 66(2), the Minister shall appoint a medical practitioner to that office and, before making that appointment, shall consult the Australian Medical Association or such other associations or colleges of medical practitioners as he considers appropriate.

(3) Subject to this Act, a member appointed under this section holds office for such period as is specified by the Minister in the instrument of his appointment and is eligible for re-appointment.

**Remuneration and allowances.**

**74.** (1) A member shall be paid such remuneration as the Parliament fixes but, until 1 January 1975, shall be paid such remuneration as is prescribed.

(2) A member shall be paid such allowances (not including an annual allowance) as are prescribed.

**Meetings of Committee.**

**75.** (1) The Chairman shall convene such meetings of the Committee as are necessary for the efficient conduct of its affairs.

(2) The Chairman shall preside at all meetings of the Committee at which he is present.

(3) In the event of the absence of the Chairman from a meeting the Deputy Chairman shall preside at that meeting.

(4) In the event of the absence of the Chairman and of the Deputy Chairman from a meeting, the members present shall elect one of their number to preside at that meeting.

(5) The quorum for a meeting shall be five members including three medical practitioners.

(6) A question arising at a meeting of the Committee shall be decided by a majority of the votes of the members present and voting and, for that purpose, the member presiding shall have a deliberative vote only.

(7) In the event of an equality of votes on a question before a meeting of the Committee, the question shall be deemed to be unresolved and the member presiding may direct that the question be reconsidered at a time and place fixed by him.

(8) In this section, “meeting” does not include a meeting under section 68.

**Proceedings at meetings.**

**76.** (1) Subject to this Act and the regulations, the Committee may regulate the proceedings at its meetings as it thinks fit.

(2) The meetings of the Committee shall be held in private.

**Committee may inform itself in any manner.**

**77.** For the purposes of the consideration of any matter the subject of a reference, the Committee may inform itself in such manner as it thinks fit.

**Chairman may engage consultants.**

**78.** With the approval of the Minister, the Chairman may, on behalf of Australia, engage as consultants to the Committee persons having suitable qualifications and experience.

Division 3—Medical Services Committees of Inquiry

**Interpretation.**

**79.** (1) In this Division, unless the contrary intention appears—

“Chairman” means the Chairman of a Committee;

“Committee” means a Medical Services Committee of Inquiry;

“Deputy Chairman” means the Deputy Chairman of a Committee;

“excessive services” means professional services, being services in respect of which medical benefit has become or may become payable, that are not reasonably necessary for the adequate medical care of the patient;

“hearing” means a hearing conducted under section 94;

“member” means a member of a Committee, and includes a person appointed under section 85 to act in the place of a member;

“reference” means a reference by the Minister to a Committee under section 82.

(2) For the purposes of this Division—

(a) the Australian Capital Territory shall be deemed to be part of the State of New South Wales; and

(b) the Northern Territory shall be deemed to be part of the State of South Australia.

**Establishment of Medical Services Committees of Inquiry.**

**80.** (1) The Minister shall establish for each State a Committee to be called a Medical Services Committee of Inquiry for that State and may establish two or more such Committees for a State.

(2) Each Committee shall consist of five medical practitioners.

(3) The members of each Committee shall be appointed by the Minister and four of them shall be so appointed after consultation by the Minister with the Australian Medical Association or such other associations or colleges of medical practitioners as the Minister considers appropriate.

(4) Subject to this Act, each member holds office for such period as is specified by the Minister in the instrument of his appointment and is eligible for re-appointment.

(5) An act or decision of a Committee is not affected by reason only of there being a vacancy or vacancies in the membership of the Committee.

**Members of Committees under the National Health Act may be deemed to be members of Committees under this Division.**

**81.** (1) The Minister may direct that a person who is a member of a Medical Services Committee of Inquiry for a State under the *National Health Act* 1953-1973 shall be deemed to be a member of the Medical Services Committee of Inquiry for that State under this Act during such period, not being a period that ends after the expiration of the period for which the person was appointed under that Act as a member of that first- mentioned Committee, as the Minister specifies in the direction.

(2) Sections 86 and 87 apply in relation to a person referred to in sub-section (1) as if that person had been appointed a member of the relevant Committee under section 80.

**Function of Committees.**

**82.** (1) A Committee shall inquire into, and report to the Minister on, any matter referred to the Committee by the Minister, being a matter that is relevant to the operation or administration of this Act and arises out of or relates to—

(a) the rendering, on or after the date fixed for the purposes of section 10, in the State for which the Committee is established, of professional services to eligible pensioners or dependants of eligible pensioners; or

(b) the rendering, on or after that date, in the State for which the Committee is established, of such other professional services as are prescribed.

(2) Before making any regulations for the purposes of paragraph (1)(b), the Governor-General shall take into consideration any recommendation with respect to the matters to be prescribed made to the Minister by the Australian Medical Association.

**Election of Chairman and Deputy Chairman.**

**83.** (1) The Minister shall convene a meeting of each Committee for the purpose of electing one of the members of the Committee to be the Chairman of the Committee and another of the members to be the Deputy Chairman of the Committee.

(2) Whenever a vacancy occurs in the office of Chairman of a Committee or Deputy Chairman of a Committee, the Minister shall convene a meeting of the Committee for the purpose of electing one of the members to be the new Chairman or Deputy Chairman.

(3) The Minister shall appoint one of the members of a Committee to preside at a meeting of the Committee convened under this section.

(4) The quorum for a meeting of a Committee under this section is three members of the Committee.

(5) The election of a Chairman of a Committee or Deputy Chairman of a Committee at a meeting convened under this section shall be made by a majority of votes of the members of the Committee present and voting.

(6) In the event of an equality of votes on a question before a meeting of a Committee convened under this section, the member of the Committee presiding at the meeting shall adjourn the meeting until a time and place to be fixed by the Minister.

(7) A member of a Committee elected as the Chairman of the Committee or the Deputy Chairman of the Committee holds that office until the expiration of the period of his appointment as a member of the Committee or, if he earlier ceases to be such a member, until he so ceases.

**Exercise of powers and functions of Chairman by Deputy Chairman.**

**84.** The Deputy Chairman of a Committee may, during any period when the Chairman of the Committee is absent from duty or absent from Australia or, for any other reason, is unable to perform the duties of his office, exercise the powers of the Chairman of the Committee.

**Appointment of person to act in place of member.**

**85.** (1) Subject to sub-section (2), the Minister may, if he becomes aware that a member of a Committee will be unable to attend a meeting or meetings of the Committee, appoint a medical practitioner to act in the place of that member at the meeting or meetings that the member will be unable to attend.

(2) A person appointed to act in the place of a member who is the Chairman or the Deputy Chairman is not entitled to act as the Chairman or the Deputy Chairman, as the case may be.

(3) The Minister may, at any time, terminate an appointment made by him under this section.

**Termination of appointment.**

**86.** The Minister may terminate the appointment of a member for misbehaviour or physical or mental incapacity.

**Resignation.**

**87.** A member may resign his office by writing under his hand delivered to the Minister.

**Appointment to vacant office.**

**88.** (1) Subject to sub-section (2), where a vacancy occurs in the office of a member, the Minister may appoint a person to that office.

(2) Where an office referred to in sub-section (1) was occupied by a medical practitioner who had been appointed after a consultation referred to in sub-section 80(3), the Minister shall appoint a medical practitioner to that office and, before making that appointment, shall consult the Australian Medical Association or such other associations or colleges of medical practitioners as he considers appropriate.

(3) Subject to this Act, a member appointed under this section holds office for such period as is specified by the Minister in the instrument of his appointment and is eligible for re-appointment.

**Remuneration and allowances.**

**89.** (1) A member shall be paid such remuneration as the Parliament fixes but, until 1 January 1975, shall be paid such remuneration as is prescribed.

(2) A member shall be paid such allowances (not including an annual allowance) as are prescribed.

**Meetings of Committee.**

**90.** (1) The Chairman of a Committee shall convene such meetings of the Committee as are necessary for the efficient conduct of its affairs.

(2) The Chairman of a Committee shall preside at all meetings of the Committee at which he is present.

(3) In the event of the absence of the Chairman from a meeting of a Committee the Deputy Chairman of that Committee shall preside at that meeting.

(4) In the event of the absence of the Chairman and of the Deputy Chairman from a meeting of a Committee, the members present shall elect one of their number to preside at that meeting.

(5) The quorum for a meeting of a Committee is three members.

(6) A question arising at a meeting of a Committee shall be decided by a majority of the votes of the members present and voting and, for that purpose, the member presiding shall have a deliberative vote only.

(7) In the event of an equality of votes on a question before a meeting of a Committee, the question shall be deemed to be unresolved and the member presiding may direct that the question be reconsidered at a time and place fixed by him.

(8) In this section, “meeting” does not include a meeting under section 83.

**Proceedings at meetings.**

**91.** (1) Subject to this Act and the regulations, a Committee may regulate the proceedings at its meetings as it thinks fit.

(2) The meetings of a Committee shall be held in private.

**Committee may inform itself in any manner.**

**92.** Subject to section 94, the Committee may, for the purpose of its inquiry into a matter the subject of a reference, inform itself in such manner as it thinks fit.

**Chairman may engage consultants.**

**93.** With the approval of the Minister, the Chairman of a Committee may, on behalf of Australia, engage as consultants to the Committee persons having suitable qualifications and experience.

**Hearing by Committee.**

**94.** Where, after consideration of a matter referred to a Committee by the Minister and of any documents that accompany the reference supplied by the Minister, it appears to the Committee that a practitioner may have rendered excessive services, the Committee shall conduct a hearing into the question whether the practitioner has rendered excessive services.

**Notice to practitioner of hearing.**

**95.** (1) A Committee shall cause a notice in writing of the time and place of a proposed hearing to be given to the practitioner, or to each of the practitioners, concerned at least 10 days before the date of the proposed hearing.

(2) A notice under sub-section (1) shall give particulars of the alleged conduct to which the hearing relates.

(3) A notice under sub-section (1) may be served on a person either personally or by post.

**Rights of practitioner at hearing.**

**96.** Where a notice has been served on a practitioner under section 95—

(a) the practitioner may appear in person, or may be represented by another person, at the hearing to which the notice relates; and

(b) if the practitioner appears, or is represented, at the hearing, he or his representative shall be given the opportunity to give evidence, or to call witnesses, on behalf of the practitioner, to examine other witnesses appearing at the hearing and to address the Committee.

**Conduct of hearing.**

**97.** (1) A hearing shall be held in private.

(2) At a hearing, the Chairman or, in the absence of the Chairman, the Deputy Chairman or, in the absence of the Chairman and the Deputy Chairman, the member appointed for the purpose by the Committee shall preside.

(3) The rules of evidence do not apply in relation to a hearing and the procedure for conducting the hearing is, subject to this Act and the regulations, within the discretion of the member presiding.

(4) Where a document, book or writing is produced at a hearing—

(a) a member may inspect the document, book or writing;

(b) the member presiding at the hearing may retain the document, book or writing in his possession for such reasonable period as he thinks fit; and

(c) where the document, book or writing is so retained, a member may make copies of, or take extracts from, that document, book or writing.

(5) The member presiding at a hearing may adjourn the hearing from time to time as he thinks fit.

**Evidence at hearing.**

**98.** Evidence at a hearing shall be taken on oath or affirmation and, for the purposes of this Act, any member may administer an oath or affirmation.

**Summons to give evidence, &c.**

**99.** (1) For the purposes of this Act, a member may, by writing under his hand, summon a person to appear at a hearing to give evidence and to produce such document, book or writing as is referred to in the summons.

(2) A summons under sub-section (1) may be served on the person concerned personally or by post.

**Allowances for witnesses at hearing.**

**100.** A person appearing as a witness at a hearing, whether summoned under section 99 or not, shall be paid by Australia such allowances for expenses in respect of his attendance before the Committee as are prescribed.

**Failure to attend.**

**101.** A person served with a summons to appear at a hearing shall not fail, without reasonable excuse, so to appear.

Penalty: $200.

**Refusal to be sworn or give evidence.**

**102.** (1) A person appearing as a witness at a hearing (whether summoned to appear or not) shall not, without reasonable excuse—

(a) refuse or fail to be sworn or to make an affirmation;

(b) refuse or fail to answer a question that he is required by a member to answer; or

(c) refuse or fail to produce a document, book or writing that he is required under this Act to produce.

Penalty: $200.

(2) A statement or disclosure made by a witness at a hearing is not admissible in evidence against him in civil or criminal proceedings in a court except in a prosecution for giving false testimony at the hearing.

(3) It is a defence in proceedings for an offence of refusing or failing, without reasonable excuse, to produce a document, book or writing at a hearing if it is proved that the document, book or writing was not relevant to the subject matter of the hearing.

**Protection of members’ representatives and witnesses at hearing.**

**103.** (1) A member has, in the performance of his duties, the same protection and immunity as a Justice of the High Court.

(2) A person appearing at a hearing on behalf of another person has the same protection and immunity as a barrister has in appearing for a party in proceedings in the High Court.

(3) A person appearing at a hearing as a witness has the same protection, and is, in addition to the penalties provided by this Act, subject to the same liabilities, as a witness in proceedings in the High Court.

**Report by Committee.**

**104.** (1) After completion by a committee of a hearing under section 94 in relation to a practitioner, the Committee shall report to the Minister its opinion on the question whether the practitioner has rendered excessive services and, if the Committee is of opinion that the practitioner has rendered excessive services, the report shall identify the excessive services.

(2) Where, under sub-section (1), the Committee reports that it is of opinion that a practitioner has rendered excessive services, the Committee shall send to the Minister with the report a transcript of the proceedings at the hearing, and shall return any documents that accompanied the reference.

**Recommendation by Committee.**

**105**. Where—

(a) a Committee has, in a report under section 104, expressed the opinion that a practitioner has rendered excessive services, and has identified those services; and

(b) medical benefit is payable, or has been paid, whether to the practitioner or to another person in respect of any of those services,

the Committee may recommend in that report that—

(c) where the medical benefit is payable, but has not been paid, to the practitioner—the medical benefit or a specified part of the medical benefit cease to be payable; or

(d) where the medical benefit has been paid to the practitioner, or has been paid or is payable to another person—the amount of the medical benefit be payable to Australia by the practitioner.

**Determination by Minister.**

**106.** (1) Where a Committee makes a recommendation in accordance with section 105, the Minister may make a determination, in writing, in accordance with that recommendation.

(2) Where the Minister makes a determination under sub-section (1), he shall serve on the practitioner, either personally or by post, a notification in writing setting out the determination.

(3) Where the Minister makes a determination under sub-section (1), then—

(a) if no request for review of the determination under Division 4 is lodged within the period allowed for such a request—the determination takes effect at the expiration of that period;

(b) if a request for review of the determination under Division 4 is lodged within the period allowed for such a request—then—

(i) if the determination is disallowed on the review—the determination does not take effect; or

(ii) if the determination is upheld or varied on the review and no appeal against the decision on the review is made under section 122 within the period allowed for such an appeal—the determination takes effect, or takes effect as so varied, at the expiration of that period; or

(c) if an appeal against the decision on the review is made under section 122 within the period allowed for such an appeal, the determination does not have effect until the appeal, and any further appeal to the High Court, are determined and, upon the determination of the appeal and any such further appeal, the determination takes effect as varied or does not take effect, in accordance with the judgment or order on the appeal or further appeal.

(4) Where a determination under sub-section (1) that gives effect to a recommendation that an amount of medical benefit be payable to Australia by a practitioner takes effect, that amount is recoverable by Australia from the practitioner as a debt due to Australia.

*Division* 4*—Medical Services Review Tribunals*

**Definitions.**

**107.** In this Division, unless the contrary intention appears—

“determination” means a determination under section 106;

“judicial office” means an office of judge of a Federal Court or of the Supreme Court of a State or Territory;

“member” means a member of a Tribunal, and includes the President of a Tribunal;

“Tribunal” means a Medical Services Review Tribunal.

**Establishment of Medical Services Review Tribunals.**

**108.** (1) The Governor-General may establish one or more Medical Services Review Tribunals for the purposes of this Act.

(2) A Tribunal shall consist of a President and two other members, who shall be appointed in accordance with this section.

(3) The President of a Tribunal shall be a person who—

(a) is or has been the holder of a judicial office; or

(b) is a legal practitioner of the High Court or of a Supreme Court of a State or Territory of not less than 5 years’ standing.

(4) Of the members of a Tribunal other than the President—

(a) one shall be a medical practitioner nominated by the Minister after consultation with the Australian Medical Association or such other associations or colleges of medical practitioners as the Minister considers appropriate; and

(b) one shall be a medical practitioner employed in a Department of State.

(5) The members of a Tribunal shall be appointed by the Governor-General and, subject to this Act, each member holds office for such period, not exceeding 5 years, as is specified by the Governor-General in the instrument of his appointment and is eligible for re-appointment.

(6) A member of a Medical Services Committee of Inquiry shall not be eligible for appointment as a member of a Tribunal.

**Termination of appointment.**

**109.** The Governor-General may terminate the appointment of a member (other than the holder of a judicial office) for misbehaviour or physical or mental incapacity.

**Resignation of members.**

**110.** A member may resign his office by writing under his hand delivered to the Governor-General**.**

**Appointment to vacant office.**

**111.** Where a vacancy occurs in the office of a member, the Governor-General may appoint a person to that office in accordance with section 108.

**Irregularities in nomination of members.**

**112.** The validity of the appointment of a member other than the President of a Tribunal shall not be called into question by reason only of a defect or irregularity in connexion with the nomination of that member.

**Remuneration and allowances.**

**113.** (1) A member, not being the holder of a judicial office, shall be paid such remuneration and such annual allowances (if any) as the Parliament fixes, but, until 1 January 1975, shall be paid such remuneration and annual allowance (if any) as are prescribed.

(2) A member, not being the holder of a judicial office, shall be paid such allowances (not including an annual allowance) as are prescribed.

**Request for review of determination.**

**114.** (1) A practitioner to whom a determination relates may, by notice in writing given to the Minister within a period of 30 days after the date upon which the notification of the determination is served on him, request the Minister to refer the determination to a Medical Services Review Tribunal for review.

(2) There shall be set out in the request the grounds on which the request is made.

**Request for review to be forwarded to Tribunal.**

**115.** Upon receipt by the Minister of a request under section 114 for the review of a determination, the Minister shall forward the request to the President of a Tribunal together with—

(a) a copy of the reference that gave rise to the determination;

(b) a transcript of the proceedings at the hearing conducted for the purposes of that reference;

(c) the report on that reference and any documents sent to the Minister with that report; and

(d) the determination.

**Review to be arranged.**

**116.** Where the President of a Tribunal receives from the Minister under section 115a request for the review of a determination, the President shall—

(a) arrange for the determination to be reviewed in proceedings before the Tribunal; and

(b) serve, either personally or by post, on the Minister and on the practitioner to whom the determination relates a notification, in writing, setting out the time and place so arranged.

**Rights of parties at proceedings on review.**

**117.** (1) Where a practitioner makes a request for the review of a determination—

(a) the practitioner may appear in person, or may be represented by another person, at the proceedings on the review arranged under section 116; and

(b) if he appears, or is represented, at those proceedings—he or his representative shall be given the opportunity to address the Tribunal.

(2) The Minister may be represented at proceedings referred to in sub-section (1) and, if he is so represented, his representative shall be given the opportunity to address the Tribunal.

**Procedure of Tribunals.**

**118.** (1) Proceedings before a Tribunal—

(a) shall be in private; and

(b) shall be conducted with as little formality and technicality as a proper consideration of the matter before the Tribunal permits.

(2) The procedure of a Tribunal is, subject to this Act and the regulations, within the discretion of the President.

(3) The parties to the proceedings are the Minister and the practitioner who requested the review.

**Proceedings on review.**

**119.** (1) A tribunal that reviews a determination in accordance with a request—

(a) shall consider the matter to which the determination relates having regard to the grounds set out in the request, the documents forwarded by the Minister with the request and any

addresses made to the Tribunal during the proceedings on the review; and

(b) shall, subject to sub-section (2)—

(i) uphold the determination;

(ii) vary the determination in such manner as it thinks fit but so that the determination, as so varied, is one that the Minister could have made in giving effect to a recommendation of a Committee; or

(iii) disallow the determination.

(2) A Tribunal shall not uphold or vary a determination unless it is satisfied that the practitioner concerned has rendered the excessive services to which the determination relates.

(3) Subject to the Constitution, the decision of a Tribunal on a review is final except in so far as an appeal may be brought to the Australian Industrial Court in accordance with section 122 or an appeal may be brought to the High Court from a judgment or order of the Australian Industrial Court given or made under that section.

**Costs of proceedings before Tribunal.**

**120.** The costs incurred by a practitioner in relation to proceedings before a Tribunal shall be borne by Australia, unless the Tribunal is of opinion that the costs, or part of the costs, were unnecessarily incurred and directs that the costs, or that part of the costs, be borne by the practitioner.

**Protection of members of Tribunal, &c.**

**121.** (1) A member of a Tribunal has, in the performance of the duties of his office, the same protection and immunities as a Justice of the High Court.

(2) A person representing another person before a Tribunal has the same protection and immunities as a barrister has in appearing for a party in proceedings in the High Court.

**Appeals.**

**122.** (1) A party in proceedings before a Tribunal may, in such manner and within such time as is prescribed, appeal, on a question of law only, to the Australian Industrial Court from a decision of the Tribunal.

(2) The Australian Industrial Court has jurisdiction to hear and determine an appeal instituted in that Court in accordance with subsection (1).

(3) The Australian Industrial Court shall hear and determine the appeal and give such judgment, or make such order, as, in all the circumstances, it thinks fit, and, in particular—

(a) may uphold, vary or disallow the decision of the Tribunal; or

(b) may remit the matter the subject of the decision of the Tribunal to the Tribunal for further review in accordance with the directions of the Court.

**Exercise of jurisdiction of Australian Industrial Court.**

**123.** (1) Subject to sub-section (2), the jurisdiction of the Australian Industrial Court with respect to appeals under section 122 shall be exercised by a single judge.

(2) The Chief Judge of the Australian Industrial Court may, if in his opinion an appeal under section 122 involves the determination of a question of law of sufficient importance, direct that, for the purpose of that appeal, the Court shall be constituted by three judges.

Division 5—Other Committees

**Other Committees.**

**124.** In addition to the Committees for the establishment of which express provision is made in the preceding Divisions of this Part, the regulations may provide for the establishment of other Committees and may make provision for and in relation to the constitution, powers, functions, duties and procedure of, and the filling of vacancies on, those Committees.

PART VI—FINANCE

**Payments to be made by Commission.**

**125.** All amounts (including advances) payable by Australia under Part II, Part III (including an agreement under that Part) or Part IV and amounts of hospital benefits payable under the regulations shall be paid, on behalf of Australia, by the Commission.

**Health Insurance Fund.**

**126.** (1) There shall be a Health Insurance Fund.

(2) The Health Insurance Fund is a Trust Account for the purposes of section 62a of the *Audit Act* 1901-1969.

(3) There shall be paid into the Health Insurance Fund—

(a) such amounts as are appropriated by the Parliament from time to time for the purpose;

(b) amounts recovered by Australia under sub-section 43(2) or 106(4); and

(c) premiums referred to in sub-section 6(2).

(4) The time and manner of payment of the moneys referred to in paragraph (3)(a) shall be as determined by the Treasurer.

(5) There shall be paid to the Commission from time to time, out of the Health Insurance Fund, such amounts as the Treasurer thinks necessary for the purpose of enabling the Commission to make payments referred to in section 125.

(6) Interest from the investment of any moneys standing to the credit of the Health Insurance Fund shall be credited to the Fund.

PART VII—MISCELLANEOUS

**Use of health insurance cards.**

**127.** A person shall not use a health insurance card for the purpose of obtaining payment of a medical benefit payable in respect of a professional service rendered to a person other than a person whose name is on the card.

Penalty: $500.

**Offences in relation to returns.**

**128.** A person shall not fail or neglect duly to furnish a return or information that he is required under this Act or the regulations to furnish.

Penalty: $500.

**False statements, &c.**

**129.** (1) A person shall not make a statement, either orally or in writing, or issue or present a document, that is false or misleading in a material particular and is capable of being used in, in connexion with or in support of, an application for approval for the purposes of this Act or for payment of an amount under this Act.

Penalty: $500 or imprisonment for 6 months.

(2) A person shall not furnish, in pursuance of this Act or of the regulations, a return or information that is false or misleading in a material particular.

Penalty: $500 or imprisonment for 6 months.

(3) In a prosecution of a person for an offence against this section, it is a defence if the person shows that he did not know, and had no reason to suspect, that the statement, document, return or information to which the prosecution relates was false or misleading, as the case may be.

**Officers to observe secrecy.**

**130.** (1) A person shall not, directly or indirectly, except in the performance of his duties, or in the exercise of his powers or functions, under this Act, and while he is, or after he ceases to be, an officer, make a record of, or divulge or communicate to any person, any information with respect to the affairs of another person acquired by him in the performance of his duties, or in the exercise of his powers or functions, under this Act.

Penalty: $500.

(2) A person who is, or has been, an officer shall not, except for the purposes of this Act, be required—

(a) to produce in court any document that has come into his possession or under his control in the performance of his duties or functions under this Act; or

(b) to divulge or communicate to a court any matter or thing that has come under his notice in the performance of any such duties or functions.

(3) Notwithstanding anything contained in the preceding provisions of this section, an officer may—

(a) if the Minister certifies that it is necessary in the public interest that any information acquired by the officer in the performance of his duties, or in the exercise of his powers or functions, under this Act, should be divulged, divulge that information to such person as the Minister directs;

(b) divulge any such information to any prescribed authority or person; or

(c) divulge any such information to a person who, in the opinion of the Minister, is expressly or impliedly authorized by the person to whom the information relates to obtain it.

(4) An authority or person to whom information is divulged under sub-section (3), and any person or employee under the control of that authority or person, shall, in respect of that information, be subject to the same rights, privileges, obligations and liabilities under sub-sections (1) and (2) as if he were a person performing duties under this Act and had acquired the information in the performance of those duties.

(5) Nothing in this section prohibits the publication of statistics by the Commission or by the Commonwealth Statistician but such statistics shall not be published in a manner that enables the identification of an individual patient or an individual practitioner.

(6) In this section, “officer” means a person performing duties, or exercising powers or functions, under, or in relation to, this Act.

**Delegation.**

**131.** (1) Subject to this section, the Minister may, by writing under his hand, delegate all or any of his powers and functions under this Act (except this power of delegation) to any officer of the Department of Social Security.

(2) A power or function so delegated may be exercised or performed by the delegate in accordance with the instrument of delegation.

(3) A delegation under this section is revocable at will and does not prevent the exercise of a power or the performance of a function by the Minister.

**Evidence.**

**132.** (1) The Minister may, by writing under his hand, certify that, during a period or on a date specified in the certificate—

(a) any premises were, or were not, a hospital; or

(b) a document annexed to the certificate is a true copy of a determination or direction by the Minister under this Act or of any other document made or issued under this Act.

(2) In proceedings under this Act or another Act or under regulations under this Act or another Act, a certificate purporting to have been given under this section—

(a) is evidence of the facts stated in the certificate; and

(b) shall, unless the contrary is proved, be deemed to have been given by the person purporting to give the certificate.

Regulations.

**133.** (1) The Governor-General may make regulations, not inconsistent with this Act, prescribing all matters required or permitted by this Act to be prescribed, or necessary or convenient to be prescribed for carrying out or giving effect to this Act and, in particular—

(a) requiring the proprietor of a private hospital to keep records relating to, and to furnish, to such persons as are prescribed, returns or information relating to, the occupation of approved beds in the hospital; and

(b) prescribing penalties, not exceeding a fine of $200, for offences against the regulations.

(2) Where an item specifies a medical service that is to be rendered by a consultant physician, or a specialist, in the practice of his specialty to a patient who has been referred to him, the regulations may require that, for the purposes of the item, the patient be referred in a manner prescribed by the regulations.

(3) The regulations may provide for the payment by Australia of hospital benefits, at such rates and subject to such conditions as are prescribed by or under the regulations, to persons who have incurred expense in respect of the care and treatment outside Australia in hospitals, as defined by or under the regulations, of persons who are Australian residents temporarily absent from Australia.

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SCHEDULE 1 Sections 9 and 10

RULES FOR THE INTERPRETATION OF THE TABLE OF MEDICAL SERVICES

1. Where an item in Part 1, 3 or 4 of the table includes the symbol “(S)” the item shall be taken to relate to the service specified in the item when rendered by a specialist in the practice of his specialty.

2. Where an item in Part 1,3 or 4 of the table includes the symbol “(G) ”, the item shall be taken to relate to the service specified in the item when rendered otherwise than by a specialist in the practice of his specialty.

3. Where an item, other than an item in Part 1, 3 or 4 of the table, includes the symbol “(S)”, the item shall be taken to relate to the service specified in the item when rendered by a specialist in the practice of his specialty to a patient who has been referred to him.

4. Where an item, other than an item in Part 1, 3, or 4 of the table, includes the symbol “(G)”, the item shall be taken to relate to the service specified in the item when rendered otherwise than by a specialist in the practice of his specialty to a patient who has been referred to him.

5. A reference in rule 3 or 4 or in Part 1 of the table to the referring of a patient to a specialist shall be read as a reference to a referring by a medical practitioner and—

(a) where the specialist concerned is an ophthalmologist—shall be read as including a reference to a referring by a registered optometrist or by a registered optician; and

SCHEDULE-continued

(b) where a referring arises out of a dental service rendered to the person who has been referred—shall be read as including a reference to a referring by a dental practitioner.

6. Where an item includes the symbol “(D)”, the item shall be taken to relate to the service specified in the item when rendered in an operating theatre of a hospital in the course of dental practice by a dental practitioner approved by the Minister for the purposes of the definition of’ professional service’ in sub-section 3(1).

7. A reference in a column in an item referred to in a paragraph of this rule to an amount under this rule shall be read as a reference to an amount equal to the aggregate of the fee set out in that column in the item that relates to a radiographic examination of the kind referred to in the first-mentioned item and—

(a) in the case of item 2254—$5;

(b) in the case of item 2362 or 2367—$5.50; or

(c) in the case of item 2420—$3,

and an amount equal to that aggregate shall be deemed to be set out in that column in the place of that reference.

8. A reference in a column in an item referred to in a paragraph of this rule to an amount under this rule shall be read as a reference to an amount equal to the aggregate of the fee set out in that column in the item that relates to a dislocation or fracture of the kind treated and—

(a) in the case of item 6414, 6416, 6651 or 6652—one-half of that fee;

(b) in the case of item 6647 or 6648—one-third of that fee; or

(c) in the case of item 6655 or 6656—three-quarters of that fee,

and an amount equal to that aggregate shall be deemed to be set out in that column in the place of that reference.

9. A reference in a column in an item referred to in a paragraph of this rule to an amount under this rule shall be read as a reference to an amount equal to—

(a) in the case of item 6659, 6660, 6663 or 6664—one-half of the fee set out in that column in the item that would, but for that first-mentioned item, relate to the reduction effected;

(b) in the case of item 6667 or 6668—the fee set out in that column in the item that would but for that first-mentioned item, relate to the reduction effected; or

(c) in the case of item 6671—the fee set out in that column in the item that relates to a simple and uncomplicated fracture of the part treated,

and an amount equal to the amount so referred to shall be deemed to be set out in that column in the place of that reference.

TABLE OF MEDICAL SERVICES

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | Fees |  | | | | |
| Item |  |  |  | | | | |
| No. | Medical service | N.S.W | Vic. | Qld | S.A. | W.A. | Tas. |
|  | | $ | $ | $ | $ | $ | $ |

PART I—PROFESSIONAL ATTENDANCES NOT COVERED BY AN ITEM IN ANY OTHER PART OF THIS SCHEDULE

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 70 | Professional attendance at consulting rooms of not more than 5 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 72—each attendance | 3.50 | 3.20 | 3.15 | 3.15 | 3.15 | 3.20 |

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|  |  | Fees |  |  |  |  |  |
| Item No. |  | | | | | | |
| Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 72 | Professional attendance at consulting rooms of not more than 5 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 6.00 | 5.70 | 5.65 | 5.65 | 5.65 | 5.70 |
| 75 | Professional attendance at consulting rooms of more than 5 minutes duration but not more than 25 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 78—each attendance | 4.70 | 4.30 | 4.20 | 4.20 | 4.20 | 4.30 |
| 78 | Professional attendance at consulting rooms of more than 5 minutes duration but not more than 25 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 7.20 | 6.80 | 6.70 | 6.70 | 6.70 | 6.80 |
| 81 | Professional attendance at consulting rooms of more than 25 minutes duration but not more than 45 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 84—each attendance | 9.00 | 8.30 | 8.10 | 8.10 | 8.10 | 8.30 |
| 84 | Professional attendance at consulting rooms of more than 25 minutes duration but not more than 45 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 11.50 | 10.80 | 10.60 | 10.60 | 10.60 | 10.80 |
| 87 | Professional attendance at consulting rooms of more than 45 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 90—each attendance | 13.50 | 12.50 | 12.20 | 12.20 | 12.20 | 12.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 90 | Professional attendance at consulting rooms of more than 45 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 16.00 | 15.00 | 14.70 | 14.70 | 14.70 | 15.00 |
| 93 | Professional attendance at a place other than consulting rooms, hospital or nursing home of not more than 5 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 96—each attendance | 5.25 | 4.80 | 4.75 | 4.75 | 4.75 | 4.80 |
| 96 | Professional attendance at a place other than consulting rooms, hospital or nursing home of not more than 5 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 7.75 | 7.30 | 7.25 | 7.25 | 7.25 | 7.30 |
| 99 | Professional attendance at a place other than consulting rooms, hospital or nursing home of more than 5 minutes duration but not more than 25 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 102—each attendance | 7.00 | 6.45 | 6.30 | 6.30 | 6.30 | 6.45 |
| 102 | Professional attendance at a place other than consulting rooms, hospital or nursing home of more than 5 minutes duration but not more than 25 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 9.50 | 9.00 | 8.80 | 8.80 | 8.80 | 9.00 |
| 105 | Professional attendance at a place other than consulting rooms, hospital or nursing home of more than 25 minutes duration but not more than 45 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 108—each attendance | 11.35 | 11.00 | 10.75 | 10.75 | 10.75 | 11.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 108 | Professional attendance at a place other than consulting rooms, hospital or nursing home of more than 25 minutes duration but not more than 45 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 13.85 | 13.50 | 13.25 | 13.25 | 13.25 | 13.50 |
| 111 | Professional attendance at a place other than consulting rooms, hospital or nursing home of more than 45 minutes duration (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 114—each attendance | 15.85 | 15.25 | 15.00 | 15.00 | 15.00 | 15.25 |
| 114 | Professional attendance at a place other than consulting rooms, hospital or nursing home of more than 45 minutes duration (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday | 18.35 | 17.75 | 17.50 | 17.50 | 17.50 | 17.75 |
| 117 | Professional attendance at a hospital or nursing home (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 120—each attendance when only one patient is seen | 7.00 | 6.45 | 6.30 | 6.30 | 6.30 | 6.45 |
| 120 | Professional attendance at a hospital or nursing home (not being an attendance covered by any other item in this Part)—each attendance on a public holiday, on a Sunday, before 8 a.m. or after 1 p.m. on a Saturday or at any time other than between 8 a.m. and 8 p.m. on a day not being a Saturday, Sunday or public holiday, when only one patient is seen | 9.50 | 9.00 | 8.80 | 8.80 | 8.80 | 9.00 |
| 123 | Professional attendance at a hospital (not being an attendance covered by any other item in this Part) at a time other than a time covered by item 126—each attendance on two or more patients in the one hospital on the one occasion—each patient | 4.70 | 4.30 | 4.20 | 4.20 | 4.20 | 4.30 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 126 | Professional attendance at a nursing home (not being an attendance covered by any other item in this Part)—each attendance on two or more patients in the one nursing home on the one occasion—each patient | 3.50 | 3.20 | 3.15 | 3.15 | 3.15 | 3.20 |
| 188 | Professional attendance by a specialist in the practice of his specialty where the patient is referred to him—an attendance (other than a second or subsequent attendance in a single course of treatment) where that attendance is at consulting rooms, hospital or nursing home | 12.10 | 11.00 | 11.00 | 11.00 | 9.40 | 8.80 |
| 189 | Professional attendance by a specialist in the practice of his specialty where the patient is referred to him—an attendance (other than a second or subsequent attendance in a single course of treatment) where that attendance is at a place other than consulting rooms, hospital or nursing home | 17.60 | 16.50 | 16.50 | 16.50 | 14.90 | 14.30 |
| 190 | Professional attendance by a specialist in the practice of his specialty where the patient is referred to him—each attendance that is a second or subsequent attendance in a single course of treatment | 6.10 | 6.10 | 5.50 | 5.50 | 5.50 | 5.50 |
| 191 | Professional attendance by a consultant physician in the practice of his specialty where the patient is referred to him by a medical practitioner—an attendance (other than a second or subsequent attendance in a single course of treatment) where that attendance is at consulting rooms, hospital or nursing home | 22.00 | 19.80 | 19.80 | 19.80 | 19.80 | 16.50 |
| 192 | Professional attendance by a consultant physician in the practice of his specialty where the patient is referred to him by a medical practitioner—an attendance (other than a second or subsequent attendance in a single course of treatment) where that attendance is at a place other than consulting rooms, hospital or nursing home | 27.50 | 25.30 | 25.30 | 25.30 | 25.30 | 22.00 |
| 193 | Professional attendance by a consultant physician in the practice of his specialty where the patient is referred to him by a medical practitioner—each attendance that is a second or subsequent attendance in a single course of treatment | 9.40 | 8.30 | 8.30 | 8.30 | 8.30 | 7.20 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 194 | Prolonged professional attendance, for not less than 2 hours but less than 3 hours, on a patient in a critical condition arising from electric shock, drowning, caisson disease, tetanus, respiratory or circulatory failure or involving resuscitation of the new born, that requires constant attention to the exclusion of all other patients | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 195 | Prolonged professional attendance, for a period of not less than 3 hours but less than 4 hours, in the circumstances referred to in item 194 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 196 | Prolonged professional attendance, for a period of not less than 4 hours but less than 5 hours, in the circumstances referred to in item 194 | 43.50 | 43.50 | 43.50 | 43.50 | 43.50 | 43.50 |
| 197 | Prolonged professional attendance, for a period of 5 hours or more, in the circumstances referred to in item 194 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 198 | Pre-operative examination of a patient in preparation for the administration of an anaesthetic, being an examination carried out at an attendance other than that at which the anaesthetic is administered (G) | 4.40 | 4.00 | 3.90 | 3.80 | 3.90 | 4.00 |
| 199 | Pre-operative examination of a patient in preparation for the administration of an anaesthetic, being an examination carried out at an attendance other than that at which the anaesthetic is administered (S) | 5.50 | 5.00 | 5.50 | 5.00 | 5.50 | 4.40 |
| PART 2—OBSTETRICS | | | | | | | |
| *Division 1—General* | | | | | | | |
| 202 | Antenatal care where attendances do not exceed ten—each attendance | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 205 | Antenatal care where attendances exceed ten | 40.00 | 36.00 | 35.00 | 34.00 | 35.00 | 36.00 |
| 209 | Confinement and postnatal care for 9 days where the medical practitioner has not given the antenatal care (G) | 33.00 | 30.00 | 30.00 | 25.00 | 25.00 | 25.00 |
| 210 | Confinement and postnatal care for 9 days where the medical practitioner has not given the antenatal care (S) | 65.00 | 45.00 | 45.00 | 40.00 | 40.00 | 35.00 |
| 220 | Confinement, including a professional attendance that would, but for this item, be covered by item 188 (S) | 30.00 | 25.00 | 25.00 | 25.00 | 25.00 | 20.00 |
| 221 | Antenatal care, confinement and postnatal care for 9 days (G) | 50.00 | 50.00 | 45.00 | 40.00 | 40.00 | 40.00 |
| 222 | Antenatal care, confinement and postnatal care for 9 days (S) | 100.00 | 80.00 | 70.00 | 80.00 | 70.00 | 60.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
|  | *Division 2—Special Services* | | | | | | |
| 225 | Antenatal care, confinement and postnatal care for 9 days with surgical induction of labour (G) | 61.00 | 60.00 | 55.50 | 50.00 | 50.00 | 50.00 |
| 228 | Antenatal care, confinement and postnatal care for 9 days with surgical induction of labour (S) | 111.00 | 90.00 | 80.50 | 90.00 | 80.00 | 70.00 |
| 232 | Antenatal care, confinement and postnatal care for 9 days with surgical induction of labour; requiring major regional or field block (including abdominal; brachial plexus; caudal; cervical plexus; epidural (peridural); paravertebral (thoracic or lumbar); pudendal; sacral; spinal) (G) | 77.50 | 75.00 | 71.50 | 65.00 | 65.00 | 64.00 |
| 233 | Antenatal care, confinement and postnatal care for 9 days with surgical induction of labour; requiring major regional or field block (including abdominal; brachial plexus; caudal; cervical plexus; epidural (peridural); paravertebral (thoracic or lumbar); pudendal; sacral; spinal) (S) | 127.50 | 105.00 | 96.50 | 105.00 | 95.00 | 84.00 |
| 235 | Caesarean section and postnatal care for 9 days (G) | 80.00 | 80.00 | 70.00 | 70.00 | 70.00 | 60.00 |
| 236 | Caesarean section and postnatal care for 9 days (S) | 120.00 | 100.00 | 100.00 | 90.00 | 100.00 | 70.00 |
| 243 | Treatment of habitual miscarriage by injection of hormones—each injection up to a maximum of 12 injections | 2.80 | 2.00 | 2.10 | 2.35 | 2.40 | 2.10 |
| 247 | Threatened abortion, threatened miscarriage or hyperemesis gravidarum, requiring admission to hospital, treatment of—each attendance | 2.80 | 2.00 | 2.50 | 2.35 | 2.40 | 2.10 |
| 251 | Cervix, purse string ligation of, for threatened miscarriage (G) | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 |
| 252 | Cervix, purse string ligation of, for threatened miscarriage (S) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 255 | Cervix, removal of purse string ligature of, under general anaesthesia (G) | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 256 | Cervix, removal of purse string ligature of, under general anaesthesia (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 259 | Pre-eclampsia, eclampsia or antepartum haemorrhage, treatment of— each attendance | 2.80 | 2.00 | 2.50 | 2.35 | 2.40 | 2.10 |
| 260 | Amnioscopy | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 261 | Amnioscopy with surgical induction of labour | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 263 | Amniocentesis | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 265 | Version, external or internal, under anaesthesia (G) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 268 | Version, external or internal, under anaesthesia (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 271 | Surgical induction of labour | 11.00 | 10.00 | 10.50 | 10.00 | 10.00 | 10.00 |

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|  |  | | Fees |  |  |  |  |  |
| Item No. | Medical service | | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | | $ | $ | $ | $ | $ | $ |
| 275 | Decapitation, craniotomy, cleidotomy or evisceration of foetus or any two or more of those services | | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 279 | Evacuation by intrauterine manual removal of the products of conception such as retained foetus, placenta, membranes or mole | | 16.50 | 12.00 | 12.50 | 12.50 | 12.50 | 12.00 |
| 283 | Manipulative correction of acute inversion of uterus, with or without incision of cervix | | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 |
| 287 | Postpartum haemorrhage requiring special procedures such as packing, treatment of (G) | | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 288 | Postpartum haemorrhage requiring special procedures such as packing, treatment of (S) | | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 291 | Third degree tear, repair of, involving anal sphincter muscles 70 | | 22.00 | 20.00 | 22.00 | 20.00 | 20.00 | 20.00 |
| PART 3—ANAESTHETICS | | | | | | | | |
| *Division 1— Anaesthetics other than Gaseous Anaesthetics not Covered by an Item in any other Part of this Schedule* | | | | | | | | |
| 301 | | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees specified in this table, does not exceed $25 (G) | 6.50 | 8.00 | 7.50 | 6.50 | 7.50 | 7.00 |
| 302 | | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees specified in this table, does not exceed $25 (S) | 8.50 | 9.50 | 9.00 | 8.00 | 9.00 | 8.50 |
| 305 | | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees specified in this table, exceeds $25, but does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania(G) | 9.00 | 10.00 | 10.50 | 10.00 | 12.00 | 12.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 306 | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $25, but does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania (S) | 11.00 | 12.00 | 12.50 | 12.00 | 14.00 | 14.00 |
| 309 | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 (G) | 16.50 | 16.00 | 16.00 | 15.00 | 16.00 | 15.00 |
| 310 | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 (S) | 20.00 | 19.00 | 19.00 | 18.00 | 19.00 | 18.00 |
| 313 | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 317 | Administration of an anaesthetic (not including an anaesthetic referred to in Division 2 of this Part) in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $140 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 321 | Administration of an anaesthetic other than gaseous, in addition to a gaseous anaesthetic referred to in Division 2 of this part | 3.50 | 3.00 | 3.00 | 2.50 | 2.50 | 3.00 |
| 323 | Administration of neuroleptal analgesia | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| *Division 2—Gaseous Anaesthetics* | | | | | | | |
| 341 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table, does not exceed $25 (G) | 10.00 | 10.00 | 10.50 | 9.00 | 10.00 | 10.00 |
| 342 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services for which the fee, or the aggregate of the fees specified in this table, does not exceed $25 (S) | 12.00 | 12.00 | 12.50 | 11.00 | 12.50 | 12.00 |
| 344 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services for which the fee, or the aggregate of the fees specified in this table, exceeds $25, but does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania (G) | 13.00 | 12.50 | 12.50 | 12.00 | 12.00 | 12.50 |
| 345 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services for which the fee, or the aggregate of the fees specified in this table, exceeds $25, but does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania (S) | 16.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 347 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 (G) | 19.00 | 20.00 | 19.00 | 18.00 | 18.00 | 18.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 348 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 (S) | 23.00 | 24.00 | 23.00 | 22.00 | 22.00 | 22.00 |
| 351 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceeds 140 (G) | 20.00 | 22.00 | 22.00 | 20.00 | 22.00 | 22.00 |
| 352 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140 (S) | 24.00 | 26.00 | 26.00 | 24.00 | 26.00 | 26.00 |
| 355 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $140 but does not exceed $200 | 33.00 | 35.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 357 | Administration of an anaesthetic in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $200 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| *Division 3—Groupings of Anaesthetics and Related Procedures* | | | | | | | |
| 370 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table does not exceed $25 (G) | 13.50 | 13.00 | 13.50 | 11.50 | 12.50 | 13.00 |
| 371 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table does not exceed $25 (S) | 15.50 | 15.00 | 15.50 | 13.50 | 15.00 | 15.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 375 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $25, but does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44.00 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania (G) | 16.50 | 15.50 | 15.50 | 14.50 | 14.50 | 15.50 |
| 376 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $25, but does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania (S) | 19.50 | 18.00 | 18.00 | 17.50 | 17.50 | 18.00 |
| 378 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 (G) | 22.50 | 23.00 | 22.00 | 20.50 | 20.50 | 21.00 |
| 379 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 (S) | 26.50 | 27.00 | 26.00 | 24.50 | 24.50 | 25.00 |

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|  |  | Fees |  |  | No. 42 235 |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 381 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140 (G) | 23.50 | 25.00 | 25.00 | 22.50 | 24.50 | 25.00 |
| 382 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140 (S) | 27.50 | 29.00 | 29.00 | 26.50 | 28.50 | 29.00 |
| 384 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $140 but does not exceed $200 | 36.50 | 38.00 | 36.00 | 35.50 | 35.50 | 36.00 |
| 386 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $200 | 48.50 | 48.00 | 48.00 | 47.50 | 47.50 | 48.00 |
| 388 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90; and intravenous or subcutaneous infusion or injection of fluids—percutaneous (G) | 28.00 | 28.00 | 27.00 | 25.50 | 25.50 | 26.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 389 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90; and intravenous or subcutaneous infusion or injection of fluids—percutaneous (S) | 32.00 | 32.00 | 31.00 | 29.50 | 29.50 | 30.00 |
| 391 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140; and intravenous or subcutaneous infusion or injection of fluids—percutaneous (G) | 29.00 | 30.00 | 30.00 | 27.50 | 29.50 | 30.00 |
| 392 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140; and intravenous or subcutaneous infusion or injection of fluids—percutaneous (S) | 33.00 | 34.00 | 34.00 | 31.50 | 33.50 | 34.00 |
| 394 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $140 but does not exceed $200; and intravenous or subcutaneous infusion or injection of fluids—percutaneous | 42.00 | 43.00 | 41.00 | 40.50 | 40.50 | 41.00 |

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|  |  | Fees |  |  | No. 42 237 |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 396 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90; and blood transfusion, using blood already collected (G) | 33.50 | 35.00 | 32.50 | 31.50 | 31.50 | 31.00 |
| 397 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90; and blood transfusion, using blood already collected (S) | 37.50 | 39.00 | 36.50 | 35.50 | 35.50 | 35.00 |
| 399 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table, exceeds $90 but does not exceed $140; and blood transfusion using blood already collected (G) | 34.50 | 37.00 | 35.50 | 33.50 | 35.50 | 35.00 |
| 400 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140; and blood transfusion, using blood already collected (S) | 38.50 | 41.00 | 39.50 | 37.50 | 39.50 | 39.00 |

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| Item No. | Medical service | N.S.W. | Vic. | | Qld | | S.A. | W.A. | Tas. |
|  |  | $ | $ | | $ | | $ | $ | $ |
| 402 | Administration of an anaesthetic other than gaseous, in addition to the administration of a gaseous anaesthetic, in connexion with a professional service, or a series or combination of professional services, for which the fee, or the aggregate of the fees, specified in this table, exceeds $140 but does not exceed $200; and blood transfusion, using blood already collected | 47.50 | 50.00 | | 46.50 | | 46.50 | 46.50 | 46.00 |
| *Division 4—Dental Anaesthetics* | | | | | | | | | |
| 430 | Administration by a medical practitioner of an anaesthetic, other than an endotracheal anaesthetic, in connection with a dental operation | 8.00 | 8.00 | | 8.00 | | 8.00 | 8.00 | 8.00 |
| 435 | Administration by a medical practitioner of an endotracheal anaesthetic in connection with a dental operation (G) | 13.00 | 15.00 | | 15.00 | | 12.00 | 12.00 | 12.00 |
| 436 | Administration by a medical practitioner of an endotracheal anaesthetic in connection with a dental operation (S) | 15.50 | 18.00 | | 18.00 | | 14.50 | 14.50 | 14.50 |
| PART 4—REGIONAL NERVE OR FIELD BLOCK | | | | | | | | | |
| 451 | Initial major regional or field block, including abdominal; brachial plexus; caudal; cervical plexus; epidural (peridural); paravertebral (thoracic or lumbar); pudendal; sacral; spinal | 16.50 | 15.00 | | 16.00 | | 15.00 | 15.00 | 14.00 |
| 452 | Subsequent major regional or field block, including abdominal; brachial plexus; caudal; cervical plexus; epidural (peridural); paravertebral (thoracic or lumbar); pudendal; sacral; spinal | 11.50 | 10.00 | | 11.00 | | 10.00 | 10.00 | 9.00 |
| 455 | Intravenous regional anaesthesia of limb by retrograde perfusion (G) | 11.50 | 11.50 | | 11.50 | | 11.50 | 11.50 | 11.50 |
| 456 | Intravenous regional anaesthesia of limb by retrograde perfusion (S) | 15.00 | 15.00 | | 15.00 | | 15.00 | 15.00 | 15.00 |
| PART 5—ASSISTANCE IN ADMINISTRATION OF AN ANAESTHETIC | | | | | | | | | |
| 501 | Assistance in the administration of an anaesthetic in connexion with a professional service, or a series of combination of professional services, for which the fee, or the aggregate of the fees specified in this table exceeds $165 | 12.00 | 12.00 | | 12.00 | | 12.00 | 12.00 | 12.00 |
| PART 6—MISCELLANEOUS PROCEDURES | | | | | | | | | |
| 601 | Electrocardiography, phonocardiography, stethography or ballistocardiography | 7.00 | | 8.00 | | 7.80 | 6.00 | 6.00 | 6.00 |

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|  |  | Fees | |  | |  |  |  |  |
| Item No. | Medical service | N.S.W. | | Vic. | | Qld | S.A. | W.A. | Tas. |
|  | | | $ | | $ | $ | $ | $ | $ |
| 611 | Continuous electrocardiographic monitoring during anaesthesia | | 8.80 | | 8.50 | 7.80 | 7.50 | 7.50 | 7.50 |
| 616 | Restoration of cardiac rhythm by electrical stimulation, other than in the course of cardiac surgery | | 14.00 | | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 621 | Intracardiac pressure recording at operation | | 33.00 | | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 625 | Blood pressure recording by intravenous cannula | | 30.00 | | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 631 | Ultrasonic echography, unidimensional (including echoencephalography) | | 11.00 | | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 632 | Ultrasonic cross-sectional echography bidimensional | | 30.00 | | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 641 | Electroencephalography, not covered by item 631, 632, 651 or 661 | | 16.50 | | 16.00 | 17.00 | 17.00 | 14.00 | 13.00 |
| 651 | Electroencephalography, temporosphenoidal | | 24.00 | | 24.00 | 24.00 | 24.00 | 24.00 | 24.00 |
| 661 | Electrocorticography | | 33.00 | | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 681 | Electromyography—involving estimation of nerve conduction times or stimulating response recording | | 8.20 | | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 |
| 691 | Electromyography—involving sampling of muscle activity—each attendance at which procedure is performed | | 6.60 | | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 698 | Retinal angiography—one eye | | 15.00 | | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 699 | Retinal angiography—both eyes | | 20.00 | | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 701 | Tonography, in the management of glaucoma | | 10.00 | | 7.00 | 10.50 | 10.00 | 8.00 | 8.00 |
| 703 | Provocative test or tests for glaucoma, including water drinking | | 6.00 | | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 705 | Electroretinography | | 18.00 | | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 711 | Audiogram, air conduction | | 4.50 | | 4.50 | 4.50 | 4.50 | 4.50 | 4.50 |
| 712 | Audiogram, air conduction and bone conduction | | 6.50 | | 6.50 | 6.50 | 6.50 | 6.50 | 6.50 |
| 713 | Audiogram, air conduction, bone conduction and speech | | 8.50 | | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 |
| 714 | Audiogram, air conduction, bone conduction and speech, with other cochlear tests | | 10.50 | | 10.50 | 10.50 | 10.50 | 10.50 | 10.50 |
| 723 | Caloric tests of labyrinth or labyrinths | | 7.50 | | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 725 | Electronystagmography | | 7.50 | | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 731 | Bronchospirometry, including gas analysis | | 27.50 | | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 741 | Estimation of respiratory function by spirometer or other simple techniques—each attendance at which one or more tests are performed | | 11.00 | | 10.00 | 10.50 | 9.00 | 9.00 | 8.50 |
| 751 | Estimation of respiratory function requiring complicated techniques— each attendance at which one or more tests are performed | | 15.50 | | 15.50 | 15.50 | 15.50 | 15.50 | 15.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  | | $ | $ | $ | $ | $ | $ |
| 753 | Hyperbaric oxygen therapy where the medical practitioner is not in the chamber | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 755 | Hyperbaric oxygen therapy where the medical practitioner is in the chamber | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 756 | Topical application of oxygen in hyperbaric chamber—as an independent procedure | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 757 | Administration of general anaesthesia (including oxygen administration) during hyperbaric therapy where the medical practitioner is in the chamber | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 761 | Perfusion of limb or organ using heart-lung machine or equivalent | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 771 | Whole body perfusion, cardiac by-pass, using heart-lung machine or equivalent | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 782 | Haemodialysis in hospital (where prolonged and constant medical supervision of the dialysis is required for the duration of the dialysis) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 784 | Haemodialysis in hospital (where intermittent medical supervision of the dialysis is required) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 786 | Haemodialysis in hospital (stabilised maintenance dialysis for chronic renal failure where a separate account for an attendance is not rendered under Part 1 of this Schedule) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 791 | Dialysis, peritoneal | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 801 | Induced controlled hypothermia—total body | 18.50 | 18.50 | 18.50 | 18.50 | 18.50 | 18.50 |
| 831 | Fluids, intravenous infusion of—Percutaneous | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 841 | Fluids, intravenous infusion of—by open exposure | 9.00 | 8.00 | 8.50 | 8.00 | 8.00 | 8.00 |
| 843 | Umbilical vein catheterisation with or without infusion | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 845 | Umbilical artery catheterisation with or without infusion | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 847 | Scalp vein catheterisation with or without infusion | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 851 | Intravenous infusion or injection of a substance incorporating a cytotoxic agent | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 |
| 861 | Intra-arterial infusion or injection of a substance incorporating a cytotoxic agent, preparation for | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 866 | Intralymphatic infusion or injection of a fluid containing a cytotoxic agent, with or without the incorporation of an opaque medium | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 868 | Intralymphatic insertion of needle or cannula for the purpose of introduction of radio-active material | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 871 | Blood transfusion, including collection from donor | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 881 | Blood transfusion, using blood already collected | 11.00 | 12.00 | 10.50 | 11.00 | 11.00 | 10.00 |
| 891 | Blood transfusion with venesection and complete replacement of blood, including collection from donor | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 901 | Blood transfusion with venesection and complete replacement of blood, using blood already collected | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 906 | Intrauterine foetal blood transfusion using blood already collected, including necessary amniocentesis | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 911 | Blood for purposes of transfusion, collection of, not covered by item 871 or 891 | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 |
| 915 | Blood dye—dilution indicator test …………… | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 921 | Venesection, not covered by item 891 or 901—each attendance at which venesection is performed | 3.10 | 3.10 | 3.10 | 3.10 | 3.10 | 3.10 |
| 931 | Blood specimen for pathology test, intravenous collection of, for forwarding to another medical practitioner | 2.20 | 2.50 | 2.10 | 2.00 | 2.00 | 2.00 |
| 941 | Blood for pathology test, collection of, by arterial puncture | 3.30 | 3.30 | 3.30 | 3.30 | 3.30 | 3.30 |
| 943 | Blood for pathology test, collection of, by femoral or external jugular vein puncture in infants | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 |
| 945 | Collection of specimen of sweat by iontophoresis | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 951 | Hormone or living tissue implantation—by incision | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 961 | Hormone or living tissue implantation—by cannula | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 |
| 965 | Oesophageal motility test, manometric | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 972 | Gastric hypothermia by closed circuit circulation of refrigerant in the absence of gastrointestinal haemorrhage | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 975 | Gastric hypothermia by closed circuit circulation of refrigerant for upper gastrointestinal haemorrhage | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 977 | Gastric lavage in the treatment of ingested poison | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 981 | Electroconvulsive therapy—each attendance at which treatment is given | 10.00 | 10.00 | 8.00 | 9.00 | 9.00 | 9.00 |
| 985 | Narcotherapy or similar psychiatric procedure involving intravenous injection—each attendance at which treatment is given | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | s | $ | $ | $ | $ |
| 988 | Psychotherapy (including associated consultation) by a consultant physician in the practice of his recognised specialty of psychiatry where the patient is referred to him by a medical practitioner, any session of not less than 45 minutes duration subsequent to the first attendance in a single course of treatment | 13.50 | 13.50 | 13.50 | 13.50 | 13.50 | 13.50 |
| 990 | Group psychotherapy (including associated consultation) of not less than one hour’s duration given under the continuous direct supervision of a consultant physician in the practice of his recognised specialty of psychiatry, on a group of not more than four patients where each patient is referred to him by a medical practitioner—each patient | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 992 | Group psychotherapy (including associated consultation) of not less than one hour’s duration given under the continuous direct supervision of a consultant physician in the practice of his recognised specialty of psychiatry, on a group of not less than five patients but less than ten patients where each patient is referred to him by a medical practitioner—each patient | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 |
| 994 | Group psychotherapy (including associated consultation) of not less than one hour’s duration given under the continuous direct supervision of a consultant physician in the practice of his recognised specialty of psychiatry, on a group of not less than ten patients where each patient is referred to him by a medical practitioner— each patient | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 |
| PART 7—PATHOLOGY SERVICES | | | | | | | |
| *Division 1—Blood* | | | | | | | |
| *Haematology—Erythrocytes* | | | | | | | |
| 1000 | Blood film, examination of | 2.50 | 3.00 | 2.00 | 2.00 | 2.00 | 2.00 |
| 1002 | Blood film, examination by special stains to demonstrate; basophilic stippling, foetal haemoglobin, haemoglobin H. Heinz bodies, reticulocytes, siderocytes or similar | 3.00 | 3.00 | 3.00 | 2.00 | 2.50 | 2.50 |
| 1004 | Malarial or other parasites, examination of blood for | 4.00 | 4.00 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1006 | Sickling, examination of blood for | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1008 | Haemoglobin estimation (where patient is referred by another medical practitioner for this service) | 2.50 | 2.50 | 2.00 | 2.00 | 2.00 | 2.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1010 | Haemoglobin estimation and examination of blood film | 4.50 | 5.00 | 3.50 | 3.50 | 3.50 | 3.50 |
| 1012 | Haemoglobin estimation and examination of blood film and blood grouping A, B, O and Rh | 10.00 | 11.00 | 9.00 | 8.50 | 8.50 | 8.50 |
| 1014 | Haemoglobin estimation, leucocyte count, and differential leucocyte count | 7.50 | 7.00 | 5.50 | 5.00 | 6.00 | 5.50 |
| 1016 | Haemoglobin estimation, haematocrit (packed cell volume) estimation, leucocyte count and differential leucocyte count | 8.00 | 8.50 | 7.50 | 7.00 | 8.50 | 8.00 |
| 1018 | Haemoglobin estimation, haemotocrit (packed cell volume) estimation, leucocyte count and differential leucocyte count, and erythrocyte sedimentation rate | 12.00 | 13.00 | 10.50 | 9.00 | 11.00 | 11.00 |
| 1019 | Haemoglobin estimation, erythrocyte count, haematocrit (packed cell volume) estimation, leucocyte count; one or more of these estimations or counts, when performed on a single specimen of blood simultaneously or consecutively on an automated haematology system | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1020 | Haemoglobin estimation, blood grouping, A, B, O and Rh, indirect Coombs’ test, total bilirubin and compatibility testing | 23.50 | 20.00 | 20.50 | 19.00 | 21.00 | 21.00 |
| 1022 | Erythrocyte count | 2.50 | 2.50 | 2.00 | 2.00 | 2.00 | 2.00 |
| 1024 | Erythrocyte sedimentation rate (where patient is referred by another medical practitioner for this service) | 4.00 | 4.00 | 3.00 | 2.00 | 2.50 | 2.50 |
| 1026 | Haematocrit (packed cell volume) estimation | 3.00 | 2.50 | 3.00 | 2.00 | 2.50 | 2.50 |
| 1028 | Erythrocyte fragility test, to hypotonic saline | 8.00 | 8.00 | 7.50 | 5.00 | 6.50 | 6.00 |
| 1030 | Erythrocyte fragility test, mechanical fragility | 8.00 | 8.00 | 7.50 | 5.00 | 6.50 | 6.00 |
| 1032 | Erythrocyte, autohaemolysis test | 8.00 | 8.00 | 7.50 | 5.00 | 6.50 | 6.00 |
| 1034 | Erythrocytes, estimation of mean cell diameter | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1036 | Erythrocytes, tests for enzymes, acid phosphatase or similar, each enzyme | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1038 | Erythrocytes, estimation of glutathione | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1040 | Erythrocytes, glutathione stability test | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1042 | Erythrocytes, glucose-6-phosphate dehydrogenase, pyruvate kinase deficiency, or similar, screening test | 7.00 | 7.50 | 5.00 | 5.00 | 4.50 | 4.50 |
| 1044 | Erythrocytes, glucose-6-phosphate dehydrogenase, pyruvate kinase deficiency, or similar, quantitative estimation | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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|  |  | | Fees |  |  |  |  |  |
| Item No. | Medical service | | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 1046 | Erythrocytes, test for paroxysmal nocturnal haemoglobinuria—screening test (sucrose water test) | | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 |
| 1048 | Erythrocytes, test for paroxysmal nocturnal haemoglobinuria-acid haemolysin test | | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 1050 | Erythrocytes, folate estimation of | | 10.00 | 10.00 | 10.00 | 7.50 | 6.50 | 7.00 |
| 1054 | Erythrocytes, direct Coombs’test | | 4.00 | 3.00 | 3.00 | 2.50 | 2.50 | 2.50 |
| *Haematology—Leucocytes* | | | | | | | | |
| 1060 | Leucocyte count | | 2.50 | 3.00 | 2.00 | 2.00 | 2.00 | 2.00 |
| 1062 | Leucocyte count and differential count | | 4.50 | 4.50 | 3.50 | 3.00 | 4.00 | 3.50 |
| 1063 | Differential leucocyte count | | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 |
| 1064 | Eosinophil count, wet | | 2.50 | 3.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1066 | Leucocyte agglutinins, detection of | | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1068 | Lupus erythematosus cells, examination of blood film for | | 6.50 | 6.50 | 6.00 | 5.00 | 5.00 | 5.00 |
| 1070 | Cytological sex determination from blood film | | 6.00 | 6.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1072 | Leucocyte (neutrophil) alkaline phosphatase determination | | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1074 | Leucocyte tests for phagocytic activity | | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 1076 | Blood film examination using special stains (P.A.S., Sudan black or similar) for leucocytes | | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| *Haematology—Platelets* | | | | | | | | |
| 1080 | Platelet count | | 3.00 | 3.00 | 3.00 | 2.00 | 2.50 | 2.50 |
| 1082 | Platelet agglutinin test | | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1084 | Platelet survival or life—radio-active technique | | 25.00 | 25.00 | 25.00 | 25.00 | 20.00 | 20.00 |
| *Haematology—Blood Transfusion Procedures* | | | | | | | | |
| 1090 | | Blood grouping, A, B, O and Rh (D antigen) | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1091 | Blood grouping, Rh phenotyping, examination for C, D, E, c,e and other Rh antigens (five or more antigens) | | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1092 | Blood grouping, MN or other, each system, not covered by item 1090 or 1091 | | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1094 | Compatability testing—for each bottle tested up to five bottles | | 5.00 | 4.50 | 5.00 | 4.50 | 5.00 | 5.00 |
| 1096 | Compatability testing—for each subsequent bottle tested in excess of five | | 4.00 | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 |
| 1098 | Examination of serum for Rh or other blood group antibodies—screening test | | 5.50 | 4.50 | 4.50 | 4.50 | 4.50 | 4.50 |
| 1100 | Examination of serum for Rh or other blood group antibodies—quantitative estimation | | 6.50 | 5.50 | 5.50 | 5.50 | 5.50 | 5.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1102 | Examination of serum for Rh or other blood group antibodies-screening and quantitative estimation | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 1104 | Coombs’ test—direct | 4.00 | 3.00 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1106 | Coombs’ test-indirect (if not part of Items 1094, 1096, 1098, 1100 or 1102) | 5.00 | 3.50 | 3.50 | 3.50 | 4.50 | 4.00 |
| 1108 | Examination of serum for blood group haemolysins | 6.50 | 5.50 | 5.50 | 5.50 | 5.50 | 5.50 |
| *Haematology—Haemostasis* | | | | | | | |
| 1110 | Antihaemophilic globulin, assay of, or other blood coagulation factor— quantitative | 15.00 | 15.00 | 15.00 | 12.00 | 12.00 | 12.00 |
| 1112 | Bleeding time | 2.50 | 2.50 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1114 | Coagulation time (including qualitative clot retraction) | 3.00 | 3.00 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1116 | Bleeding time, coagulation time (including qualitative clot retraction), prothrombin estimation and platelet count | 14.00 | 13.00 | 12.50 | 10.00 | 11.00 | 11.00 |
| 1118 | Clot retraction, quantitative | 5.00 | 5.00 | 5.00 | 3.50 | 4.00 | 4.00 |
| 1120 | Euglobulinlysis time, or similar | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 1122 | Fibrinogen estimation | 7.00 | 7.00 | 5.50 | 5.00 | 4.50 | 5.00 |
| 1124 | Fibrinogen titre, determination of | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1126 | Kaolin clotting time | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1128 | Platelet count | 3.00 | 3.20 | 3.00 | 2.00 | 2.50 | 2.50 |
| 1130 | Platelet adhesion test | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1132 | Platelet aggregation test, qualitative | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1134 | Platelet aggregation test, quantitative | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1136 | Platelet factor III availability | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 1138 | Prothrombin estimation | 5.00 | 4.50 | 5.00 | 4.00 | 4.50 | 4.50 |
| 1140 | Prothrombin estimation—two stage | 7.00 | 7.50 | 6.60 | 6.00 | 6.00 | 6.00 |
| 1142 | Prothrombin consumption test | 7.50 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1144 | Recalcified plasma clotting time | 5.00 | 5.00 | 5.00 | 5.00 | 4.00 | 4.50 |
| 1146 | Thrombin clotting time | 5.00 | 5.00 | 5.00 | 5.00 | 4.00 | 4.50 |
| 1148 | Thromboplastin generation screening test | 7.00 | 7.00 | 7.00 | 6.00 | 6.00 | 6.00 |
| 1150 | Thromboplastin generation test (full) | 12.00 | 12.00 | 12.00 | 10.00 | 10.00 | 10.00 |
| 1152 | Thrombin time; determination of (including test for presence of an inhibitor) | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1154 | Thrombin time serial test for fibrinogenolysis | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1156 | Thromboplastin time (partial) with or without kaolin | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| *Haematology—Miscellaneous Procedures* | | | | | | | |
| 1160 | Blood culture | 7.00 | 8.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1162 | Blood volume (dye method) | 8.00 | 8.00 | 7.50 | 6.00 | 5.50 | 6.00 |
| 1164 | Folic acid, estimation of, in serum or plasma | 9.00 | 10.00 | 8.50 | 8.50 | 7.50 | 8.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1166 | Vitamin B12, estimation of, in serum or plasma | 9.00 | 10.00 | 8.50 | 8.50 | 7.50 | 8.00 |
| 1168 | Marrow, examination of films made from aspirate | 10.00 | 11.00 | 7.00 | 9.00 | 6.00 | 8.00 |
| 1170 | Marrow examination— histopathological examination of aspirate or trephine | 11.00 | 11.00 | 9.50 | 10.00 | 10.00 | 9.00 |
| 1172 | Marrow, examination of films of by special staining, e.g. iron, P.A.S., peroxidase, Sudan black or similar | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1174 | Spectroscopic examination of blood | 5.00 | 5.50 | 5.00 | 5.00 | 4.50 | 4.50 |
| 1178 | Assay of concentration of antibiotic or chemotherapeutic agents in serum or plasma | 6.00 | 6.00 | 5.50 | 5.00 | 4.50 | 4.50 |
| *Haematology— Serology* | | | | | | | |
| 1180 | Agglutination tests, including agglutination tests for enteric fever, Brucella infection, one antigen | 5.00 | 5.00 | 3.50 | 3.00 | 3.00 | 3.00 |
| 1182 | Agglutination tests, including agglutination tests for enteric fever, Brucella infection, more than one antigen, each additional antigen | 4.00 | 4.00 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1184 | Antistreptolysin titre, determination of | 7.00 | 8.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1186 | Cold agglutinins, qualitative test | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1188 | Cold agglutinins, quantitative test | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1190 | Complement, estimation of, in serum | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1192 | Complement fixation tests for the diagnosis of gonorrhoea, hydatid infestation, or similar, each antigen | 7.00 | 7.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1194 | Complement fixation tests for the diagnosis of toxoplasmosis | 7.00 | 7.50 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1196 | Complement fixation tests to detect antibodies to other bacterial, viral, fungal or parasitic infection not covered by any other item in this Part | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1198 | Haemagglutination or haemagglutination-inhibition test for the diagnosis of a virus infection | 7.00 | 6.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1200 | Latex flocculation test, or similar test, for rheumatoid arthritis or other conditions—each test | 4.50 | 3.50 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1202 | Methylene blue dye test for toxoplasmosis | 7.50 | 7.50 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1204 | Paul Bunnell test—screening | 4.50 | 3.50 | 3.00 | 3.50 | 3.50 | 3.50 |
| 1206 | Paul Bunnell test—titre with absorptions | 8.00 | 8.00 | 6.00 | 7.00 | 7.00 | 7.00 |
| 1208 | Rose Waaler test | 7.00 | 8.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1210 | Syphilis, complement fixation tests for the diagnosis of, one antigen | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1212 | Syphilis, complement fixation tests for the diagnosis of, two antigens | 9.00 | 9.00 | 7.50 | 7.00 | 7.00 | 7.00 |
| 1214 | Syphilis, flocculation test for, Kahn, Kline, VDRL or similar, one antigen | 4.00 | 4.00 | 3.00 | 2.50 | 2.00 | 2.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1216 | Syphilis, flocculation test for, Kahn, Kline, VDRL or similar, two antigens | 5.50 | 5.50 | 4.50 | 4.00 | 3.50 | 4.00 |
| 1218 | Syphilis, fluorescent antibody test for | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| *Haematology—Chemistry* | | | | | | | |
| 1220 | Alcohol, estimation of | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 1222 | Amino acids, total estimation of | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 1224 | Amino acid pattern, qualitative (chromatography or high voltage electrophoresis), estimation of | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1226 | Amino acid pattern, quantitative (ion exchange, gas liquid chromatography), estimation of | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 1228 | Ammonia, estimation of | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 1230 | Barbiturates, quantitive estimation of | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 1232 | Bicarbonate (CO2 combining power, alkali-reserve), estimation of | 7.00 | 7.00 | 7.00 | 5.00 | 4.50 | 4.50 |
| 1234 | Carbohydrate tolerance test (fructose, galactose, glucose, lactose, sucrose) not exceeding 2 hours, each | 12.00 | 12.00 | 11.00 | 10.00 | 10.00 | 10.00 |
| 1236 | Carbohydrate tolerance test (fructose, galactose, glucose, lactose, sucrose) exceeding 2 hours but not exceeding 3 hours, each | 15.00 | 15.00 | 14.00 | 13.00 | 13.00 | 13.00 |
| 1238 | Carbohydrate tolerance test (fructose, galactose, glucose, lactose, sucrose) exceeding 3 hours, each | 18.00 | 18.00 | 17.00 | 16.00 | 16.00 | 16.00 |
| 1240 | Carboxyhaemoglobin (carbon monoxide), qualitative estimation of | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1242 | Carboxyhaemoglobin (carbon monoxide), quantitative estimation of | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1244 | Congo red test | 13.00 | 13.00 | 12.00 | 11.00 | 10.00 | 10.50 |
| 1246 | Cortisol, corticosteroids or similar, estimation of | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 1248 | Cryoglobulins—qualitative estimation of | 3.50 | 2.50 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1250 | Electrolytes, estimation of sodium, potassium, calcium, magnesium, chloride or other electrolyte—estimation of one substance | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1252 | Estimation of two substances referred to in the last preceding item | 12.00 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1254 | Estimation of three substances referred to in Item 1250 | 16.00 | 16.00 | 14.50 | 14.00 | 14.00 | 14.00 |
| 1256 | Estimation of four substances referred to in Item 1250 | 20.00 | 20.00 | 18.50 | 18.00 | 18.00 | 18.00 |
| 1258 | Estimation of five substances referred to in Item 1250 | 24.00 | 24.00 | 22.50 | 22.00 | 22.00 | 22.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1260 | Electrophoretic determination of serum or plasma for lipoprotein, protein, abnormal haemoglobin, haptoglobin, or other unspecified fractions, qualitative, each determination | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1262 | Electrophoretic determination of serum or plasma for lipoprotein, protein, abnormal haemoglobin, haptoglobin, or other unspecified fractions, quantitative, each determination | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 1264 | Enzymes (whole blood, serum or plasma), one estimation | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1266 | Enzymes (whole blood, serum or plasma), two estimations | 12.00 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1268 | Enzymes (whole blood, serum or plasma), three estimations | 16.00 | 16.00 | 14.50 | 14.00 | 14.00 | 14.00 |
| 1270 | Enzymes (whole blood, serum or plasma), four or more estimations | 20.00 | 20.00 | 18.50 | 18.00 | 18.00 | 18.00 |
| 1272 | Folic acid, estimation of | 9.00 | 10.00 | 8.50 | 8.50 | 7.50 | 8.00 |
| 1274 | Gas analysis including oxygen capacity, oxygen saturation and partial carbon dioxode(PCO2) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 1277 | Chemical analysis of blood or serum, one or more tests performed simultaneously or consecutively on a single specimen on one or more multichannel analyser systems | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1278 | Chemical tests, quantitative, of albumin, bromide, cholesterol, creatinine, globulin, glucose, phosphorus, salicylates, sulphonamides, total protein, urea, urea nitrogen, uric acid or similar substance, not covered by any other item, estimation of one substance, other than by reagent stick, strip, tablet or similar | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1280 | Two estimations of any substance or substances referred to in the last preceding item | 12.00 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1282 | Three estimations of any substance or substances referred to in Item 1278 | 16.00 | 16.00 | 14.50 | 14.00 | 14.00 | 14.00 |
| 1284 | Four estimations of any substance or substances referred to in Item 1278 | 20.00 | 20.00 | 18.50 | 18.00 | 18.00 | 18.00 |
| 1286 | Five or more estimations of any substance or substances referred to in Item 1278 | 24.00 | 24.00 | 22.50 | 22.00 | 22.00 | 22.00 |
| 1288 | Hydrogen ion concentration (pH), estimation of | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1290 | Insulin tolerance test | 14.00 | 14.00 | 12.50 | 11.50 | 11.50 | 11.50 |
| 1292 | Intravenous tolbutamide test | 14.00 | 14.00 | 12.50 | 11.50 | 11.50 | 11.50 |
| 1294 | Iron, estimation of | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1296 | Iron-binding capacity, estimation of | 5.00 | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 |
| 1298 | Iron and iron-binding capacity, estimation of | 12.00 | 12.00 | 10.50 | 10.00 | 9.50 | 9.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1301 | Liver function test (bilirubin, total; bilirubin, direct and indirect; enzymes; alkaline phosphatase, transaminase or similar; turbidity; or other liver function test not covered by any other item), any one test | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1302 | Two of any test or tests referred to in the last preceding item | 12.00 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1304 | Three of any test or tests referred to in Item 1301 | 16.00 | 16.00 | 14.50 | 14.00 | 14.00 | 14.00 |
| 1305 | Four of any test or tests referred to in Item 1301 | 20.00 | 20.00 | 18.50 | 18.00 | 18.00 | 18.00 |
| 1307 | Five or more of any test or tests referred to in Item 1301 | 24.00 | 24.00 | 22.50 | 22.00 | 22.00 | 22.00 |
| 1310 | Other unspecified liver function test not covered by any other item | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1313 | Methaemalbumin, qualitative test for | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1314 | Phenylketonuria, bacterial inhibition assay for (Guthrie test), when performed as an isolated procedure on specimens from one patient only | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 |
| 1317 | Phenylketonuria, bacterial inhibition assay for (Guthrie test), when performed simultaneously on specimens from more than one patient—test for each patient | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |
| 1319 | Protein bound iodine, estimation of | 11.50 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1322 | Proteins, chemical estimation of, total (copper sulphate method) | 4.00 | 4.00 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1325 | Protamine sulphate titration | 3.00 | 3.00 | 2.80 | 2.50 | 2.50 | 2.50 |
| 1328 | Spectroscopic examination for pigments | 5.00 | . 5.50 | 5.50 | 5.00 | 4.50 | 5.00 |
| 1331 | Thyroxine, estimation of | 12.50 | 12.50 | 10.50 | 10.00 | 9.50 | 10.50 |
| 1334 | Triglycerides, phospholipids, total lipids, estimation of each substance | 8.00 | 8.00 | 6.50 | 6.00 | 6.00 | 6.00 |
| 1337 | Estimation of any two substances referred to in the last preceding item | 13.00 | 13.00 | 11.50 | 11.00 | 11.00 | 11.00 |
| 1340 | Estimation of any three or more substances referred to in Item 1334 | 18.00 | 18.00 | 16.50 | 16.00 | 16.00 | 16.00 |
| 1343 | Triglycerides, phospholipids, total lipids, estimation of one substance and estimation of cholesterol | 13.00 | 13.00 | 10.00 | 9.00 | 9.00 | 9.00 |
| 1346 | Thyroxine, tri-iodothyronine or digoxin, free plasma estimation of | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1349 | Trace elements (copper, lead, mercury, zinc or other unspecified trace elements), estimation of | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 |
| 1352 | Vitamin A or caratenoids, estimation of | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 1355 | Vitamin B12, estimation of | 9.00 | 10.00 | 8.50 | 8.50 | 7.50 | 8.00 |
| 1358 | Assay of concentration of antibiotic or chemotherapeutic agent | 6.00 | 6.00 | 5.50 | 5.00 | 4.50 | 4.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| *Division 2—Urine* | | | | | | | |
| *Urine—Bacteriology* | | | | | | | |
| 1380 | Microscopical examination of urine concentrate (where patient is referred by another medical practitioner for this service) | 3.50 | 3.50 | 2.50 | 2.00 | 2.00 | 2.50 |
| 1382 | Microscopical examination of urine concentrate and general examination for three or more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments (where patient is referred by another medical practitioner for this service) | 4.00 | 4.00 | 3.00 | 2.50 | 2.50 | 3.00 |
| 1385 | Microscopical examination of urine concentrate and general examination for three or more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments and cultural examination of urine specimen for isolation and identification of organisms | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1388 | Microscopical examination of urine concentrate and general examination for three or more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments, cultural examination of urine specimen and antibiotic sensitivity testing, of urine organisms, up to eight antibiotics | 12.00 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1389 | Microscopical examination of urine concentrate and general examination for three or more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments, cultural examination of urine specimen and antibiotic sensitivity test of urine organism (each organism), for nine or more antibiotics | 15.00 | 15.00 | 13.50 | 13.00 | 13.00 | 13.00 |
| 1391 | Microscopical examination of urine concentrate and general examination for three or more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments, bacterial count for organisms in urine (colony count), simplified technique, and cultural examination of urine specimen for isolation and identification of organisms | 10.00 | 10.00 | 8.00 | 7.50 | 7.50 | 7.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1392 | Microscopical examination of urine concentrate and general examination for three or more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments, bacterial count for organisms in urine (colony count), simplified technique, cultural examination of urine specimen and antibiotic sensitivity of urine organisms, up to eight antibiotics | 15.00 | 15.50 | 13.00 | 12.00 | 12.00 | 12.00 |
| 1394 | Microscopical examination of urine concentrate and general examination for three of more of: reaction, specific gravity, blood, albumin, urobilinogen, sugar, acetone, bile pigments, bacterial count for organisms in urine (colony count), simplified technique, cultural examination of urine specimen and antibiotics sensitivity of urine organisms, for nine or more antibiotics | 18.00 | 18.50 | 16.00 | 15.00 | 15.00 | 15.00 |
| 1395 | Microscopical examination of urine concentrate by special stain—Ziehl Neelsen or similar | 3.00 | 3.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1397 | Microscopical examination of urine concentrate by special stain—Ziehl Neelsen or similar, and cultural examination of urine specimen for special pathogens, such as M. tuberculosis | 7.50 | 7.50 | 7.50 | 6.50 | 6.50 | 6.50 |
| 1399 | Bacterial count for organisms in urine (colony count), simplified technique | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1401 | Bacterial count for organisms in urine (colony count), poured plate technique | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1404 | Cultural examination of urine specimen, for isolation and identification of organisms | 3.50 | 3.50 | 2.80 | 2.50 | 2.50 | 2.50 |
| 1407 | Microscopical examination of urine concentrate and cultural examination of urine specimen, for isolation and identification of organisms | 7.00 | 7.00 | 5.00 | 4.50 | 4.50 | 5.00 |
| 1410 | Cultural examination of urine specimen for special pathogens, such as M. tuberculosis | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1413 | Antibiotic sensitivity of urine organism (each organism) up to eight antibiotics | 5.00 | 5.50 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1416 | Antibiotic sensitivity of urine organism (each organism) nine or more antibiotics | 8.00 | 8.50 | 8.00 | 7.50 | 7.50 | 7.50 |
| 1419 | Sensitivity testing of mycobacteria, each antibiotic | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1421 | Sensitivity testing—tube dilution, each antibiotic | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |

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|  |  | Fees |  |  | |  |  |  |
| Item No. |  |  |  |  | |  |  |  |
| Medical service | N.S.W. | Vic. | Qld | | S.A. | W.A. | Tas. |
|  | | $ | $ | $ | $ | | $ | $ |
| 1423 | Assay of concentration of antibiotic or chemotherapeutic agents in urine | 6.00 | 6.00 | 5.50 | 5.00 | | 4.50 | 4.50 |
| 1425 | Examination by animal inoculation | 10.00 | 10.00 | 10.00 | 10.00 | | 10.00 | 10.00 |
| 1428 | Addis count or quantitative estimation of sediments | 6.00 | 6.00 | 5.50 | 5.00 | | 5.00 | 5.00 |
| *Urine—Chemistry* | | | | | | | | |
| 1430 | Alcohol, quantitative estimation of | 12.50 | 12.50 | 12.50 | 12.50 | | 12.50 | 12.50 |
| 1432 | Aldosterone, estimation of | 25.00 | 25.00 | 25.00 | 25.00 | | 25.00 | 25.00 |
| 1434 | Amino acid, total estimation of | 7.00 | 7.00 | 7.00 | 7.00 | | 7.00 | 7.00 |
| 1436 | Amino acids, identification of, screening tests, by chromatography | 8.00 | 8.00 | 8.00 | 8.00 | | 8.00 | 8.00 |
| 1438 | Amino acids, identification of, qualitative pattern (high voltage electrophoresis or chromatography) | 25.00 | 25.00 | 25.00 | 25.00 | | 25.00 | 25.00 |
| 1441 | Amino-levulinic acid, estimation of | 8.50 | 8.50 | 8.50 | 8.50 | | 8.50 | 8.50 |
| 1444 | Ascorbic acid, estimation of | 7.00 | 7.00 | 6.50 | 5.00 | | 4.50 | 4.50 |
| 1447 | Barbiturates, estimation of, quantitative | 12.50 | 12.50 | 12.50 | 12.50 | | 12.50 | 12.50 |
| 1450 | Catecholamines or similar, estimation of | 11.00 | 11.00 | 10.50 | 10.00 | | 10.00 | 10.00 |
| 1453 | Chromatography of urine for separation and identification of sugars and other substances of diagnostic significance other than amino acids | 7.00 | 7.00 | 6.50 | 5.50 | | 4.50 | 5.50 |
| 1456 | Electrophoresis of urinary protein, qualitative | 9.00 | 9.00 | 8.00 | 8.00 | | 8.00 | 8.00 |
| 1459 | Chemical tests, quantitative, not covered by any other item (calcium, phosphorus, protein, sugar, urea, enzymes, uric acid or similar substance), one estimation, other than by reagent stick, strip, tablet or similar | 7.00 | 7.00 | 6.00 | 5.00 | | 5.00 | 5.00 |
| 1461 | Two estimations of any substance or substances referred to in the last preceding item | 12.00 | 12.00 | 11.00 | 10.00 | | 10.00 | 10.00 |
| 1463 | Three estimations of any substance or substances referred to in Item 1459 | 16.00 | 16.00 | 15.00 | 14.00 | | 14.00 | 14.00 |
| 1466 | Four or more estimations of any substance or substances referred to in Item 1459 | 20.00 | 20.00 | 19.00 | 18.00 | | 18.00 | 18.00 |
| 1468 | Chorionic gonadotrophins (for diagnosis of pregnancy) using immunochemical methods | 5.00 | 5.00 | 3.50 | 2.50 | | 2.50 | 2.50 |
| 1470 | Chorionic gonadotrophins (for diagnosis of pregnancy) using animals | 7.00 | 6.50 | 6.00 | 6.00 | | 6.00 | 6.00 |
| 1472 | Chorionic gonadotrophins, quantitative estimation of | 10.00 | 10.00 | 10.00 | 10.00 | | 10.00 | 10.00 |
| 1474 | Pituitary gonadotrophins, quantitative estimation of | 25.00 | 25.00 | 25.00 | 25.00 | | 25.00 | 25.00 |
| 1475 | Quantitative estimation of Luteinizing hormone using immunochemical methods | 20.00 | 20.00 | 20.00 | 20.00 | | 20.00 | 20.00 |
| 1476 | Hydroxycorticosteroids, estimation of | 10.50 | 10.50 | 10.00 | 7.50 | | 7.50 | 7.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1478 | Hydroxyindole-acetic acid, quantitative estimation of | 8.50 | 8.50 | 8.50 | 7.50 | 7.50 | 7.50 |
| 1481 | Lead, thallium, mercury or arsenic, estimation of | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 |
| 1484 | Oestrogens, total, estimation of | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1487 | Oxosteroids, estimation of | 10.50 | 10.50 | 10.00 | 7.50 | 7.50 | 7.50 |
| 1490 | Oxogenic steroids, estimation of | 10.50 | 10.50 | 10.00 | 7.50 | 7.50 | 7.50 |
| 1491 | Porphyrins, qualitative examination, other than by reagent stick, strip, tablet or similar | 5.00 | 5.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1493 | Porphyrins, quantitative examination, each substance | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1494 | Quantitative estimation of pregnanediol, pregnanetriol or similar substances | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 1495 | Qualitative estimation of substances in urine (Bence-Jones protein, hydroxy- indole-acetic acid, indican, melanogen, porphobilinogen or other similar substances not covered by any other item), each substance, other than by reagent stick, strip, tablet or similar (where patient is referred by another medical practitioner for this service) | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1496 | Spectroscopic examination for pigments | 5.00 | 5.50 | 5.00 | 5.00 | 4.50 | 4.50 |
| 1497 | Vanilmandelic acid, estimation of | 11.00 | 11.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| *Urine—Cytology* | | | | | | | |
| 1499 | Cytological examination for malignancy | 10.00 | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| *Division 3—Body Fluids* | | | | | | | |
| *Exudates including Pus, Sputum, Sweat and Amniotic, Ascitic, Cerebrospinal, Pleural, Prostatic, Seminal, Synovial and Vaginal Fluids Body Fluids—Bacteriology and Parasitology* | | | | | | | |
| 1500 | Microscopical examination-wet film | 2.50 | 2.50 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1502 | Microscopical examination—gram stain or similar | 3.00 | 3.00 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1504 | Microscopical examination, by special stains, e.g. Ziehl Neelsen or similar | 3.00 | 3.00 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1506 | Microscopical examination by dark ground illumination or phase contrast | 6.00 | 6.00 | 6.00 | 5.00 | 5.00 | 5.00 |
| 1508 | Cultural examination for, and identification of aerobic micro-organisms | 4.50 | 4.50 | 4.50 | 3.00 | 3.00 | 3.00 |
| 1511 | Cultural examination for, and identification of anaerobic microorganisms | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1513 | Cultural examination for special pathogens, such as M. tuberculosis, fungi, etc | 4.50 | 4.50 | 4.50 | 4.50 | 4.50 | 4.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1515 | Microscopical examination, gram stain or similar and cultural examination for and identification of aerobic micro-organisms | 7.50 | 7.50 | 7.00 | 5.00 | 5.00 | 5.00 |
| 1517 | Microscopical examination, gram stain or similar and cultural examination for and identification of aerobic micro-organisms and microscopical examination, by special stains, e.g. Ziehl Neelsen or similar | 10.50 | 10.50 | 9.50 | 7.00 | 7.00 | 7.00 |
| 1519 | Microscopical examination, gram stain or similar; cultural examination for and identification of aerobic microorganisms and sensitivity testing of up to eight antibiotics | 12.50 | 12.50 | 12.00 | 9.50 | 9.50 | 9.50 |
| 1521 | Microscopical examination, gram stain or similar; cultural examination for and identification of aerobic microorganisms and sensitivity testing of up to eight antibiotics and microscopical examination, by special stains, e.g. Ziehl Neelsen or similar | 15.50 | 15.50 | 14.50 | 11.50 | 11.50 | 11.50 |
| 1523 | Microscopical examination, gram stain or similar; cultural examination for and identification of aerobic microorganisms and sensitivity testing of nine or more antibiotics | 15.50 | 15.50 | 15.00 | 12.50 | 12.50 | 12.50 |
| 1525 | Microscopical examination by special stains, e.g. Ziehl Neelsen or similar; and cultural examination for special pathogens, such as M. tuberculosis, fungi, etc | 7.50 | 7.50 | 7.00 | 6.50 | 6.50 | 6.50 |
| 1527 | Examination by animal inoculation | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1529 | Autogenous vaccines, preparation of, for a single organism | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1531 | Autogenous vaccines, preparation of, for multiple organisms | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 1534 | Sensitivity testing—up to eight antibiotics | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1537 | Sensitivity testing—nine or more antibiotics | 8.00 | 8.00 | 8.00 | 7.50 | 7.50 | 7.50 |
| 1539 | Sensitivity testing—tube dilution, each antibiotic | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1541 | Sensitivity testing of mycobacteria, each antibiotic | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1543 | Assay of concentration of antibiotic or chemotherapeutic agents in body fluids | 6.00 | 6.00 | 5.50 | 5.00 | 4.50 | 4.50 |
| *Body Fluids— Vaginal and Prostatic Fluids* | | | | | | | |
| 1545 | Microscopical examination—wet film | 2.50 | 2.50 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1546 | Microscopical examination, wet film; microscopical examination gram stain or similar, cultural examination for and identification of aerobic micro-organisms | 10.00 | 10.00 | 9.50 | 7.00 | 7.00 | 7.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1548 | Microscopical examination, wet film; microscopical examination gram stain or similar; cultural examination for and identification of aerobic micro-organisms and sensitivity testing of up to eight antibiotics | 15.00 | 15.00 | 14.50 | 11.50 | 11.50 | 11.50 |
| *Body Fluids—Cerebrospinal Fluid* | | | | | | | |
| 1551 | Cell count and differential; and quantitative chemical estimation of one substance | 10.00 | 10.00 | 8.00 | 7.50 | 7.50 | 7.50 |
| 1554 | Cell count and differential; quantitative chemical estimation of one substance; and Lange colloidal gold reaction | 16.50 | 16.50 | 13.50 | 12.50 | 12.50 | 12.50 |
| 1557 | Cell count and differential; quantitative chemical estimation of one substance; Lange colloidal gold reaction; and complement fixation test for syphilis | 23.00 | 23.00 | 18.50 | 17.50 | 17.50 | 17.50 |
| 1560 | Cell count and differential; quantitative chemical estimation of one substance; and complement fixation test for syphilis | 16.50 | 16.50 | 13.00 | 12.50 | 12.50 | 12.50 |
| 1562 | Cell count and differential; and quantitative chemical estimation of two substances | 15.00 | 15.00 | 13.00 | 12.50 | 12.50 | 12.50 |
| 1564 | Cell count and differential; quantitative chemical estimation of two substances; and Lange colloidal gold reaction | 21.50 | 21.50 | 18.50 | 17.50 | 17.50 | 17.50 |
| 1566 | Cell count and differential; and quantitative chemical estimation of three substances | 19.00 | 19.00 | 17.00 | 16.50 | 16.50 | 16.50 |
| 1568 | Cell count and differential; quantitative chemical estimation of three substances; and Lange colloidal gold reaction | 25.50 | 25.50 | 22.50 | 21.50 | 21.50 | 21.50 |
| *Body Fluids—Seminal Fluid* | | | | | | | |
| 1571 | Cell count; microscopical examination, wet film; and microscopical examination, gram stain or similar | 8.50 | 8.50 | 7.50 | 6.50 | 6.50 | 6.50 |
| *Body Fluids—Serological Examination* | | | | | | | |
| 1580 | Serological procedures, not covered by any other item, to identify organisms | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1582 | Rh or similar blood group antibodies, qualitative examination for | 5.50 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1584 | Rh or similar blood group antibodies, screening and quantitative examination for | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 1586 | Flocculation tests for syphilis, rheumatoid factor or similar | 4.50 | 4.00 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1588 | Syphilis, complement fixation tests for | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1590 | Complement, estimation of | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| *Body Fluids—Chemistry* | | | | | | | |
| 1601 | Quantitative chemical estimation of one substance | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1604 | Quantitative chemical estimation of two substances | 12.00 | 12.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 1607 | Quantitative chemical estimation of three substances | 16.00 | 16.00 | 14.50 | 14.00 | 14.00 | 14.00 |
| 1609 | Quantitative chemical estimation of four or more substances | 20.00 | 20.00 | 18.50 | 18.00 | 18.00 | 18.00 |
| 1611 | Lange colloidal gold reaction | 6.50 | 6.50 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1613 | Amniotic fluid, spectroscopic examination of | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 | 8.50 |
| 1615 | Electrophoresis of protein or enzyme, qualitative | 9.00 | 9.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| *Body Fluids—Cytology* | | | | | | | |
| 1616 | Cytological examination for malignancy | 10.00 | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| *Body Fluids—Miscellaneous* | | | | | | | |
| 1621 | Cell count and differential | 3.00 | 3.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1622 | Microscopical examination of wet film | 2.50 | 2.50 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1623 | Assay of concentration of antibiotic or chemotherapeutic agent | 6.00 | 6.00 | 5.50 | 5.00 | 4.50 | 4.50 |
| 1625 | Sweat plate test | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 |
| 1627 | Huhner’s test | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1629 | Milk, human, chemical analysis of | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1631 | Calculi (gall stones, urinary calculi and other body concretions), chemical examination of | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 | 4.50 |
| *Division 4—Immunology* | | | | | | | |
| 1640 | Immunoelectrophoresis of serum, cerebrospinal fluid, urine or other body fluids—qualitative | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 1643 | Immunodiffusion for the detection of proteins in serum, cerebrospinal fluid, urine or other body fluids— quantitative—each protein | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 1645 | Radio-immunodiffusion determination of protein in serum, cerebrospinal fluid, urine or other body fluids— quantitative—each protein | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 1647 | Radio immune precipitation of globulins | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 1649 | Lymphocyte (function studies) response to phytohaemagglutinin or antigen, visual transformation | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1651 | Lymphocyte (function studies) response to phytohaemagglutinin or antigen—using radio-active techniques, estimation of | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 1653 | Skin sensitivity—induction and detection of sensitivity to chemical antigens | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| *Immunology—Tissue Antibody Detection* | | | | | | | |
| 1661 | Flocculation tests, e.g. latex—each antibody | 4.50 | 3.50 | 3.00 | 2.50 | 2.50 | 2.50 |
| 1664 | Agglutination immobilisation test | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 1667 | Tanned erythrocyte haemagglutination technique—each antibody | 7.00 | 7.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1670 | Complement fixation tests involving human tissue antibody—each antibody | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1673 | Immunofluorescent detection of tissue antibody—each antibody | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| *Division 5—Faeces* | | | | | | | |
| *Faeces—Bacteriology and Parasitology* | | | | | | | |
| 1680 | Microscopical examination of wet preparation | 2.50 | 3.50 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1682 | Microscopical examination with simple staining | 3.00 | 3.00 | 2.50 | 2.00 | 2.00 | 2.00 |
| 1684 | Microscopical examination with special staining (iron haematoxylin, trichrome or similar) | 3.00 | 3.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1686 | Microscopical examination for parasites or ova after concentration techniques | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 |
| 1688 | Identification of helminths | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1691 | Cultural examination for parasites | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1694 | Cultural examination for isolation of micro-organisms, using selective media | 6.00 | 5.00 | 4.50 | 4.50 | 5.00 | 5.00 |
| 1697 | Microscopical examination of wet preparation; and cultural examination for isolation of micro-organisms, using selective media | 8.50 | 8.50 | 7.00 | 6.50 | 7.00 | 7.00 |
| 1698 | Microscopical examination of wet preparation; microscopical examination for parasites or ova after concentration techniques; and cultural examination for isolation of microorganisms, using selective media | 12.00 | 12.00 | 10.50 | 10.00 | 10.50 | 10.50 |
| 1700 | Special cultural examination for identification of intestinal pathogenic micro-organisms, using biochemical reactions | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1701 | Microscopical examination of wet preparation; microscopical examination for parasites or ova after concentration techniques; and cultural examination for isolation of micro-organisms; using selective media, and special cultural examination for identification of intestinal pathogenic micro-organisms using biochemical reactions | 17.00 | 17.00 | 15.50 | 15.00 | 15.50 | 15.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 1703 | Identification of intestinal pathogenic micro-organisms by specific serological techniques | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1706 | Sensitivity testing (each organism) using up to eight antibiotics | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1707 | Sensitivity testing (each organism) using nine or more antibiotics | 8.00 | 8.00 | 8.00 | 7.50 | 7.50 | 7.50 |
| *Faeces—Chemistry* | | | | | | | |
| 1710 | Bilirubin, qualitative test, other than by reagent stick, strip, tablet or similar | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1712 | Chloride, estimation of | 7.00 | 7.00 | 6.00 | 5.00 | 4.50 | 5.00 |
| 1714 | Calcium, estimation of | 7.00 | 7.00 | 6.00 | 5.00 | 4.50 | 5.00 |
| 1716 | Enzyme assay for amylase, trypsin, mucinase or similar enzyme, qualitative, each substance | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1718 | Fat, total, quantitative estimation of, one estimation | 9.00 | 9.00 | 7.50 | 7.50 | 7.50 | 7.50 |
| 1720 | Fat, total, quantitative estimation of, two estimations | 18.00 | 18.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 1722 | Fat, total, quantitative estimation of, three or more estimations | 27.00 | 27.00 | 22.50 | 22.50 | 22.50 | 22.50 |
| 1724 | Fat, differential, quantitative estimation of, one estimation | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1726 | Fat, differential, quantitative estimation of, two estimations | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1728 | Fat, differential, quantitative estimation of, three or more estimations | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 1730 | Nitrogen, total, estimation of | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1732 | Occult blood, chemical tests for, other than by reagent stick, strip, tablet or similar | 3.00 | 2.50 | 2.00 | 2.00 | 2.00 | 2.00 |
| 1734 | Porphyrins, qualitative estimation of, other than by reagent stick, strip, tablet or similar | 5.00 | 5.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1736 | Porphyrins, quantitative estimation of (each substance) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1738 | Reducing substances, qualitative test other than by reagent stick, strip, tablet or similar | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1741 | Phosphorus, estimation of | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1744 | Urobilin, urobilinogen, qualitative estimation of, other than by reagent stick, strip, tablet or similar | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1746 | Urobilinogen, quantitative estimation of, other than by reagent stick, strip, tablet or similar | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| 1748 | Chemical estimation, quantitative, of any one substance not specified elsewhere, other than by reagent stick, strip, tablet or similar | 7.00 | 7.00 | 5.50 | 5.00 | 5.00 | 5.00 |
| *Division 6—Skin, Hair, Nails* | | | | | | | |
| 1761 | Microscopical examination for fungi | 4.00 | 4.00 | 4.00 | 3.50 | 3.50 | 3.50 |

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| 1764 | Microscopical and cultural examination for fungi | 7.00 | 7.00 | 7.00 | 6.00 | 6.00 | 6.00 |
| 1767 | Chemical examination (qualitative)— each substance | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| 1770 | Chemical examination (quantitative)— each substance | 7.00 | 7.00 | 6.00 | 5.00 | 5.00 | 5.00 |
| 1773 | Skin sensitivity testing for allergens, using one to twenty allergens | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1776 | Skin sensitivity testing for allergens, using more than twenty allergens | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 1779 | Skin sensitivity testing for hydatid disease (Casoni test) | 4.50 | 4.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1782 | Skin sensitivity testing for mycobacterial infection (Mantoux, Von Pirquet, Vollmer or similar test) | 4.50 | 4.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| 1785 | Skin sensitivity testing for diagnosis of disease not otherwise listed (Schick test, Frei test, Schultz-Charlton test, etc.) | 4.50 | 4.00 | 2.50 | 2.50 | 2.50 | 2.50 |
| *Division 7—Gastric and Duodenal Contents* | | | | | | | |
| *Gastric and Duodenal Contents—Bacteriology* | | | | | | | |
| 1790 | Microscopical examination for mycobacteria including collection of gastric contents | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1792 | Cultural examination for mycobacteria | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 |
| 1794 | Microscopical examination for mycobacteria including collection of gastric contents and cultural examination for mycobacteria | 10.00 | 10.00 | 10.00 | 9.50 | 9.50 | 9.50 |
| 1796 | Animal inoculation | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1798 | Sensitivity testing for mycobacteria—each antibiotic | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| *Gastric and Duodenal Contents—Chemistry* | | | | | | | |
| 1800 | Qualitative tests for barbiturate, blood, alcohol, metallic poison or similar substances—each substance | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 | 3.50 |
| 1802 | Quantitative determination of acidity, single or multiple specimens, including collection (fractional test meal) | 10.50 | 10.50 | 10.00 | 8.00 | 9.00 | 8.00 |
| 1804 | Collection of gastric juice specimens after stimulation by histamine, synthetic gastrin, alcohol or similar substance and quantitative determination of acidity | 15.00 | 15.00 | 14.50 | 12.50 | 13.50 | 12.50 |
| 1806 | Quantitative determination of bicarbonate—single determination | 7.00 | 7.00 | 7.00 | 5.00 | 4.50 | 4.50 |
| 1808 | Quantitative determinations of bicarbonate—more than one determination | 15.00 | 15.00 | 15.00 | 11.00 | 10.00 | 10.00 |
| 1810 | Quantitative determination of other substances—each substance | 7.00 | 7.00 | 7.00 | 5.00 | 4.50 | 4.50 |
| 1812 | Stomach add secretion test by ingestion of dye | 7.00 | 7.00 | 5.00 | 4.50 | 4.50 | 4.50 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| *Division 8—Morbid Anatomy* | | | | | | | |
| 1820 | Histopathological examination of biopsy material when one or two pieces of tissue are separately identified, processed and examined | 12.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1822 | Histopathological examination of biopsy material when three or four pieces of tissue are separately identified, processed and examined | 18.00 | 18.00 | 16.00 | 16.00 | 16.00 | 16.00 |
| 1824 | Histopathological examination of biopsy material when five or more pieces of tissue are separately identified, processed and examined | 24.00 | 24.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 1826 | Immediate frozen section diagnosis and histopathological examination of biopsy material when one or two pieces of tissue are separately identified, processed and examined | 24.00 | 24.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1828 | Immediate frozen section diagnosis and histopathological examination of biopsy material when three or more pieces of tissue are separately identified, processed and examined | 30.00 | 30.00 | 26.00 | 26.00 | 26.00 | 26.00 |
| *Division 9—Special Investigations (includes Collection of Specimens, Administration of Drugs and All Relevant Chemical Determinations)* | | | | | | | |
| 1840 | Acth stimulation procedure (including synacthen) using multiple plasma steroid estimation | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 1841 | Acth stimulation procedure (including synacthen) using multiple urine steroid estimation | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 1843 | Adrenaline tolerance test | 14.00 | 14.00 | 12.50 | 11.50 | 11.50 | 11.50 |
| 1846 | Arginine infusion test | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1849 | Basal metabolic rate estimation | 10.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 1850 | Bromsulphthalein retention test | 12.00 | 12.00 | 11.00 | 10.00 | 10.00 | 10.00 |
| 1852 | Carbohydrate tolerance test (e.g. glucose, fructose, galactose, lactose, sucrose, or similar) not exceeding 2 hours | 12.00 | 12.00 | 11.00 | 10.00 | 10.00 | 10.00 |
| 1853 | Bromsulphthalein infusion test of liver function | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1855 | Carbohydrate tolerance test (e.g. glucose, fructose, galactose, lactose, sucrose, or similar) exceeding 2 hours but not exceeding 3 hours | 15.00 | 15.00 | 14.00 | 13.00 | 13.00 | 13.00 |
| 1858 | Carbohydrate tolerance test (e.g. glucose, fructose, galactose, lactose, sucrose, or similar) exceeding 3 hours | 18.00 | 18.00 | 17.00 | 16.00 | 16.00 | 16.00 |
| 1861 | Congo red test | 13.00 | 13.00 | 12.00 | 11.00 | 10.00 | 10.50 |
| 1863 | Creatinine clearance test | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 1865 | Dexamethazone suppression test | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 1867 | Glucagon tolerance test | 14.00 | 14.00 | 12.50 | 11.50 | 11.50 | 11.50 |
| 1869 | Histidine loaded figlu test | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. | |
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| 1871 | Inulin clearance test | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | |
| 1873 | Metyropone suppression test | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | |
| 1875 | Para amino hippuric clearance test | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | |
| 1877 | Phenolsulphonphthalein excretion test | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | |
| 1879 | Tolbutamide tolerance test | 14.00 | 14.00 | 12.50 | 11.50 | 11.50 | 11.50 | |
| 1881 | Urea clearance test | 11.50 | 11.50 | 9.50 | 8.50 | 8.50 | 8.50 | |
| 1884 | Urea concentration test | 10.00 | 10.00 | 8.00 | 7.00 | 7.00 | 7.00 | |
| 1887 | Urine acidification test (ammonium chloride or similar) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | |
| 1889 | Vasopressin stimulation test | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | |
| 1891 | Water elimination or mosenthal kidney function test | 5.00 | 5.00 | 5.00 | 4.50 | 4.50 | 4.50 | |
| 1893 | Xylose absorption test | 11.00 | 11.00 | 10.50 | 10.00 | 10.00 | 10.00 | |
| *Division 10—Cytology* | | | | | | | |
| 1901 | Cytological examination of smears from cervix and vagina, skin or mucous membrane for pathological change | 7.00 | 7.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 1903 | Examination of sputum, urine or body fluids including bronchial, cerebrospinal, pericardial, peritoneal, or similar for malignant cells | 10.00 | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 1905 | Examination of colonic or duodenal washings for malignant cells | 10.00 | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 1907 | Examination of blood for circulating malignant cells | 15.00 | 15.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 1909 | Oesophageal cytology including collection of specimen | 12.50 | 12.50 | 11.50 | 11.50 | 11.50 | 11.50 |
| 1911 | Gastric cytology including collection of specimen | 18.00 | 18.00 | 17.00 | 17.00 | 17.00 | 17.00 |
| 1913 | Hormonal assessment by cytological examination of vaginal epithelium | 6.00 | 6.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 1915 | Cytological sex chromatin studies other than from blood film | 6.50 | 6.50 | 5.50 | 5.50 | 5.50 | 5.50 |
| *Division 11—Chromosome Studies* | | | | | | | |
| 1921 | Chromosome studies—including preparation, count and karyotyping of blood | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1923 | Chromosome studies—including preparation, count and karyotyping of marrow or other tissue | 21.00 | 21.00 | 21.00 | 21.00 | 21.00 | 21.00 |
| 1925 | Chromosome studies—including preparation, count and karyotyping of skin | 24.00 | 24.00 | 24.00 | 24.00 | 24.00 | 24.00 |
| *Division 12—Radioisotope Studies* | | | | | | | |
| 1941 | Erythrocyte radioactive uptake survival time | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 1943 | Blood volume Cr51 | 10.00 | 10.00 | 10.00 | 10.00 | 9.00 | 10.00 |
| 1945 | Radioiodine thyroid uptake | 10.00 | 10.00 | 10.00 | 10.00 | 9.00 | 9.00 |
| 1947 | Radioactive T3 test | 11.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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|  |  | $ | $ | $ | $ | $ | $ |
| 1948 | Gastrointestinal blood loss estimation with radioactive chromium involving serial examinations of stool specimens | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 1949 | Radioiodine, urinary estimation . ………… | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 1951 | Protein bound radioactive iodine test ……. | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1953 | Hormonal immunoassay by radioactive techniques, each estimation . . ……………. | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1955 | Radioactive B12 absorption test (Schilling test) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 1956 | Brain scan ……………………………….. | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 1958 | Cisternal scan ……………………………… | 42.00 | 42.00 | 42.00 | 42.00 | 42.00 | 42.00 |
| 1959 | Spinal cord scan …………………………… | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1961 | Parathyroid scan ……………………………. | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 1963 | Thyroid scan ……………………………….... | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 1965 | Mediastinal scan …………………………….. | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 1966 | Scan of lung or lungs ………………………… | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 |
| 1968 | Scan of heart and liver ……………………… | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 1969 | Heart scan …………………………………… | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 1970 | Scan of liver and lungs ……………………… | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 |
| 1971 | Liver scan …………………………………… | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 1972 | Pancreas scan ………………………………. | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 1974 | Spleen scan …………………………………. | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 1977 | Renal scan …………………………………… | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1978 | Scan of liver and spleen……………………… | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 |
| 1979 | Differential renal scan………………………. | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 1980 | Renal scan and differential renal scan……… | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 |
| 1985 | Placental scan………………………………. | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 1988 | Scan of skull ………………………………… | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1990 | Scan of vertebral column and sacrum……… | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 1992 | Scan of pelvis………………………………… | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 1994 | Scan of joint or long bone ....………………… | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1996 | Scan of bone or bones not covered by any other item in this Division ………………………… | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 1999 | Scan of region or organ not covered by any other item in this Division…………………… | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| PART 8—RADIOLOGICAL SERVICES | | | | | | | |
| *Division 1—Radiographic Examination of Extremities and Report (with or without Fluoroscopy)* | | | | | | | |
| 2011 | Digits or phalanges—all or any of either hand or either foot (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 8.00 | 8.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 2013 | Digits or phalanges—all or any of either hand or either foot (when the service is rendered by a specialist in the practice of his specialty) | 10.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 2015 | Hand, wrist, forearm, elbow or arm (elbow to shoulder) (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 8.00 | 8.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 2016 | Hand, wrist, forearm, elbow or arm (elbow to shoulder) (when the service is rendered by a specialist in the practice of his specialty) | 10.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 2019 | Hand, wrist and lower forearm; upper forearm and elbow; or elbow and arm (elbow to shoulder) (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 9.00 | 9.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 2020 | Hand, wrist and lower forearm; upper forearm and elbow; or elbow and arm (elbow to shoulder) (when the service is rendered by a specialist in the practice of his specialty) | 11.00 | 11.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 2023 | Foot, ankle, lower leg, upper leg, knee or thigh (femur) (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 8.00 | 8.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 2024 | Foot, ankle, lower leg, upper leg, knee or thigh (femur) (when the service is rendered by a specialist in the practice of his speciality) | 11.00 | 11.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 2027 | Foot, ankle and lower leg; or upper leg and knee (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 10.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 2028 | Foot, ankle and lower leg; or upper leg and knee (when the service is rendered by a specialist in the practice of his specialty) | 14.00 | 14.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| *Division 2—Radiographic Examination of Shoulder or Hip Joint and Report* | | | | | | | |
| 2041 | Shoulder region, including clavicle and scapula (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 9.00 | 9.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 2042 | Shoulder region, including clavicle and scapula (when the service is rendered by a specialist in the practice of his specialty) | 11.00 | 12.50 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2045 | Hip joint | 12.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2049 | Pelvic girdle | 15.00 | 15.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2054 | Smith-Petersen nail—insertion or similar procedure | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| *Division 3—Radiographic Examination of Head and Report* | | | | | | | |
| 2061 | Skull or mastoids | 15.00 | 16.00 | 12.50 | 12.50 | 12.50 | 12.50 |
| 2063 | Sinuses | 12.00 | 12.00 | 10.50 | 10.50 | 10.50 | 10.50 |
| 2066 | Maxilla, or orbit, or both | 12.00 | 12.00 | 10.50 | 10.50 | 10.50 | 10.50 |

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| 2069 | Mandible, malar bones or salivary calculus | 12.00 | 12.00 | 10.50 | 12.00 | 10.50 | 10.50 |
| 2073 | Nose or eye | 10.00 | 12.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 2076 | Palate or pharynx, or palate and pharynx, by direct radiography with fluoroscopic screening | 15.00 | 15.00 | 13.50 | 13.50 | 13.50 | 13.50 |
| 2081 | Larynx | 11.00 | 11.00 | 9.00 | 9.00 | 9.50 | 8.50 |
| *Division 4—Radiographic Examination of Spine and Report* | | | | | | | |
| 2090 | Spine—any one region (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 12.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2092 | Spine-any one region (when the service is rendered by a specialist in the practice of his specialty) | 16.00 | 16.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 2095 | Spine—two regions | 22.00 | 22.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 2099 | Spine—three or more regions | 30.00 | 30.00 | 24.00 | 24.00 | 24.00 | 24.00 |
| *Division 4A—Bone Age Study and Skeletal Surveys* | | | | | | | |
| 2101 | Bone age study, wrist and knee | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2104 | Skeletal survey involving four or more regions | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| *Division 5—Radiographic Examination of Thoracic Region and Report* | | | | | | | |
| 2111 | Chest (lung fields) by direct radiography (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 9.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 2113 | Chest (lung fields) by direct radiography (when the service is rendered by a specialist in the practice of his specialty) | 11.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2116 | Chest (lung fields) by direct radiography with fluoroscopic screening | 15.00 | 15.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2119 | Thoracic inlet | 10.00 | 10.00 | 9.00 | 10.00 | 10.00 | 9.50 |
| 2123 | Chest, by miniature radiography | 5.50 | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 |
| 2128 | Orthodiagraphy | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2132 | Teleoroentgenography with cardiac measurements | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2137 | Cardiac examination (including barium swallow) (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 12.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2138 | Cardiac examination (including barium swallow) (when the service is rendered by a specialist in the practice of his specialty) | 15.00 | 15.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 2141 | Sternum or one or more ribs of any one side (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 9.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |

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| 2142 | Sternum or one or more ribs of any one side (when the service is rendered by a specialist in the practice of his specialty) | 11.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2145 | One or more ribs of both sides (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 11.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2146 | One or more ribs of both sides (when the service is rendered by a specialist in the practice of his specialty) | 14.00 | 15.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| *Division 6—Radiographic Examination of Urinary Tract and Report* | | | | | | | |
| 2161 | Plain renal only | 11.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2164 | Drip-infusion pyelography | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 2170 | Intravenous pyelography, including preliminary plain film | 30.00 | 30.00 | 28.00 | 28.00 | 28.00 | 28.00 |
| 2174 | Retrograde pyelography | 16.00 | 17.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 2177 | Cystography, urethrography or vesiculography, as an independent procedure | 16.50 | 16.50 | 16.00 | 16.00 | 16.00 | 16.00 |
| 2181 | Micturating cysto-urethrography, as an independent procedure | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 2185 | Perirenal insufflation | 12.00 | 13.00 | 11.00 | 11.00 | 11.00 | 10.50 |
| *Division 7—Radiographic Examination of Alimentary Tract and Biliary System (with or without Fluoroscopy) and Report* | | | | | | | |
| 2202 | Plain abdominal only (when the service is rendered otherwise than by a specialist in the practice of his specialty) | 9.00 | 10.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 2203 | Plain abdominal only (when the service is rendered by a specialist in the practice of his specialty) | 11.00 | 12.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2205 | Pneumoperitoneum | 11.00 | 11.00 | 10.00 | 10.00 | 10.00 | 9.00 |
| 2211 | Oesophagus, with or without examination for foreign body or barium swallow | 17.00 | 17.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 2215 | Barium or other opaque meal of oesphagus, stomach and duodenum, with or without screening of chest | 22.00 | 23.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 2219 | Barium or other opaque meal of oesphagus, stomach, duodenum and follow through to colon, with or without screening of chest | 26.00 | 27.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 2222 | Barium or other opaque meal, small bowel series only | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 2227 | Opaque enema | 22.00 | 23.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 2231 | Opaque enema, including air contrast study (two stages) | 26.00 | 27.00 | 24.00 | 24.00 | 24.00 | 24.00 |
| 2235 | Graham’s test (cholecystography) | 17.00 | 20.00 | 16.00 | 16.00 | 16.00 | 16.00 |
| 2238 | Cholangiography direct, operative or post-operative | 18.00 | 19.50 | 17.00 | 17.00 | 16.00 | 16.00 |
| 2248 | Cholangiography—intravenous | 26.00 | 27.00 | 24.00 | 24.00 | 24.00 | 24.00 |

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| Item No. | Medical service | | N.S.W. | | | | | Vic. | | | | Qld | | | S.A. | | W.A. | | Tas. |
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| *Division 8—Radiographic Examination for Localisation of Foreign Bodies and Report* | | | | | | | | | | | | | | | | | | | |
| 2250 | | Foreign body in eye (special method, Sweet’s or other) | | 16.50 | | | | | 16.50 | | | 16.50 | | | 16.50 | | 16.50 | | 16.50 |
| 2254 | | Foreign body, localisation of and report, including a radiographic examination of the area concerned and report (not being a service covered by any other item in this Part) | | Amount | | | | | Amount | | | Amount | | | Amount | | Amount | | Amount |
|  | |  | | under | | | | | under | | | under | | | under | | under | | under |
|  | |  | | rule 7 | | | | | rule 7 | | | rule 7 | | | rule 7 | | rule 7 | | rule 7 |
| *Division 9—Radiographic Examination of Breasts and Report* | | | | | | | | | | | | | | | | | | | |
| 2270 | | Radiographic examination of both breasts and report | | | 20.00 | | | | 20.00 | | | 20.00 | | | 20.00 | | 20.00 | | 20.00 |
| 2274 | | Radiographic examination of one breast and report | | |  | | | |  | | |  | | |  | |  | |  |
|  | | 12.00 | | | | 12.00 | | | 12.00 | | | 12.00 | | 12.00 | | 12.00 |
| *Division 10—Radiographic Examination in Connection with Pregnancy and Report* | | | | | | | | | | | | | | | | | | | |
| 2291 | | Pregnant uterus | | | | 11.00 | | | | 12.50 | | | 10.00 | | | 10.00 | | 10.00 | 10.00 |
| 2295 | | Pelvimetry or placentography | | | | 22.00 | | | | 22.00 | | | 16.00 | | | 16.00 | | 16.00 | 16.00 |
| 2298 | | Control x-rays associated with intra | | | |  | | | |  | | |  | | |  | |  |  |
|  | | uterine foetal blood transfusion | | | | 16.50 | | | | 16.50 | | | 16.50 | | | 16.50 | | 16.50 | 16.50 |
| *Division 11—Radiographic Examination with Opaque or Contrast Media, and Report (not including any service covered by Division 16 of this Part)* | | | | | | | | | | | | | | | | | | | |
| 2310 | | Serial angiocardiography (rapid cassette changing) | | | | | 20.00 | | | | 20.00 | | | 20.00 | | 20.00 | | 20.00 | 20.00 |
| 2314 | | Serial angiocardiography (single plane—direct roll-film method) | | | | | 27.50 | | | | 27.50 | | | 27.50 | | 27.50 | | 27.50 | 27.50 |
| 2318 | | Serial angiocardiography (bi-plane— direct roll-film method) | | | | | 27.50 | | | | 27.50 | | | 27.50 | | 27.50 | | 27.50 | 27.50 |
| 2322 | | Serial angiocardiography (indirect roll-film method) | | | | | 27.50 | | | | 27.50 | | | 27.50 | | 27.50 | | 27.50 | 27.50 |
| 2326 | | Discography | | | | | 16.50 | | | | 18.00 | | | 15.00 | | 15.00 | | 18.00 | 16.50 |
| 2330 | | Dacryocystography | | | | | 12.00 | | | | 12.00 | | | 12.00 | | 12.00 | | 12.00 | 12.00 |
| 2334 | | Encephalography | | | | | 26.00 | | | | 26.00 | | | 26.00 | | 26.00 | | 26.00 | 26.00 |
| 2338 | | Intracranial angiography, one side | | | | | 20.00 | | | | 20.00 | | | 20.00 | | 20.00 | | 20.00 | 20.00 |
| 2342 | | Cerebral ventriculography | | | | | 22.00 | | | | 22.00 | | | 22.00 | | 22.00 | | 22.00 | 22.00 |
| 2347 | | Hysterosalpingography | | | | | 17.00 | | | | 17.00 | | | 13.00 | | 15.00 | | 13.00 | 13.00 |
| 2350 | | Bronchography, arteriography, phlebography, aortography or splenography | | | | | 25.00 | | | | 25.00 | | | 20.00 | | 20.00 | | 20.00 | 20.00 |
| 2354 | | Myelography | | | | | 30.00 | | | | 30.00 | | | 30.00 | | 30.00 | | 30.00 | 30.00 |
| 2359 | | Sialography or vasoepididymography | | | | | 17.00 | | | | 17.00 | | | 17.00 | | 17.00 | | 17.00 | 17.00 |
| 2362 | | Sinuses and fistulae, including a radiographic examination of the area concerned and report | | | | | Amount | | | | Amount | | | Amount | | Amount | | Amount | Amount |
|  | |  | | | | | under | | | | under | | | under | | under | | under | under |
|  | |  | | | | | rule 7 | | | | rule 7 | | | rule 7 | | rule 7 | | rule 7 | rule 7 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 2367 | Pneumarthrography, including a radiographic examination of the area concerned and report | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
| rule 7 | rule 7 | rule 7 | rule 7 | rule 7 | rule 7 |
| 2371 | Lymphangiography, including follow up radiography | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| *Division 12—Tomography and Report* | | | | | | | |
| 2410 | Tomography, any part and report | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| *Division 13—Stereoscopic Examination and Report* | | | | | | | |
| 2420 | Stereoscopic examination and report, including a radiographic examination of the area concerned and report | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 7 | rule 7 | rule 7 | rule 7 | rule 7 | rule 7 |
| *Division 14—Fluoroscopic Examination and Report* | | | | | | | |
| *(Fluoroscopic examination and report not covered by any other item in this Part—where radiograph is not taken)* | | | | | | | |
| 2440 | Examination with general anaesthesia | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 2444 | Examination without general anaesthesia | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| *Division 15—Radiotherapy* | | | | | | | |
| 2458 | Radiotherapy, superficial (including treatment by means of x-rays, or rays emitted by radium or other radioactive substances) not covered by any other item in this Part—each attendance at which one or two fields are irradiated | 7.50 | 7.00 | 7.00 | 6.50 | 6.50 | 6.50 |
| 2459 | Radiotherapy, superficial (including treatment by means of x-rays, or rays emitted by radium or other radio-active substances) not covered by any other item in this Part—each attendance at which more than two fields are irradiated | 9.00 | 8.50 | 8.50 | 8.00 | 8.00 | 8.00 |
| 2463 | Radiotherapy (other than superficial) or orthovoltage therapy (including treatment by means of X-rays, or rays emitted by radium or other radioactive substances) not covered by any other item in this Part—each attendance at which therapy is given | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 2465 | Radiotherapy (other than superficial), megavoltage therapy or telecobalt therapy not covered by any other item in this Part—each attendance at which treatment is given | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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| 2468 | | Radiotherapy, orthovoltage therapy or megavoltage therapy under hyperbaric conditions (including treatment by means of X-rays, radium rays or other radio-active substances) not covered by any other item in this Part—each attendance at which treatment is given | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| *Implantation of Radio-active Substances for Tumour* | | | | | | | | |
| 2510 | | Globe of eye | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 2514 | | Retina | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 2518 | | Lip | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 2522 | | Mount or tongue or both | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 2526 | | Bladder | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 2530 | | Prostate | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 2535 | | Cervix or corpus uteri | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 2538 | | Any region or organ not referred to in a preceding item under this heading, the implantation of which requires a major anaesthetic | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 2542 | | Any region or organ referred to in the last preceding item, the implantation of which does not require a major anaesthetic | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| *Application of Moulds of Radio-active Substances* | | | | | | | | |
| 2570 | | Alveolus, palate or antrum, each attendance at which a mould is applied | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 2574 | | Scar following radical mastectomy, each attendance at which a mould is applied | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 2578 | | Hand or other skin area or mucous membrane, each attendance at which a mould is applied | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| *Division 16—Preparation for Radiological Procedure, Being the Injection of Opaque or Contrast Media or the Removal of Fluid and its Replacement by Air, Oxygen or Other Contrast Media or Other Similar Preparation, including the Administration of an Anaesthetic for Radiotherapy* | | | | | | | | |
| 2620 | | Encephalography | 35.00 | 45.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 2624 | | Intracranial angiography-percutaneous | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 2628 | | Intracranial angiography-open exposure | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 2632 | | Cerebral ventriculography | 45.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 2636 | | Dacryocystography | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2640 | | Bronchography | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 2644 | | Aortography | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 2648 | | Arteriography-peripheral, phlebography or splenography | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2652 | | Perirenal insufflation | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2657 | | Renal cyst or cysts, aspiration with injection of radio-opaque material | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 2661 | Pneumarthrography or radiography of pneumoperitoneum | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 2666 | Drip-infusion pyelography | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 | 7.50 |
| 2671 | Hysterosalpingography | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 2674 | Discography | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2678 | Intraosseous venography | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 2683 | Myelography | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 2686 | Sinus or fistula, injection into | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 2691 | Lymphangiography | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 2696 | Administration of an anaesthetic for radiotherapy under hyperbaric conditions | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 2700 | Intracavitary administration of radioactive substances | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| PART 9—ASSISTANCE AT OPERATIONS | | | | | | | |
| 2901 | Assistance at any operation, or series or combination of operations, for which the fee, or the aggregate of the fees, specified in this table does not exceed $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 2904 | Assistance at any operation, or series or combination of operations, for which the fee, or the aggregate of the fees, specified in this table exceeds $45 where the anaesthetic is administered in New South Wales or Victoria or $44 where the anaesthetic is administered in Queensland, South Australia, Western Australia or Tasmania, but does not exceed $90 | 16.00 | 16.00 | 16.00 | 16.00 | 16.00 | 16.00 |
| 2907 | Assistance at any operation, or series or combination of operations, for which the fee, or the aggregate of the fees, specified in this table exceeds $90 but does not exceed $140 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 2910 | Assistance at any operation, or series or combination of operations, for which the fee, or the aggregate of the fees, specified in this table exceeds $140 but does not exceed $200 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 2913 | Assistance at any operation, or series or combination of operations, for which the fee, or the aggregate of the fees, specified in this table exceeds $200 but does not exceed $250 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 2915 | Assistance at any operation, or series or combination of operations, for which the fee, or the aggregate of the fees, specified in this table exceeds $250 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |

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| PART 10—OPERATIONS | | | | | | | |
| *Division 1—General Surgical* | | | | | | | |
| 3001 | Dressing of localised burns (not involving grafting)—each attendance at which the procedure is performed | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 3004 | Dressing of burns, extensive, without anaesthesia (not involving grafting)—each attendance at which the procedure is performed (G) | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 3005 | Dressing of burns, extensive, without anaesthesia (not involving grafting) each attendance at which the procedure is performed (S) | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3009 | Dressing of localised burns under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed (G) | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 |
| 3011 | Dressing of localised burns under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 3015 | Dressing of burns, extensive, under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed (G) | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 |
| 3017 | Dressing of burns, extensive, under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed (S) | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 3021 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, other than on face or neck, small (not more than 7 centimetres long), superficial, not covered by any item in Part 2 of this Schedule | 8.80 | 8.00 | 8.00 | 7.50 | 8.50 | 8.00 |
| 3025 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, other than on face or neck, small (not more than 7 centimetres long), involving deeper tissue, not covered by any item in Part 2 of this Schedule | 16.50 | 14.00 | 14.50 | 14.00 | 14.00 | 12.50 |
| 3030 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, small (not more than 7 centimetres long), superficial | 15.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 3031 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, small (not more than 7 centimetres long), superficial (D) | 15.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 3034 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, small (not more than 7 centimetres long), involving deeper tissue | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |

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| 3036 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, small (not more than 7 centimetres long), involving deeper tissue (D) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3037 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, other than on face or neck, large (more than 7 centimetres long), superficial, not covered by any item in Part 2 of this Schedule | 16.50 | 15.00 | 12.50 | 12.50 | 14.00 | 12.00 |
| 3043 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, other than on face or neck, large (more than 7 centimetres long), involving deeper tissue, not covered by any item in Part 2 of this Schedule (6) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3045 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, other than on face or neck, large (more than 7 centimetres long), involving deeper tissue, not covered by any item in Part 2 of this Schedule (S) | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 |
| 3049 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), superficial (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3051 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), superficial (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3052 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), superficial (D) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3055 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), involving deeper tissue (G) | 24.00 | 24.00 | 24.00 | 24.00 | 24.00 | 24.00 |
| 3056 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), involving deeper tissue (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3057 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), involving deeper tissue (D) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3061 | Superficial foreign body, removal of, not covered by any other item in this Part | 4.40 | 4.00 | 3.50 | 3.00 | 3.00 | 3.00 |
| 3062 | Superficial foreign body, removal of, not covered by any other item in this Part (D) | 4.40 | 4.00 | 3.50 | 3.00 | 3.00 | 3.00 |

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| 3064 | Subcutaneous foreign body, removal of, not covered by any other item in this Part (G) | 8.80 | 8.00 | 8.00 | 7.50 | 8.00 | 7.50 |
| 3065 | Subcutaneous foreign body, removal of, not covered by any other item in this Part (S) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3067 | Subcutaneous foreign body, removal of, not covered by any other item in this Part (D) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3069 | Foreign body in muscle, tendon or other deep tissue, removal of, not covered by any other item in this Part (G) | 27.50 | 27.50 | 26.50 | 25.00 | 25.00 | 25.00 |
| 3070 | Foreign body in muscle, tendon or other deep tissue, removal of, not covered by any other item in this Part (S) | 40.00 | 40.00 | 40.00 | 35.00 | 35.00 | 35.00 |
| 3071 | Foreign body in muscle, tendon or other deep tissue, removal of, not covered by any other item in this Part (D) | 40.00 | 40.00 | 40.00 | 35.00 | 35.00 | 35.00 |
| 3074 | Biopsy of skin or mucous membrane, as an independent procedure | 10.00 | 9.00 | 10.00 | 9.00 | 7.00 | 8.00 |
| 3075 | Biopsy of skin or mucous membrane, as an independent procedure (D) | 10.00 | 9.00 | 10.00 | 9.00 | 7.00 | 8.00 |
| 3078 | Biopsy of lymph gland, muscle or other deep tissue or organ, as an independent procedure (G) | 16.50 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 3080 | Biopsy of lymph gland, muscle or other deep tissue or organ, as an independent procedure (S) | 22.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3081 | Biopsy of lymph gland, muscle or other deep tissue or organ, as an independent procedure (D) | 22.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3084 | Aspiration biopsy of lymph gland, deep tissue or organ, as an independent procedure | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 3089 | Biopsy of bone marrow by trephine or burr-hole | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3093 | Biopsy of bone marrow by aspiration | 5.50 | 5.50 | 5.50 | 5.50 | 5.50 | 5.50 |
| 3094 | Punch biopsy of synovial membrane or pleura | 5.50 | 5.50 | 5.50 | 5.50 | 5.50 | 5.50 |
| 3097 | Scalene node biopsy (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 3099 | Scalene node biopsy (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3103 | Sinus, excision of, involving superficial tissues only (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 3104 | Sinus, excision of, involving superficial tissues only (S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3105 | Sinus, excision of, involving superficial tissues only (D) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3108 | Sinus, excision of, involving muscle and deep tissue (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 3110 | Sinus, excision of, involving muscle and deep tissue (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |

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| 3112 | Sinus, excision of, involving muscle and deep tissue (D) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3115 | Bursa, incision of | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3119 | Ganglion or small bursa, excision of (G) | 22.00 | 20.00 | 21.00 | 20.00 | 15.00 | 15.00 |
| 3121 | Ganglion or small bursa, excision of (S) | 40.00 | 40.00 | 30.00 | 30.00 | 30.00 | 25.00 |
| 3125 | Bursa (large), including olecranon, calcaneum or patella, excision of (G) | 52.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 3126 | Bursa (large), including olecranon, calcaneum or patella, excision of (S) | 70.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 3131 | Bursa, semimembranosus (or Baker’s cyst), excision of (G) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 3132 | Bursa, semimembranosus (or Baker’s cyst), excision of (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3137 | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter (G) | 10.00 | 9.00 | 9.00 | 9.00 | 9.00 | 8.00 |
| 3138 | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter (S) | 25.00 | 25.00 | 20.00 | 20.00 | 20.00 | 16.00 |
| 3140 | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter (D) | 25.00 | 25.00 | 20.00 | 20.00 | 20.00 | 16.00 |
| 3143 | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, more than 3 centimetres in diameter (G) | 16.50 | 15.00 | 16.00 | 15.00 | 14.00 | 15.00 |
| 3144 | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, more than 3 centimetres in diameter (S) | 25.00 | 25.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3146 | Tumour, cyst or scar removal of cutaneous, subcutaneous or in mucous membrane, more than 3 centimetres in diameter (D) | 25.00 | 25.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3149 | Tumour, cyst or scar, removal of, not covered by any other item in this Part, involving muscle, bone or other deep tissue (G) | 33.00 | 35.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 3150 | Tumour, cyst or scar, removal of, not covered by any other item in this Part, involving muscle, bone or other deep tissue (S) | 45.00 | 45.00 | 40.00 | 35.00 | 35.00 | 35.00 |
| 3152 | Tumour, cyst or scar, removal of, not covered by any other item in this Part, involving muscle, bone or other deep tissue (D) | 45.00 | 45.00 | 40.00 | 35.00 | 35.00 | 35.00 |
| 3155 | Tumour or deep cyst, removal of, not covered by any other item in this Part, requiring wide excision (G) | 50.00 | 60.00 | 50.00 | 50.00 | 50.00 | 40.00 |
| 3156 | Tumour or deep cyst, removal of, not covered by any other item in this Part, requiring wide excision (S) | 60.00 | 70.00 | 60.00 | 60.00 | 60.00 | 50.00 |

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| 3161 | Tumours, malignant, operation for, not covered by any other item in this Part, requiring wide excision and dissection of glands or involving muscle, bone or viscera(G) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3162 | Tumours, malignant, operation for, not covered by any other item in this Part, requiring wide excision and dissection of glands or involving muscle, bone or viscera (S) | 135.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3166 | Lipectomy for abdominal apron or similar condition | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 |
| 3170 | Axillary hyperidrosis, wedge excision for | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 3174 | Plantar wart, simple removal of | 8.80 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 3177 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on not more than five lesions (G) | 6.50 | 5.00 | 5.00 | 5.00 | 6.00 | 5.00 |
| 3180 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on not more than five lesions (S) | 10.00 | 12.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 3181 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on not more than five lesions (D) | 10.00 | 12.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 3184 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than five but not more than ten lesions (G) | 8.80 | 8.00 | 7.50 | 7.50 | 8.00 | 8.00 |
| 3185 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than five but not more than ten lesions (S) | 13.00 | 13.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 3190 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than ten but not more than fifteen lesions (G) | 11.00 | 10.00 | 9.00 | 10.50 | 10.50 | 10.00 |
| 3191 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than ten but not more than fifteen lesions (S) | 16.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |

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| 3196 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than fifteen but not more than twenty lesions (G) | 14.00 | 12.00 | 11.00 | 12.00 | 12.00 | 12.00 |
| 3197 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than fifteen but not more than twenty lesions (S) | 17.50 | 16.00 | 16.00 | 16.00 | 16.00 | 16.00 |
| 3201 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than twenty lesions (G) | 16.50 | 15.00 | 14.00 | 15.00 | 15.00 | 15.00 |
| 3202 | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed on more than twenty lesions (S) | 20.00 | 18.00 | 18.00 | 18.00 | 18.00 | 18.00 |
| 3204 | Skin lesions, multiple injections with hydrocortisone or similar preparation | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 3206 | Keloid, extensive, multiple injections of hydrocortisone or similar preparation under general anaesthesia (G) | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 |
| 3207 | Keloid, extensive, multiple injections of hydrocortisone or similar preparation under general anaesthesia (S) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 3211 | Haematoma, aspiration of | 4.40 | 5.00 | 3.50 | 3.50 | 3.00 | 3.50 |
| 3216 | Haematoma, furuncle, small abscess or similar lesion not requiring a general anaesthetic, incision with drainage of | 4.40 | 5.00 | 3.50 | 3.50 | 3.00 | 3.50 |
| 3220 | Large haematoma, abscess, carbuncle, cellulitis or similar lesion requiring a general anaesthetic, incision with drainage of (G) | 16.50 | 15.00 | 16.00 | 15.00 | 14.00 | 12.50 |
| 3221 | Large haematoma, abscess, carbuncle, cellulitis or similar lesion requiring a general anaesthetic, incision with drainage of (S) | 30.00 | 30.00 | 25.00 | 20.00 | 20.00 | 20.00 |
| 3222 | Large haematoma, abscess, carbuncle, cellulitis or similar lesion requiring a general anaesthetic, incision with drainage of (D) | 30.00 | 30.00 | 25.00 | 20.00 | 20.00 | 20.00 |
| 3225 | Muscle, excision of (limited) (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3226 | Muscle, excision of (limited) (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3230 | Muscle, excision of (extensive) (G) | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 |
| 3232 | Muscle, excision of (extensive) (S) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 3236 | Muscle, ruptured, repair of, not associated with external wound (G) | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 |
| 3238 | Muscle, ruptured, repair of, not associated with external wound (S) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 3242 | Fascia, deep, repair of, for herniated muscle (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |

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| 3244 | Fascia, deep, repair of, for herniated muscle (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3248 | Anatomical compartment of extremity, extensive exploration of, not involving any other procedure (G) | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 |
| 3250 | Anatomical compartment of extremity, extensive exploration of, not involving any other procedure (S) | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 3254 | Bone tumour, innocent, excision of, not covered by any other item in this Part (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 3255 | Bone tumour, innocent, excision of, not covered by any other item in this Part (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3256 | Bone tumour, innocent, excision of, not covered by any other item in this Part (D) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3259 | Styloid process of temporal bone, removal of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3263 | Parotid gland, total extirpation of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3267 | Parotid gland, removal of tumour from (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 3269 | Parotid gland, removal of tumour from (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 3273 | Parotid gland, superficial lobectomy or removal of tumour from, with exposure of facial nerve (G) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3274 | Parotid gland, superficial lobectomy or removal of tumour from, with exposure of facial nerve (S) | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3279 | Sublingual or submandibular gland, extirpation of (G) | 45.00 | 60.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 3280 | Sublingual or submandibular gland, extirpation of (S) | 60.00 | 80.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3282 | Sublingual or submandibular gland, extirpation of (D) | 60.00 | 80.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3285 | Salivary gland, incision of, or transoral ligation of salivary duct (G) | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 |
| 3286 | Salivary gland, incision of, or transoral ligation of salivary duct (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 3288 | Salivary gland, incision of, or transoral ligation of salivary duct (D) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 3291 | Salivary gland, removal of calculus from (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 3292 | Salivary gland, removal of calculus from (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3294 | Salivary gland, removal of calculus from (D) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3297 | Salivary gland, dilation or diathermy of duct (G) | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3298 | Salivary gland, dilation or diathermy of duct (S) | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 3300 | Salivary gland, dilation or diathermy of duct (D) | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |

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| 3303 | Salivary gland, removal of calculus from duct (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3304 | Salivary gland, removal of calculus from duct (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3306 | Salivary gland, removal of calculus from duct (D) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3309 | Salivary gland, repair of cutaneous fistula of | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3313 | Tongue, partial or complete excision of (G) | 97.50 | 97.50 | 97.50 | 97.50 | 97.50 | 97.50 |
| 3315 | Tongue, partial or complete excision of (S) | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3316 | Tongue, partial or complete excision of (D) | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3319 | Tongue tie, repair of | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3321 | Tongue tie, repair of (D) | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3323 | Ranula, removal of (G) | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 |
| 3324 | Ranula, removal of (S) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 3325 | Ranula, removal of (D) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 3328 | Cut throat, repair of, involving vessels or nerves, or both (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 3329 | Cut throat, repair of, involving vessels or nerves, or both (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 3334 | Cut throat, repair of, involving vessels and nerves and oesophagus or trachea (G) | 71.50 | 71.50 | 71.50 | 71.50 | 71.50 | 71.50 |
| 3335 | Cut throat, repair of, involving vessels and nerves and oesophagus or trachea (S) | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 3340 | Neck, malignant tumour of, removal of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3344 | Thymectomy | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3350 | Branchial cyst or branchial fistula, removal of (G) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3351 | Branchial cyst or branchial fistula, removal of (S) | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 3353 | Cystic hygroma, removal of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3357 | Thyroidectomy, total, or removal of parathyroid tumour | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 3361 | Thyroidectomy, sub-total (G) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3362 | Thyroidectomy, sub-total (S) | 120.00 | 140.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3367 | Thyroid, excision of localised tumour of (G)… | 64.00 | 75.00 | 64.00 | 64.00 | 64.00 | 64.00 |
| 3368 | Thyroid, excision of localised tumour of (S)…. | 85.00 | 100.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3372 | Diverticulum of pharynx or larynx, excision of (G) | 71.50 | 71.50 | 71.50 | 71.50 | 71.50 | 71.50 |
| 3373 | Diverticulum of pharynx or larynx, excision of (S) | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 3377 | Thyroglossal cyst or fistula, removal of (G)….. | 90.00 | 67.50 | 67.50 | 67.50 | 67.50 | 67.50 |

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| 3378 | Thyroglossal cyst or fistula, removal of | 120.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3383 | Cervical oesophagostomy | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3387 | Cervical oesophagostomy, closure or plastic repair of | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 3392 | Tuberculous or neoplastic glands of neck, groin or axilla, limited excision of(G) | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 |
| 3393 | Tuberculous or neoplastic glands of neck, groin, or axilla, limited excision of(S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3396 | Tuberculous or neoplastic glands of neck, groin or axilla, radical excision of | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 3402 | Operation for lymphoedema by extended indwelling subcutaneous tube or tubes | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 3406 | Simple mastectomy with or without biopsy and frozen section (G) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3408 | Simple mastectomy with or without biopsy and frozen section (S) | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 3412 | Breast, excision of cyst, fibro adenoma or other local lesion or segmental resection for any other reason (G) | 33.00 | 40.00 | 32.00 | 30.00 | 30.00 | 25.00 |
| 3414 | Breast, excision of cyst, fibro adenoma or other local lesion or segmental resection for any other reason (S) | 50.00 | 50.00 | 45.00 | 35.00 | 35.00 | 30.00 |
| 3418 | Breast, excision of cyst, fibro adenoma or other local lesion or segmental resection for any other reason, where frozen section is performed (G) | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 |
| 3419 | Breast, excision of cyst, fibro adenoma or other local lesion or segmental resection for any other reason, where frozen section is performed (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3423 | Partial mastectomy involving more than one quarter of the breast tissue with or without biopsy and frozen section (G) | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 | 48.00 |
| 3424 | Partial mastectomy involving more than one quarter of the breast tissue with or without biopsy and frozen section (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3428 | Breast, radical amputation of, with or without biopsy and frozen section (G) | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3430 | Breast, radical amputation of, with or without biopsy and frozen section (S) | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 3434 | Niggle, inverted, surgical eversion of | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3436 | Nipple, inverted, surgical eversion of (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3443 | Laparotomy (exploratory) where no other procedure is performed (G) | 65.00 | 65.00 | 60.00 | 65.00 | 60.00 | 60.00 |

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| 3445 | Laparotomy (exploratory) where no other procedure is performed (S) | 80.00 | 90.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 3446 | Laparotomy involving operation on abdominal viscera, not covered by any other item in this Part (G) | 80.00 | 75.00 | 75.00 | 75.00 | 75.00 | 65.00 |
| 3448 | Laparotomy involving operation on abdominal viscera, not covered by any other item in this Part (S) | 100.00 | 100.00 | 100.00 | 90.00 | 100.00 | 80.00 |
| 3452 | Laparotomy, exploratory, followed by enterostomy or colostomy (G) | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 |
| 3454 | Laparotomy, exploratory, followed by enterostomy or colostomy (S) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3458 | Subphrenic abscess, drainage or (G) | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 |
| 3460 | Subphrenic abscess, drainage of (S) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3464 | Liver tumour, removal of, other than by biopsy | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3469 | Liver, massive resection of, or lobectomy | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3473 | Liver abscess, abdominal drainage of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3478 | Liver abscess, transpleural drainage of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3482 | Hydatid of liver, peritoneum or viscus, operation for | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3484 | Operative cholangiography | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3486 | Cholecystectomy (G) | 110.00 | 100.00 | 100.00 | 100.00 | 85.00 | 80.00 |
| 3488 | Cholecystectomy (S) | 140.00 | 140.00 | 140.00 | 120.00 | 125.00 | 100.00 |
| 3491 | Cholecystostomy (G) | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 |
| 3492 | Cholecystostomy (S) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3497 | Choledochotomy (with or without cholecystectomy) (G) | 130.00 | 130.00 | 110.00 | 110.00 | 100.00 | 100.00 |
| 3498 | Choledochotomy (with or without cholecystectomy) (S) | 160.00 | 160.00 | 160.00 | 140.00 | 130.00 | 120.00 |
| 3501 | Reconstruction of bile duct including choledochoduodenostomy, cholecys- toduodenostomy, choledochoenterostomy, choledochogastrostomy, cholecystogastrostomy or cholecys-toenterostomy | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 3503 | Trans-duodenal sphincterotomy with or without removal of calculus from common bile duct or pancreatic duct | 140.00 | 140.00 | 140.00 | 120.00 | 110.00 | 110.00 |
| 3506 | Reconstruction of hepatic duct including anastomosis with gall-bladder or intestine | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3508 | Gastroscopy | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 3511 | Gastroscopy with biopsy | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 3513 | Gastrostomy | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3517 | Gastrostomy for fixation of indwelling oesophageal tube | 105.00 | 105.00 | 105.00 | 105.00 | 105.00 | 105.00 |
| 3523 | Vagotomy, including pyloroplasty or gastro-enterostomy | 120.00 | 135.00 | 120.00 | 120.00 | 120.00 | 110.00 |
| 3528 | Gastro-enterostomy or entero-colostomy(G) | 75.00 | 90.00 | 75.00 | 75.00 | 75.00 | 75.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 3529 | Gastro-enterostomy or entero-colostomy (S) | 100.00 | 120.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3536 | Perforated peptic ulcer, suture of (G) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3537 | Perforated peptic ulcer, suture of (S) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3539 | Partial gastrectomy, with or without gastro-jejunostomy (G) | 112.50 | 135.00 | 112.50 | 112.50 | 112.50 | 112.50 |
| 3541 | Partial gastrectomy, with or without gastro-jejunostomy (S) | 150.00 | 180.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 3545 | Gastrectomy, complete | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 3553 | Pyloroplasty (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3554 | Pyloroplasty (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3556 | Stomach, reconstruction of, by bowel transplant | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3560 | Laparotomy and division of peritoneal adhesions where no other listed intraabdominal procedure is performed (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3561 | Laparotomy and division of peritoneal adhesions where no other listed intraabdominal procedure is performed (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3566 | Enterostomy or colostomy, as an independent procedure (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3567 | Enterostomy or colostomy, as an independent procedure (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3572 | Enterostomy or colostomy, extra-peritoneal closure of (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 3573 | Enterostomy or colostomy, extra-peritoneal closure of (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 3575 | Colostomy, intra-peritoneal closure not involving resection | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3577 | Caecostomy (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 3578 | Caecostomy (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3582 | Bowel, anastomosis of (G) | 120.00 | 135.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3583 | Bowel, anastomosis of(S) | 160.00 | 180.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 3588 | Intussusception, reduction of, by fluid (G) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 3589 | Intussusception, reduction of, by fluid (S) | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 3593 | Intussusception, laparotomy and reduction of (G) | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 |
| 3594 | Intussusception, laparotomy and reduction of (S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3598 | Intussusception, laparotomy and resection of (G) | 120.00 | 135.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3599 | Intussusception, laparotomy and resection of (S) | 160.00 | 180.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 3607 | Laparotomy with reduction of volvulus | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3608 | Laparotomy with reduction of volvulus | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3609 | Meckel’s diverticulum, removal of (G) | 71.50 | 71.50 | 71.50 | 71.50 | 71.50 | 71.50 |

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| 3610 | Meckel’s diverticulum, removal of (S) | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 3614 | Bowel or viscera, resection of, with or without anastomosis, not covered by any other item in this Part (G) | 120.00 | 135.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3615 | Bowel or viscera, resection of, with or without anastomosis, not covered by any other item in this Part (S) | 160.00 | 180.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 3620 | Enterolysis with intestinal plication, Noble type | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3623 | Appendicectomy, not covered by Item 3629 (G) | 65.00 | 60.00 | 60.00 | 60.00 | 60.00 | 55.00 |
| 3627 | Appendicectomy, not covered by Item 3629 (S) | 75.00 | 80.00 | 80.00 | 70.00 | 75.00 | 65.00 |
| 3629 | Appendicectomy, when performed in conjunction with any other intraabdominal procedure (other than that covered by Items 3577 or 3578) through the same incision | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3630 | Drainage of appendiceal abscess, or for ruptured appendix or for peritonitis with or without appendicectomy (G) | 67.50 | 67.50 | 67.50 | 67.50 | 67.50 | 67.50 |
| 3632 | Drainage of appendiceal abscess, or for ruptured appendix or for peritonitis with or without appendicectomy (S) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3636 | Small bowel intubation with biopsy | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 3640 | Small bowel intubation—as an independent procedure | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3645 | Pancreas, partial excision of | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3649 | Pancreas, drainage of (G) | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 |
| 3651 | Pancreas, drainage of (S) | 75.00 | 75.00 | 75.00 | 75.00 | 7.500 | 75.00 |
| 3657 | Splenectomy (G) | 90.00 | 101.50 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3658 | Splenectomy (S) | 120.00 | 135.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3661 | Ruptured viscus (including liver, spleen or kidney), repair of (G) | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 |
| 3662 | Ruptured viscus (including liver, spleen or kidney), repair of(S) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3667 | Retroperitoneal tumour, removal of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3671 | Retroperitoneal abscess, drainage of, not involving laparotomy | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3675 | Peritoneoscopy | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3680 | Paracentesis abdominis (G) | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 3681 | Paracentesis abdominis (S) | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 3684 | Total collectomy with ileo-rectal anastomosis | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 3686 | Abdomino-perineal resection (Miles’ technique) | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3687 | Abdomino-perineal resection, combined synchronous operation—abdominal resection | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 3688 | Abdomino-perineal resection combined synchronous operation—perineal resection | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 3689 | Proctocolectomy complete, with ileostomy | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 3692 | Femoral or inguinal hernia (other than recurrent), repair of (G) | 65.00 | 65.00 | 60.00 | 60.00 | 60.00 | 50.00 |
| 3693 | Femoral or inguinal hernia (other than recurrent), repair of (S) | 80.00 | 80.00 | 80.00 | 70.00 | 85.00 | 60.00 |
| 3696 | Diaphragmatic hernia, traumatic, repair of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3700 | Diaphragmatic hernia, other than traumatic, repair of | 180.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 3704 | Umbilical hernia, repair of, in person under 10 years of age (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 3705 | Umbilical hernia, repair of, in person under 10 years of age (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3709 | Umbilical hernia, repair of, in person 10 years of age or over (G) | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 |
| 3710 | Umbilical hernia, repair of, in person 10 years of age or over(S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3714 | Ventral, incisional, lumbar or recurrent hernia, repair of (G) | 75.00 | 75.00 | 75.00 | 70.00 | 65.00 | 65.00 |
| 3716 | Ventral, incisional, lumbar or recurrent hernia, repair of (S) | 90.00 | 90.00 | 90.00 | 80.00 | 90.00 | 75.00 |
| 3720 | Hydrocele, tapping of (G) | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 3721 | Hydrocele, tapping of (S). | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3726 | Hydrocele, removal of (G) | 40.00 | 50.00 | 45.00 | 40.00 | 40.00 | 40.00 |
| 3727 | Hydrocele, removal of (S) | 50.00 | 60.00 | 60.00 | 50.00 | 50.00 | 50.00 |
| 3728 | Hydrocele, operation for, by inguinal approach with removal of patent processus vaginalis (G) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3729 | Hydrocele, operation for, by inguinal approach with removal of patent processus vaginalis (S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3731 | Varicocele removal of(G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 3732 | Varicocele, removal of (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 3736 | Orchidectomy (simple) (G) | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 |
| 3737 | Orchidectomy (simple) (S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3741 | Undescended testis, transplantation of, with or without associated hernial repair (G) | 65.00 | 65.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3742 | Undescended testis, transplantation of, with or without associated hernial repair (S) | 85.00 | 85.00 | 75.00 | 70.00 | 75.00 | 70.00 |
| 3746 | Secondary detachment of testis from thigh (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 3747 | Secondary detachment of testis from thigh (S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3751 | Circumcision of person under 4 weeks of age | 7.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 3755 | Circumcision of person under 10 years of age but not less than 4 weeks of age (G) | 11.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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| 3756 | Circumcision of person under 10 years of age but not less than 4 weeks of age (S) | 20.00 | 20.00 | 16.00 | 15.00 | 15.00 | 15.00 |
| 3760 | Circumcision of person 10 years of age or over (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 3761 | Circumcision of person 10 years of age or over (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 3765 | Paraphimosis, reduction of, under anaesthesia, with or without dorsal incision | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 3767 | Sigmoidoscopic examination (G) | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 3768 | Sigmoidoscopic examination (S) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 3771 | Sigmoidoscopy with diathermy or resection of rectal tumour or tumours (G) | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 | 27.00 |
| 3772 | Sigmoidoscopy with diathermy or resection of rectal tumour or tumours (S) | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 |
| 3773 | Sigmoidoscopic examination followed by removal, ligation or cauterisation of haemorrhoids (G) | 59.00 | 64.00 | 53.25 | 43.25 | 38.25 | 38.25 |
| 3774 | Sigmoidoscopic examination followed by removal, ligation or cauterisation of haemorrhoids (S) | 75.00 | 90.00 | 64.00 | 54.00 | 54.00 | 44.00 |
| 3776 | Full thickness rectal biopsy | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3778 | Colonic fibreoscopy | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 3779 | Colonic fibreoscopy with biopsy | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 3780 | Rectum, radical operation for prolapse of, perineal approach | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3784 | Rectum, radical operation for prolapse of, involving laparotomy | 175.00 | 175.00 | 175.00 | 175.00 | 175.00 | 175.00 |
| 3788 | Rectum, anterior resection of, involving rectosigmoidectomy, not covered by Item 3686 or 7594 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 3792 | Rectum, prolapse of, injection into | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 3796 | Rectal polyp, removal of (G) | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 |
| 3797 | Rectal polyp, removal of (S) | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 3801 | Anus, dilatation of, as an independent procedure | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 3803 | Anus, massive dilatation of, under anaesthesia (Lord’s procedure) with or without modified haemorrhoidectomy | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 3805 | Anal prolapse—circum-anal suture (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 3806 | Anal prolapse—circum-anal suture (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 3808 | Anal prolapse, submucosal injection for, under general anaesthesia | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 3811 | Anal stricture, repair of (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 3812 | Anal stricture, repair of (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 3814 | Anal sphincterotomy as an independent procedure | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |

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| Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 3817 | Haemorrhoids, injection into—each attendance at which an injection is given | 5.00 | 5.00 | 4.00 | 4.00 | 3.50 | 4.00 |
| 3821 | Haemorrhoids, incision of. | 11.00 | 10.00 | 10.50 | 10.00 | 10.00 | 10.00 |
| 3823 | Haemorrhoids, rubber band litigation of | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 3826 | Haemorrhoidectomy, radical (G) | 55.00 | 60.00 | 50.00 | 40.00 | 35.00 | 35.00 |
| 3827 | Haemorrhoidectomy, radical (S) | 70.00 | 85.00 | 60.00 | 50.00 | 50.00 | 40.00 |
| 3832 | Haemorrhoids, external, or anal tags, one or more, removal of | 15.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 3836 | Fissure in ano, excision of (G) | 22.00 | 25.00 | 20.00 | 20.00 | 20.00 | 15.00 |
| 3838 | Fissure in ano, excision of (S) | 45.00 | 60.00 | 45.00 | 35.00 | 30.00 | 30.00 |
| 3842 | Fistula in ano, subcutaneous, excision of (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 3844 | Fistula in ano, subcutaneous, excision of(S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 3848 | Fistula in ano, excision of (involving incision of external sphincter) (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 3850 | Fistula in ano, excision of (involving incision of external sphincter) (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3853 | Ischio-rectal abscess, incision of (G) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 3857 | Ischio-rectal abscess, incision of (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 3859 | Faecal fistula, repair of | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 3865 | Recto-vesical fistula, repair of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3869 | Pubo-rectalis muscle, division of | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3874 | Disimpaction of faeces under anaesthesia | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 3878 | Coccyx, excision of (G) | 49.00 | 60.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 3880 | Coccyx, excision of(S) | 65.00 | 80.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3883 | Pilonidal cyst or sinus, excision of (G) | 55.00 | 50.00 | 45.00 | 45.00 | 45.00 | 40.00 |
| 3884 | Pilonidal cyst or sinus, excision of (S) | 65.00 | 70.00 | 60.00 | 60.00 | 60.00 | 45.00 |
| 3888 | Pilonidal sinus, injection of sclerosant fluid under anaesthesia. | 18.00 | 17.00 | 17.00 | 17.00 | 17.00 | 17.00 |
| *Blood Vessels* | | | | | | | |
| 3901 | Varicose veins, injection of sclerosing solution—each attendance at which one injection is, or two or more injections, are made | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 3903 | Varicose veins, multiple simultaneous injections by continuous compression techniques (excluding after-care) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 3905 | Varicose veins, high ligation of long saphenous vein with or without retrograde injection or distal interruptions of the long saphenous vein (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 3906 | Varicose veins, high ligation of long saphenous vein with or without retrograde injection or distal interruptions of the long saphenous vein (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 3911 | Varicose veins, ligation of short saphenous vein at sapheno-popliteal junction with or without retrograde injection or distal interruptions of short saphenous vein (G) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3912 | Varicose veins, ligation of short saphenous vein at sapheno-popliteal junction with or without retrograde injection or distal interruptions of the short saphenous vein (S) | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 | 28.00 |
| 3918 | Varicose veins, high ligation and complete stripping or excision of long saphenous vein (G) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 3924 | Varicose veins, high ligation and complete stripping or excision of long saphenous vein (S) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 3928 | Varicose veins, ligation and complete stripping or excision of short saphenous vein (G) | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 3929 | Varicose veins, ligation and complete stripping or excision of short saphenous vein (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 3934 | Varicose veins, multiple excisions or ligations of subcutaneous veins (G) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 3935 | Varicose veins, multiple excisions or ligations of subcutaneous veins (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 3939 | Varicose veins, subcutaneous or subfascial ligation of perforating veins (G) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 3940 | Varicose veins, subcutaneous or subfascial ligation of perforating veins (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 3941 | Saphenous vein, crossed, by-pass | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 3945 | Intra-arterial oxygen injection | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 |
| 3949 | Vein or small artery, ligation of (G) | 5.85 | 5.85 | 5.85 | 5.85 | 5.85 | 5.85 |
| 3951 | Vein or small artery, ligation of (S) | 7.80 | 7.80 | 7.80 | 7.80 | 7.80 | 7.80 |
| 3955 | Medium artery, ligation of (G) | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 3957 | Medium artery, ligation of (S) | 18.50 | 18.50 | 18.50 | 18.50 | 18.50 | 18.50 |
| 3961 | Artery or vein, ligation of—involving deep dissection (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 3963 | Artery or vein, ligation of—involving deep dissection (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 3967 | Great vessel (including carotid, jugular, subclavian, axillary, iliac or femoral vessel), ligation of, involving gradual occlusion of vessel by mechanical device | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 3971 | Great vessel (including carotid, jugular, subclavian, axillary, iliac or femoral vessel), ligation of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 3975 | Major artery of neck or extremity, repair of wound of, with restoration of continuity | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 3979 | Major artery of trunk, repair of wound of, with restoration of continuity | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 3983 | Arteriovenous fistula, dissection and repair of | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3987 | Artery of neck or extremities, endarterectomy of | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 3991 | Innominate, subclavian, carotid or any intra-thoracic artery, endarterectomy | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 3995 | Inferior vena cava, plication of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 3999 | Repositioning of internal carotid artery | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4004 | Arterial or venous graft or by-pass | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 4008 | Arterial anastomosis | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4013 | Portal hypertension, lienorenal anastomosis for | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4017 | Portal vein anastomosis | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4022 | Embolus, removal of, from artery of neck or extremities | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4026 | Embolus, removal of, from artery of trunk | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 4031 | Thrombus, removal of, from femoral, iliac or other similar large vein | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 4034 | Transluminal angioplasty including associated radiological services and preparation | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 4035 | Carotid body or carotid body tumour, removal of, without arterial anastomosis | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 4040 | Arteriovenous shunt, external, insertion of | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 4042 | Arteriovenous shunt, external, removal of | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 4044 | Arteriovenous anastomosis, direct, of upper or lower limb | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| *Operations for acute osteomyelitis* | | | | | | | |
| 4050 | Operation on terminal phalanx of finger or toe (G) | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 4051 | Operation on terminal phalanx of finger or toe (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 4055 | Operation on phalanx other than terminal, metacarpus or metatarsus—one bone (G) | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 |
| 4056 | Operation on phalanx other than terminal, metacarpus or metatarsus—one bone (S) | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 4060 | Operation on sternum, clavicle, rib, ulna, radius, carpus, tibia, fibula, tarsus, mandible or maxilla (other than alveolar margins)—one bone (G) | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 |
| 4061 | Operation on sternum, clavicle, rib, ulna, radius, carpus, tibia, fibula, tarsus, mandible or maxilla (other than alveolar margins)—one bone (S) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |

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| 4062 | Operation on mandible or maxilla (other than alveolar margins)—one bone (D) | 39.00 | 39.00 | | 39.00 | 39.00 | 39.00 | 39.00 |
| 4065 | Operation on humerus or femur—one bone (G) | 49.00 | 49.00 | | 49.00 | 49.00 | 49.00 | 49.00 |
| 4066 | Operation on humerus or femur—one bone (S) | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 | 65.00 |
| 4070 | Operation on skull (G) | 41.50 | 41.50 | | 41.50 | 41.50 | 41.50 | 41.50 |
| 4071 | Operation on skull (S) | 55.00 | 55.00 | | 55.00 | 55.00 | 55.00 | 55.00 |
| 4075 | Operation on spine or pelvic bones—one bone (G) | 49.00 | 49.00 | | 49.00 | 49.00 | 49.00 | 49.00 |
| 4076 | Operation on spine or pelvic bones—one bone (S) | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 | 65.00 |
| *Operations for chronic osteomyelitis* | | | | | | | | |
| 4090 | Operation on nasal bones (G) | 17.50 | 17.50 | 17.50 | | 17.50 | 17.50 | 17.50 |
| 4091 | Operation on nasal bones (S) | 23.00 | 23.00 | | 23.00 | 23.00 | 23.00 | 23.00 |
| 4095 | Operation on scapula, sternum, clavicle, rib, ulna, radius, metacarpus, carpus, phalanx, tibia, fibula, metatarsus, tarsus, mandible or maxilla (other than alveolar margins)—one bone (G) | 49.00 | 49.00 | | 49.00 | 49.00 | 49.00 | 49.00 |
| 4096 | Operation on scapula, sternum, clavicle, rib, ulna, radius, metacarpus, carpus, phalanx, tibia, fibula, metatarsus, tarsus, mandible or maxilla (other than alveolar margins)—one bone (S) | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 | 65.00 |
| 4097 | Operation on mandible or maxilla, or mandible and maxilla (other than alveolar margins) (D) | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 | 65.00 |
| 4101 | Operation on humerus or femur—one bone (G) | 49.00 | 49.00 | | 49.00 | 49.00 | 49.00 | 49.00 |
| 4102 | Operation of humerus or femur—one bone (S) | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 | 65.00 |
| 4107 | Operation on spine or pelvic bones— one bone (G) | 82.50 | 82.50 | | 82.50 | 82.50 | 82.50 | 82.50 |
| 4108 | Operation on spine or pelvic bones— one bone (S) | 110.00 | 110.00 | | 110.00 | 110.00 | 110.00 | 110.00 |
| 4113 | Operation on skull (G) | 64.00 | 64.00 | | 64.00 | 64.00 | 64.00 | 64.00 |
| 4114 | Operation on skull (S) | 85.00 | 85.00 | | 85.00 | 85.00 | 85.00 | 85.00 |
| 4119 | Operation on any combination of bones referred to in Item 4095 (G) | 49.00 | 49.00 | | 49.00 | 49.00 | 49.00 | 49.00 |
| 4120 | Operation on any combination of bones referred to in Item 4096 (S) | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 | 65.00 |
| 4125 | Operation on any combination of bones not covered by Item 4119 (G) | 82.50 | 82.50 | | 82.50 | 82.50 | 82.50 | 82.50 |
| 4126 | Operation on any combination of bones not covered by Item 4120 (S) | 110.00 | 110.00 | | 110.00 | 110.00 | 110.00 | 110.00 |
| 4148 | One finger or thumb (G) | 25.00 | 25.00 | | 25.00 | 25.00 | 25.00 | 25.00 |
| 4153 | One finger or thumb (S) | 35.00 | 35.00 | | 35.00 | 35.00 | 35.00 | 35.00 |
| 4156 | Additional finger or thumb—each (G) | 4.50 | 4.50 | | 4.50 | 4.50 | 4.50 | 4.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 4157 | Additional finger or thumb—each (S) | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 4161 | Finger or thumb, including metacarpal or part of metacarpal—each digit (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 4162 | Finger or thumb, including metacarpal or part of metacarpal—each digit (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 4166 | Hand, midcarpal or transmetacarpal (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 4167 | Hand, midcarpal or transmetacarpal (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 4171 | Hand, forearm or through arm (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 4172 | Hand, forearm or through arm (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 4176 | At shoulder (G) | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 |
| 4177 | At shoulder (S) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4182 | Interscapulothoracic (G) | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 4183 | Interscapulothoracic (S) | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4188 | One toe or great toe (G) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 4189 | One toe or great toe (S) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 4194 | Additional toe or great toe—each (G) | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 4195 | Additional toe or great toe—each (S) | 6.50 | 6.50 | 6.50 | 6.50 | 6.50 | 6.50 |
| 4200 | Toe, including metatarsal or part of metatarsal—each toe (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 4201 | Toe, including metatarsal or part of metatarsal—each toe (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 4206 | Foot at ankle (Syme, Pirogoff types) (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 4207 | Foot at ankle (Syme, Pirogoff types) (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 4212 | Foot, midtarsal or transmetatarsal (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 4213 | Foot, midtarsal or transmetatarsal (S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 4218 | Through leg or at knee (G) | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 |
| 4219 | Through leg or at knee (S) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 4224 | Through thigh (G) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 4225 | Through thigh (S) | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 4230 | At hip (G) | 101.50 | 101.50 | 101.50 | 101.50 | 101.50 | 101.50 |
| 4231 | At hip (S) | 135.00 | 135.00 | 135.00 | 135.00 | 135.00 | 135.00 |
| 4236 | Hindquarter | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| *Division 3—Ear, Nose and Throat* | | | | | | | |
| 4300 | Ear, removal of foreign body in, otherwise than by simple syringing | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 4302 | Ear, removal of foreign body in, involving incision of external auditory canal | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 4304 | Aural polyp, removal of (G) | 19.00 | 19.00 | 19.00 | 19.00 | 19.00 | 19.00 |
| 4305 | Aural polyp, removal of (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 4309 | External auditory meatus, surgical removal of keratosis obturans from, not covered by any other item (G) | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 |
| 4311 | External auditory meatus, surgical removal of keratosis obturans from, not covered by any other item (S) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 4315 | External auditory meatus, removal of exostoses in | 175.00 | 175.00 | 175.00 | 175.00 | 175.00 | 175.00 |
| 4317 | Myringoplasty, trans-canal approach (Rosen incision) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4318 | Myringoplasty, post-aural or endaural approach involving enlargement of bony external canal, with or without exploration of mastoid | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 4321 | Ossicular chain reconstruction | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 4322 | Ossicular chain reconstruction and myringoplasty | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4324 | Mastoidectomy (cortical). | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 4325 | Obliteration of mastoid cavity | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 |
| 4328 | Mastoidectomy (radical or modified radical) | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 4330 | Mastoidectomy (radical or modified radical) and myringoplasty | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4331 | Mastoidectomy (radical or modified radical), myringoplasty and ossicular chain reconstruction | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 4334 | Decompression of facial nerve in its mastoid portion | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4336 | Decompression of facial nerve in its intracranial portion by intracranial or intrapetrous approach | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 4337 | Labyrinthotomy or destruction of labyrinth | 195.00 | 195.00 | 195.00 | 195.00 | 195.00 | 195.00 |
| 4339 | Endolymphatic sac, transmastoid decompression with or without drainage of | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4340 | Internal auditory meatus, exploration of, by middle cranial fossa approach with or without removal of tumour | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 4342 | Fenestration operation—each ear | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4346 | Venous graft to fenestration cavity | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4350 | Stapedectomy | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 4355 | Stapes mobilization | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 4356 | Glomus tumour, transtympanic removal of | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 4358 | Glomus tumour, transmastoid removal of, including mastoidectomy | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 4359 | Abscess or inflammation of middle ear, operation for (G) | 9.00 | 9.00 | 9.00 | 8.00 | 8.00 | 8.00 |
| 4360 | Abscess or inflammation of middle ear, operation for (S) | 15.00 | 25.00 | 16.50 | 15.00 | 15.00 | 10.00 |
| 4364 | Middle ear, exploration of. | 80.00 | 100.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 4368 | Middle ear, insertion of tube for drainage of | 45.00 | 40.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 4372 | Perforation of tympanum, cauterisation or diathermy of | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 4376 | Cholesteatoma, removal of, by suction ear toilet | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 4378 | Tympanic membrane, micro-inspection of, with or without suction removal of cholesteatoma | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 4381 | Examination of nasal cavity or postnasal space, or nasal cavity and postnasal space, under general anaesthesia, as an independent procedure | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 4384 | Nasal haemorrhage, posterior, arrest of, with posterior nasal packing with or without cauterisation and with or without anterior pack | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 4385 | Nose, removal of foreign body in, other than by simple probing | 14.50 | 14.50 | 14.50 | 14.50 | 14.50 | 14.50 |
| 4389 | Nasal polyp or polypi (simple), removal of (G) | 11.50 | 11.50 | 11.50 | 11.50 | 11.50 | 11.50 |
| 4390 | Nasal polyp or polypi (simple), removal of (S) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 4394 | Nasal polyp or polypi (requiring admission to hospital), removal of (G) | 30.00 | 30.00 | 22.50 | 22.50 | 30.00 | 22.50 |
| 4395 | Nasal polyp or polypi (requiring admission to hospital), removal of (S) | 40.00 | 40.00 | 30.00 | 30.00 | 40.00 | 30.00 |
| 4399 | Nasal septum, septoplasty or sub-mucous resection of | 80.00 | 90.00 | 60.00 | 60.00 | 80.00 | 60.00 |
| 4400 | Nasal septum, septoplasty or sub-mucous resection of, with cauterisation or diathermy of any one or more of septum or turbinates or pharynx (G) | 82.75 | 92.50 | 63.25 | 63.25 | 82.50 | 62.50 |
| 4401 | Nasal septum, septoplasty or sub-mucous resection of, with cauterisation or diathermy of any one or more of septum or turbinates or pharynx (S) | 87.50 | 100.00 | 70.00 | 67.50 | 85.00 | 65.00 |
| 4402 | Nasal septum, septoplasty or sub-mucous resection of, with turbinectomy or dislocation of turbinate | 92.50 | 102.50 | 72.50 | 72.50 | 92.50 | 72.50 |
| 4403 | Cauterisation or diathermy of septum or turbinates or pharynx—any one or more—each attendance at which the procedure is performed (G) | 5.50 | 5.00 | 6.50 | 6.50 | 5.00 | 5.00 |
| 4404 | Cauterisation or diathermy of septum or turbinates or pharynx—any one or more—each attendance at which the procedure is performed (S) | 15.00 | 20.00 | 20.00 | 15.00 | 10.00 | 10.00 |
| 4408 | Cryotherapy to nose in the treatment of nasal haemorrhage | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 4412 | Turbinectomy or dislocation of turbinate | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 4416 | Turbinates, submucous resection of | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 4418 | Maxillary antrum, proof puncture and lavage of | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 4419 | Maxillary antrum, proof puncture and lavage of (D) | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |

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|  |  | Fees |  |  |  |  |  |
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| 4422 | Maxillary antrum, lavage of—each attendance | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 4426 | Maxillary artery, transantral ligation of | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 4428 | Antrostomy (radical) | 80.00 | 100.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 4429 | Antrostomy (radical) (D) | 80.00 | 100.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 4432 | Antrostomy (radical) with transantral ethmoidectomy | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 4436 | Antrum, intranasal operation on, or removal of foreign body from | 50.00 | 50.00 | 55.00 | 40.00 | 40.00 | 40.00 |
| 4437 | Antrum, intranasal operation on, or removal of foreign body from (D) | 50.00 | 50.00 | 55.00 | 40.00 | 40.00 | 40.00 |
| 4440 | Antrum, drainage of, through tooth socket | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 4441 | Antrum, drainage of, through tooth socket (D) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 4444 | Oro-antral fistula, plastic closure of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4445 | Oro-antral fistula, plastic closure of (D) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4447 | Fronto-nasal ethmoidectomy with or without sphenoidectomy | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 |
| 4449 | Radical fronto-ethmoidectomy with osteoplastic flap | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 4450 | Frontal sinus or ethmoidal sinuses, intranasal operation on | 70.00 | 90.00 | 70.00 | 70.00 | 70.00 | 70.00 |
| 4452 | Frontal sinus, catheterisation of | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 4453 | Frontal sinus, trephine of | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 4454 | Frontal sinus, radical obliteration of | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 |
| 4456 | Ethmoidal sinuses, external operation on | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 |
| 4460 | Sphenoidal sinus, proof puncture of | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 4464 | Sphenoidal sinus, intranasal operation on | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 4468 | Transantral vidian neurectomy | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4474 | Trans-sphenoidal hypophysectomy including submucous resection of nasal septum and grafting to obliterate the pituitary fossa (including obtaining of graft) | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 4476 | Eustachian tube, catheterisation of | 7.50 | 8.50 | 7.00 | 6.50 | 6.50 | 6.50 |
| 4480 | Division of pharyngeal adhesions | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 4485 | Post-nasal space, direct examination of, with biopsy | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 4489 | Nasopharyngeal tumour, operation for removal of, involving hard palate | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 4492 | Pharyngeal pouch, removal of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 4494 | Pharyngeal pouch, endoscopic resection of (Dohlman’ s operation) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 4496 | Pharyngotomy (lateral) | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 4498 | Tonsils or tonsils and adenoids, removal of, in a person aged less than 12 years (G) | 23.00 | 25.00 | 23.00 | 23.00 | 20.00 | 23.00 |

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| 4499 | Tonsils or tonsils and adenoids, removal of, in a person aged less than 12 years (S) | 55.00 | 50.00 | 35.00 | 40.00 | 35.00 | 31.50 |
| 4501 | Tonsils or tonsils and adenoids in a person aged less than 12 years, removal of, with operation for abscess or inflammation of middle ear (G) | 27.50 | 29.50 | 27.50 | 27.00 | 24.00 | 27.00 |
| 4502 | Tonsils or tonsils and adenoids in a person aged less than 12 years, removal of, with operation for abscess or inflammation of middle ear (S) | 62.50 | 62.50 | 43.25 | 47.50 | 42.50 | 36.50 |
| 4504 | Tonsils or tonsils and adenoids in a person aged less than 12 years, removal of, with cauterisation and diathermy of any one or more of septum or turbinates or pharynx (G) | 25.75 | 27.50 | 26.25 | 26.25 | 22.50 | 25.50 |
| 4505 | Tonsils or tonsils and adenoids in a person aged less than 12 years, removal of, with cauterisation and diathermy of any one or more of septum or turbinates or pharynx (S) | 62.50 | 60.00 | 45.00 | 47.50 | 40.00 | 36.50 |
| 4507 | Tonsils or tonsils and adenoids, removal of, in a person 12 years of age or over (G) | 33.00 | 40.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 4508 | Tonsils or tonsils and adenoids, removal of, in a person 12 years of age or over (S) | 70.00 | 70.00 | 50.00 | 50.00 | 50.00 | 45.00 |
| 4516 | Tonsils or tonsils and adenoids, arrest of haemorrhage requiring general anaesthesia, following removal of (G) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 4517 | Tonsils or tonsils and adenoids, arrest of haemorrhage requiring general anaesthesia, following removal of (S) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 4519 | Adenoids, removal of (G) | 16.50 | 15.00 | 15.00 | 12.00 | 12.00 | 12.00 |
| 4520 | Adenoids, removal of (S) | 30.00 | 25.00 | 25.00 | 25.00 | 25.00 | 20.00 |
| 4525 | Adenoids, removal of, with operation for abscess or inflammation of middle ear (G) | 21.00 | 19.50 | 19.50 | 16.00 | 16.00 | 16.00 |
| 4526 | Adenoids, removal of, with operation for abscess or inflammation of middle ear (S) | 37.50 | 37.50 | 33.25 | 32.50 | 32.50 | 25.00 |
| 4528 | Lingual tonsil or lateral pharyngeal bands, removal of | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 4529 | Peritonsillar abscess (quinsy), incision of | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 4533 | Uvulotomy | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 4538 | Vallecular or pharyngeal cysts, removal of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 4541 | Oesophagoscopy | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 4545 | Oesophagoscopy, initial, with dilatation or insertion of prosthesis | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 | 67.00 |
| 4548 | Oesophagoscopy with biopsy | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 4551 | Oesophagus, removal of foreign body | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |

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| 4559 | Oesophagoscopy with dilatation or insertion of prosthesis—subsequent procedures in a single course of treatment | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | | 33.00 | |
| 4560 | Oesophageal stricture, dilatation of, without oesophagoscopy | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | | 10.00 | |
| 4562 | Laryngectomy (total) | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | | 200.00 | |
| 4564 | Laryngopharyngectomy | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | | 250.00 | |
| 4565 | Primary restoration of alimentary continuity after laryngopharyngectomy using stomach or bowel | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | | 250.00 | |
| 4567 | Larynx, direct examination of, as an independent procedure | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | | 35.00 | |
| 4571 | Larynx, direct examination of, with biopsy | 40.00 | 50.00 | 40.00 | 40.00 | 40.00 | | 40.00 | |
| 4575 | Larynx, direct examination of, with removal of tumour | 44.00 | 55.00 | 44.00 | 44.00 | 44.00 | | 44.00 | |
| 4580 | Microlaryngoscopy | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | | 45.00 | |
| 4583 | Microlaryngoscopy with removal of tumour | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | | 75.00 | |
| 4587 | Larynx, fractured, operation for | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | |
| 4591 | Larynx, external operation on, or laryngofissure | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | |
| 4596 | Arytenoid cartilage, fixation of | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | | 160.00 | |
| 4598 | Arytenoid cartilage, removal of | 135.00 | 135.00 | 135.00 | 135.00 | 135.00 | | 135.00 | |
| 4604 | Tracheostomy (G) | 34.00 | 34.00 | 34.00 | 34.00 | 34.00 | | 34.00 | |
| 4605 | Tracheostomy (S) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | | 45.00 | |
| 4610 | Trachea, removal of foreign body in | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | | 33.00 | |
| 4614 | Bronchoscopy, as an independent procedure (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | | 25.00 | |
| 4616 | Bronchoscopy, as an independent procedure (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | | 33.00 | |
| 4620 | Bronchoscopy with biopsy or other diagnostic or therapeutic procedure | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | | 44.00 | |
| 4625 | Bronchus, removal of foreign body in (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | | 49.00 | |
| 4626 | Bronchus, removal of foreign body in (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | | 65.00 | |
| 4628 | Bronchoscopy with dilatation of tracheal stricture—initial | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | | 44.00 | |
| 4631 | Bronchoscopy with dilatation of tracheal stricture—subsequent dilatation in a single course of treatment | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | | 22.00 | |
| *Division 4— Urological* | | | | | | | | | | |
| 4710 | Adrenal gland, biopsy of | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | | 110.00 | |
| 4713 | Adrenal gland, removal of. | 160.00 | 160.00 | 160.00 | 160.00 | | 160.00 | | 160.00 | |
| 4719 | Renal transplant | 275.00 | 275.00 | 275.00 | 275.00 | | 275.00 | | 275.00 | |
| 4723 | Nephrectomy for malignant disease, complete or partial | 200.00 | 200.00 | 200.00 | 200.00 | | 200.00 | | 200.00 | |
| 4725 | Nephrectomy, complete, other than for malignant disease (G) | 120.00 | 120.00 | 120.00 | 120.00 | | 120.00 | | 120.00 | |

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| 4726 | Nephrectomy, complete, other than for malignant disease (S) | 160.00 | 160.00 | 160.00 | 160.00 | | 160.00 | 160.00 |
| 4729 | Nephrectomy, partial, other than for malignant disease (G) | 135.00 | 135.00 | 135.00 | 135.00 | | 135.00 | 135.00 |
| 4730 | Nephrectomy, partial, other than for malignant disease (S) | 180.00 | 180.00 | 180.00 | 180.00 | | 180.00 | 180.00 |
| 4732 | Nephro-ureterectomy, complete, with bladder repair | 200.00 | 200.00 | 200.00 | 200.00 | | 200.00 | 200.00 |
| 4735 | Kidney, fused, symphysiotomy for | 130.00 | 130.00 | 130.00 | 130.00 | | 130.00 | 130.00 |
| 4740 | Kidney, exploration of, together with any procedure, not covered by any other item | 140.00 | 140.00 | 140.00 | 140.00 | | 140.00 | 140.00 |
| 4743 | Nephrolithotomy, pyelolithotomy or ureterolithotomy | 175.00 | 175.00 | 150.00 | 150.00 | | 120.00 | 100.00 |
| 4747 | Nephrostomy | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | 110.00 |
| 4751 | Nephropexy, as an independent procedure | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | 110.00 |
| 4755 | Pyonephrosis, drainage of. | 65.00 | 65.00 | 65.00 | 65.00 | | 65.00 | 65.00 |
| 4759 | Perinephric abscess, drainage of | 65.00 | 65.00 | 65.00 | 65.00 | | 65.00 | 65.00 |
| 4765 | Pelvi-ureteric junction, plastic procedures to | 160.00 | 160.00 | 160.00 | 160.00 | | 160.00 | 160.00 |
| 4768 | Divided ureter, repair of | 160.00 | 160.00 | 160.00 | 160.00 | | 160.00 | 160.00 |
| 4771 | Ureterectomy, complete, with bladder repair, as an independent procedure | 105.00 | 105.00 | 105.00 | 105.00 | | 105.00 | 105.00 |
| 4775 | Ureter, transplantation of, into skin | 85.00 | 85.00 | 85.00 | 85.00 | | 85.00 | 85.00 |
| 4779 | Ureter, transplantation of, into bladder | 125.00 | 125.00 | 125.00 | 125.00 | | 125.00 | 125.00 |
| 4783 | Ureter, transplantation of, into intestine | 165.00 | 165.00 | 165.00 | 165.00 | | 165.00 | 165.00 |
| 4787 | Ureter, transplantation of, into isolated intestinal loop | 195.00 | 195.00 | 195.00 | 195.00 | | 195.00 | 195.00 |
| *Operations on the bladder (closed)* | | | | | | | | |
| 4810 | Bladder, catheterisation of—where no other surgical procedure is performed | 5.50 | 6.00 | 5.50 | | 5.50 | 6.00 | 5.00 |
| 4814 | Cystoscopy, with or without urethral dilatation | 27.50 | 25.00 | 22.00 | | 25.00 | 21.00 | 21.00 |
| 4819 | Cystoscopy, with ureteric catheterisation, with or without introduction of opaque medium | 33.00 | 40.00 | 26.50 | | 35.00 | 30.00 | 30.00 |
| 4820 | Cystoscopy with controlled hydrodilatation of the bladder | 35.00 | 32.50 | 29.50 | | 32.50 | 28.50 | 28.50 |
| 4823 | Cystometrography | 11.00 | 11.00 | 11.00 | | 11.00 | 11.00 | 11.00 |
| 4827 | Cystoscopic removal of foreign body | 44.00 | 44.00 | 44.00 | | 44.00 | 44.00 | 44.00 |
| 4831 | Cystoscopy, with biopsy of bladder tumours | 40.00 | 40.00 | 40.00 | | 40.00 | 40.00 | 40.00 |
| 4836 | Cystoscopy, with diathermy or resection of superficial bladder tumours | 55.00 | 55.00 | 55.00 | | 55.00 | 55.00 | 55.00 |
| 4837 | Cystoscopy, with diathermy or resection of invasive bladder tumours | 100.00 | 100.00 | 100.00 | | 100.00 | 100.00 | 100.00 |
| 4839 | Cystoscopy, with ureteric meatotomy | 50.00 | 50.00 | 50.00 | | 50.00 | 50.00 | 50.00 |
| 4843 | Cystoscopy, with diathermy of ureteric orifices | 40.00 | 40.00 | 40.00 | | 40.00 | 40.00 | 40.00 |

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| 4847 | Cystoscopy, with endoscopic bladder neck resection | 65.00 | 65.00 | 65.00 | | 65.00 | 65.00 | 65.00 |
| 4851 | Cystoscopy, with endoscopic removal or manipulation of ureteric calculus | 65.00 | 80.00 | 65.00 | | 65.00 | 65.00 | 65.00 |
| 4855 | Litholapaxy, with or without cystoscopy | 60.00 | 60.00 | 60.00 | | 60.00 | 60.00 | 60.00 |
| *Operations on the bladder (open)* | | | | | | | | |
| 4901 | Bladder, repair of rupture or partial excision other than for invasive tumour (G) | 75.00 | 75.00 | 75.00 | 75.00 | | 75.00 | 75.00 |
| 4902 | Bladder, repair of rupture or partial excision other than for invasive tumour (S) | 100.00 | 100.00 | 100.00 | 100.00 | | 100.00 | 100.00 |
| 4916 | Cystostomy or cystotomy, suprapubic (G) | 37.50 | 37.50 | 37.50 | 37.50 | | 37.50 | 37.50 |
| 4917 | Cystostomy or cystotomy, suprapubic (S) | 50.00 | 50.00 | 50.00 | 50.00 | | 50.00 | 50.00 |
| 4919 | Bladder, partial excision of, for invasive tumour | 140.00 | 140.00 | 140.00 | 140.00 | | 140.00 | 140.00 |
| 4925 | Bladder, total excision of | 180.00 | 180.00 | 180.00 | 180.00 | | 180.00 | 180.00 |
| 4931 | Bladder neck contracture, operation for | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | 110.00 |
| 4935 | Bladder tumours, suprapubic diathermy of | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | 110.00 |
| 4939 | Diverticulum of bladder, excision or obliteration of | 145.00 | 145.00 | 145.00 | 145.00 | | 145.00 | 145.00 |
| 4944 | Vesical fistula, cutaneous, operation for | 65.00 | 65.00 | 65.00 | 65.00 | | 65.00 | 65.00 |
| *Operations on the prostate* | | | | | | | | |
| 5010 | Prostatectomy (suprapubic, perineal or retropubic) | 200.00 | 200.00 | 190.00 | 160.00 | | 150.00 | 150.00 |
| 5014 | Prostatectomy (endoscopic), with or without cystoscopy | 180.00 | 210.00 | 140.00 | 140.00 | | 140.00 | 100.00 |
| 5019 | Median bar, endoscopic resection of, with or without cystoscopy | 90.00 | 90.00 | 90.00 | 90.00 | | 90.00 | 90.00 |
| 5023 | Prostate, total excision of | 220.00 | 220.00 | 220.00 | 220.00 | | 220.00 | 220.00 |
| 5028 | Prostate, open perineal biopsy of | 55.00 | 55.00 | 55.00 | 55.00 | | 55.00 | 55.00 |
| 5032 | Prostate, biopsy of, endoscopic, with or without cystoscopy | 80.00 | 80.00 | 80.00 | 80.00 | | 80.00 | 80.00 |
| 5037 | Prostate, needle biopsy of, or injection into | 10.00 | 10.00 | 10.00 | 10.00 | | 10.00 | 10.00 |
| 5041 | Prostatic abscess, open drainage of | 55.00 | 55.00 | 55.00 | 55.00 | | 55.00 | 55.00 |
| *Operations on urethra, penis or scrotum* | | | | | | | | |
| 5110 | Urethral sounds, passage of, as an independent procedure | 8.00 | 8.00 | 7.50 | 8.00 | | 9.00 | 8.00 |
| 5114 | Urethral stricture, dilatation of | 15.00 | 14.00 | 15.00 | 15.00 | | 15.00 | 15.00 |
| 5118 | Urethra, repair of rupture of (G) | 82.50 | 82.50 | 82.50 | 82.50 | | 82.50 | 82.50 |
| 5120 | Urethra, repair of rupture of (S) | 110.00 | 110.00 | 110.00 | 110.00 | | 110.00 | 110.00 |
| 5124 | Urethral fistula, closure of | 27.50 | 27.50 | 27.50 | 27.50 | | 27.50 | 27.50 |
| 5128 | Urethroscopy, as an independent procedure | 27.50 | 27.50 | 27.50 | 27.50 | | 27.50 | 27.50 |

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| 5132 | Urethroscopy with removal of stone or foreign body | 33.00 | 33.00 | | 33.00 | | 33.00 | 33.00 | 33.00 |
| 5133 | Urethra, examination of, involving the use of an urethroscope, with cystoscopy | 33.00 | 33.00 | | 33.00 | | 33.00 | 33.00 | 33.00 |
| 5136 | Urethral meatotomy, external | 15.00 | 15.00 | | 15.00 | | 15.00 | 15.00 | 15.00 |
| 5140 | Urethrotomy (external), with excision of stricture | 110.00 | 110.00 | | 110.00 | | 110.00 | 110.00 | 110.00 |
| 5145 | Urethrotomy, perineal (external) as an independent procedure | 55.00 | 55.00 | | 55.00 | | 55.00 | 55.00 | 55.00 |
| 5149 | Urethrotomy (internal) | 50.00 | 50.00 | | 50.00 | | 50.00 | 50.00 | 50.00 |
| 5153 | Urethroplasty, not covered by any other item in this Part—each stage | 110.00 | 110.00 | | 110.00 | | 110.00 | 110.00 | 110.00 |
| 5157 | Urethrectomy, partial or complete, for removal of tumour | 90.00 | 90.00 | | 90.00 | | 90.00 | 90.00 | 90.00 |
| 5161 | Urethral stricture, plastic repair of—each stage | 130.00 | 130.00 | | 130.00 | | 130.00 | 130.00 | 130.00 |
| 5165 | Hypospadias, correction of chordee | 65.00 | 65.00 | | 65.00 | | 65.00 | 65.00 | 65.00 |
| 5167 | Hypospadias, correction of chordee with transplantation of prepuce | 90.00 | 90.00 | | 90.00 | | 90.00 | 90.00 | 90.00 |
| 5170 | Hypospadias, urethral reconstruction | 100.00 | 100.00 | | 100.00 | | 100.00 | 100.00 | 100.00 |
| 5171 | Hypospadias, urethral reconstruction with perineal urethrostomy | 115.00 | 115.00 | | 115.00 | | 115.00 | 115.00 | 115.00 |
| 5173 | Hypospadias, urethral reconstruction and correction of chordee, complete, one stage including urinary diversion | 160.00 | 160.00 | | 160.00 | | 160.00 | 160.00 | 160.00 |
| 5174 | Hypospadias, secondary correction of | 44.00 | 44.00 | | 44.00 | | 44.00 | 44.00 | 44.00 |
| 5178 | Epispadias, repair of, not involving sphincter | 110.00 | 110.00 | | 110.00 | | 110.00 | 110.00 | 110.00 |
| 5182 | Epispadias, repair of, including bladder neck closure | 135.00 | 135.00 | | 135.00 | | 135.00 | 135.00 | 135.00 |
| 5186 | Urethra, diathermy of | 30.00 | 30.00 | | 30.00 | | 30.00 | 30.00 | 30.00 |
| 5190 | Priapism, decompression operation for, under general anaesthesia | 15.00 | 15.00 | | 15.00 | | 15.00 | 15.00 | 15.00 |
| 5191 | Priapism, vein graft for | 100.00 | 100.00 | | 100.00 | | 100.00 | 100.00 | 100.00 |
| 5194 | Penis, partial amputation of. | 65.00 | 65.00 | | 65.00 | | 65.00 | 65.00 | 65.00 |
| 5198 | Penis, complete or radical amputation of | 130.00 | 130.00 | | 130.00 | | 130.00 | 130.00 | 130.00 |
| 5202 | Penis, amputation of, with excision of glands | 165.00 | 165.00 | | 165.00 | | 165.00 | 165.00 | 165.00 |
| 5206 | Scrotum, partial excision of. | 55.00 | 55.00 | | 55.00 | | 55.00 | 55.00 | 55.00 |
| *Operations on Testes, Vasa or Seminal Vesicles* | | | | | | | | | |
| 5220 | Testicular biopsy | 27.50 | 27.50 | 27.50 | | 27.50 | | 27.50 | 27.50 |
| 5223 | Spermatocele, excision of (G) | 37.50 | 37.50 | 37.50 | | 37.50 | | 37.50 | 37.50 |
| 5224 | Spermatocele, excision of (S) | 50.00 | 50.00 | 50.00 | | 50.00 | | 50.00 | 50.00 |
| 5227 | Exploration of the testis, with or without fixation for torsion | 50.00 | 50.00 | 50.00 | | 50.00 | | 50.00 | 50.00 |
| 5232 | Orchidectomy, with excision of retroperitoneal glands or seminal vesicles | 165.00 | 165.00 | 165.00 | | 165.00 | | 165.00 | 165.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 5236 | Orchidoplasty | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5240 | Epididymectomy | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 5244 | Vasoepididymostomy | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5248 | Vasoepididymyography and vasovesiculography as an independent operative procedure, preparation for, by open operation | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 5256 | Vasectomy (radical) including seminal vesicles | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 5260 | Vasotomy or vasectomy (unilateral or bilateral) (G) | 34.00 | 34.00 | 34.00 | 34.00 | 34.00 | 34.00 |
| 5261 | Vasotomy or vasectomy (unilateral or bilateral) (S) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| *Division 5—Gynaecological* | | | | | | | |
| 5310 | Gynaecological examination under anaesthesia not performed in association with any service covered by any other item in this Part (G) | 8.50 | 10.00 | 8.50 | 8.00 | 6.50 | 6.50 |
| 5311 | Gynaecological examination under anaesthesia not performed in association with any service covered by any other item in this Part (S) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 5313 | Intra-uterine contraceptive device, introduction or removal of, as an independent procedure (G) | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 5314 | Intra-uterine contraceptive device, introduction or removal of, as an independent procedure (S) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 5316 | Simple tumour of vagina or vulva, removal of (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 5317 | Simple tumour of vagina or vulva, removal of (S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 5322 | Hymenectomy (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 5323 | Hymenectomy(S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 5328 | Bartholin’s cyst, excision of (G) | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 |
| 5329 | Bartholin’s cyst, excision of (S) | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 5334 | Bartholin’s cyst or gland, marsupialisation or cautery destruction of (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 5335 | Bartholin’s cyst or gland, marsupialisation or cautery destruction of (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 5340 | Bartholin’s abscess, incision of (G) | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 |
| 5341 | Bartholin’s abscess, incision of (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 5346 | Skene’s duct, incision of, or removal of calculus from | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 5350 | Urethra or urethral caruncle, cauterisation of (G) | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 |
| 5352 | Urethra or urethral caruncle, cauterisation of (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 5356 | Urethral caruncle, excision of (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 5358 | Urethral caruncle, excision of (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 5362 | Clitoris, amputation of | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 5367 | Vulvectomy (simple) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5371 | Vulvectomy (radical) | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 5376 | Pelvic lymph glands, excision of (radical) | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 5380 | Vagina, dilatation of, as an independent procedure—each attendance at which dilatation is performed | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 |
| 5385 | Vagina, complete removal of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 5387 | Vaginal reconstruction in congenital absence of gynatresia | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 5394 | Vaginal septum, excision of, for correction of double vagina | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5398 | Plastic repair to enlarge vaginal orifice (G) | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 |
| 5399 | Plastic repair to enlarge vaginal orifice (S) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 5403 | Colpotomy or colporrhaphy, not covered by any other item in this Part (G) | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 | 17.50 |
| 5404 | Colpotomy or colporrhaphy, not covered by any other item in this Part (S) | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 5408 | Cystocele or rectocele, repair of, not covered by Item 5414 or 5419 (G) | 60.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 5410 | Cystocele or rectocele, repair of, not covered by Item 5416 or 5420 (S) | 80.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5414 | Cystocele and rectocele, repair of, not covered by Item 5419 (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5416 | Cystocele and rectocele, repair of, not covered by Item 5420 (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 5419 | Colpoplasty, Donald-Fothergill or Manchester operation (operation for genital prolapse) (G) | 90.00 | 85.00 | 85.00 | 90.00 | 90.00 | 85.00 |
| 5420 | Colpoplasty, Donald-Fothergill or Manchester operation (operation for genital prolapse) (S) | 110.00 | 110.00 | 110.00 | 120.00 | 125.00 | 100.00 |
| 5422 | Colpoplasty, Donald-Fothergill or Manchester operation (operation for genital prolapse) and curettage of uterus, with or without dilatation (G) | 101.50 | 97.50 | 95.00 | 100.00 | 100.00 | 95.00 |
| 5423 | Colpoplasty, Donald-Fothergill or Manchester operation (operation for genital prolapse) and curettage of uterus, with or without dilatation (S) | 125.00 | 117.50 | 112.50 | 135.00 | 140.00 | 112.50 |
| 5425 | Urethrocele, operation for | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 5426 | Abdominal approach for repair of enterocoele or suspension of vaginal vault or both (G) | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 5428 | Abdominal approach for repair of enterocoele or suspension of vaginal vault or both (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 5429 | Fistula between genital and urinary or alimentary tracts, repair of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 5434 | Stress incontinence, sling operation for, as an independent procedure | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 | 125.00 |
| 5436 | Cervix, cauterisation, ionisation or diathermy of (G) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 5437 | Cervix, cauterisation, ionisation or diathermy of (S) | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 5441 | Cervix, removal of polyp from (G) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 5442 | Cervix, removal of polyp from (S) | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 5448 | Examination of the uterine cervix by a magnifying colposcope of the Hinselmann type or similar instrument | 13.00 | 12.00 | 13.00 | 10.00 | 10.00 | 10.00 |
| 5451 | Cervix, cone biopsy of (G) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 5452 | Cervix, cone biopsy of (S) | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 5453 | Cone biopsy of cervix, and curettage of uterus with or without dilatation (G) | 41.50 | 42.50 | 40.00 | 40.00 | 40.00 | 40.00 |
| 5454 | Cone biopsy of cervix, and curettage of uterus with or without dilatation (S) | 55.00 | 57.50 | 52.50 | 55.00 | 55.00 | 52.50 |
| 5457 | Cervix, amputation or repair of, not covered by Item 5419 (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 5458 | Cervix, amputation or repair of, not covered by Item 5420 (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 5460 | Cervix, dilatation of, not covered by Item 5471 (G) | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 5461 | Cervix, dilatation of, not covered by Item 5472 (S) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 5467 | Culdoscopy | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 5471 | Uterus, curettage of, with or without dilatation (G) | 23.00 | 25.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 5472 | Uterus, curettage of, with or without dilatation (S) | 30.00 | 35.00 | 25.00 | 30.00 | 30.00 | 25.00 |
| 5475 | Uterus, curettage of, with or without dilatation; and cauterisation, ionisation or diathermy of cervix (G) | 27.00 | 29.00 | 24.00 | 24.00 | 24.00 | 24.00 |
| 5477 | Uterus, curettage of, with or without dilatation; and cauterisation, ionisation or diathermy of cervix (S) | 35.00 | 40.00 | 30.00 | 35.00 | 35.00 | 30.00 |
| 5481 | Uterus, curettage of, with or without dilatation and removal of polyp from cervix (G) | 27.50 | 29.50 | 24.50 | 24.50 | 24.50 | 24.50 |
| 5483 | Uterus, curettage of, with or without dilatation and removal of polyp from cervix (S) | 35.50 | 40.50 | 30.50 | 35.50 | 35.50 | 30.50 |
| 5487 | Uterus, curettage of, with or without dilatation, with removal of polyp from cervix and cauterisation, ionisation or diathermy of cervix (G) | 29.50 | 31.50 | 26.50 | 26.50 | 26.50 | 26.50 |
| 5489 | Uterus, curettage of, with or without dilatation, with removal of polyp from cervix and cauterisation, ionisation or diathermy of cervix (S). | 38.00 | 43.00 | 33.00 | 38.00 | 38.00 | 33.00 |
| 5492 | Hysterotomy (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5494 | Hysterotomy (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 5499 | Hysterectomy (other than vaginal)—subtotal (G) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 5501 | Hysterectomy (other than vaginal)—subtotal (S) | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 5505 | Hysterectomy (other than vaginal)—total (G) | 90.00 | 90.00 | 90.00 | 100.00 | 100.00 | 90.00 |
| 5507 | Hysterectomy (other than vaginal)—total (S) | 120.00 | 120.00 | 120.00 | 130.00 | 125.00 | 120.00 |
| 5509 | Hysterectomy (other than vaginal)—total, with curettage of uterus, with or without dilatation (G) | 101.50 | 102.50 | 100.00 | 110.00 | 110.00 | 100.00 |
| 5510 | Hysterectomy (other than vaginal)—total, with curettage of uterus, with or without dilatation (S) | 135.00 | 137.50 | 132.50 | 145.00 | 140.00 | 132.50 |
| 5513 | Hysterectomy (total) with abdominal urethroplexy | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 |
| 5515 | Hysterectomy and dissection of pelvic glands | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 5516 | Radical hysterectomy without gland dissection | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 5523 | Colpoplasty with vaginal hysterectomy | 120.00 | 100.00 | 110.00 | 110.00 | 110.00 | 100.00 |
| 5525 | Colpoplasty with vaginal hysterectomy | 150.00 | 130.00 | 130.00 | 150.00 | 140.00 | 130.00 |
| 5529 | Ectopic gestation, removal of (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5531 | Ectopic gestation, removal of (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 5535 | Myomectomy (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5537 | Myomectomy (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 5541 | Round ligaments, shortening of (G) | 65.00 | 70.00 | 65.00 | 50.00 | 60.00 | 60.00 |
| 5543 | Round ligaments, shortening of (S) | 75.00 | 80.00 | 75.00 | 60.00 | 70.00 | 70.00 |
| 5547 | Bicornuate uterus, plastic reconstruction for | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5552 | Uterus, suspension or fixation of—as an independent procedure (G) | 65.00 | 65.00 | 60.00 | 65.00 | 60.00 | 60.00 |
| 5554 | Uterus, suspension or fixation of—as an independent procedure (S) | 80.00 | 90.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 5557 | Rubin test for patency | 12.00 | 10.50 | 12.50 | 10.00 | 10.00 | 10.00 |
| 5559 | Laparoscopy and diathermy of the Fallopian tubes | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 5560 | Fallopian tube or tubes, implantation of, into uterus | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 5565 | Fallopian tubes, hydrotubation of, as an isolated procedure | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 5569 | Fallopian tubes, hydrotubation of, as a repetitive post-operative procedure | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 5575 | Oophorectomy, salpingectomy, salpingo-oophorectomy or ligation of Fallopian tubes, not associated with hysterectomy (G) | 65.00 | 65.00 | 60.00 | 65.00 | 60.00 | 60.00 |
| 5576 | Oophorectomy, salpingectomy, salpingo-oophorectomy or ligation of Fallopian tubes, not associated with hysterectomy (S) | 80.00 | 90.00 | 80.00 | 80.00 | 80.00 | 80.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 5578 | Oophorectomy, salpingectomy, salpingo-oophorectomy or ligation of Fallopian tubes, not associated with hysterectomy in addition to curettage of uterus, with or without dilatation (G) | 76.50 | 77.50 | 70.00 | 75.00 | 70.00 | 70.00 |
| 5580 | Oophorectomy, salpingectomy, salpingo-oophorectomy or ligation of Fallopian tubes, not associated with hysterectomy in addition to curettage of uterus, with or without dilatation (S) | 95.00 | 107.50 | 92.50 | 95.00 | 95.00 | 92.50 |
| 5588 | Salpingostomy or salpingolysis, or both | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 5593 | Ovarian, parovarian, fimbrial or broad ligament cyst, excision of, not covered by any other item in this Part (G) | 70.00 | 70.00 | 65.00 | 60.00 | 55.00 | 55.00 |
| 5594 | Ovarian, parovarian, fimbrial or broad ligament cyst, excision of, not covered by any other item in this Part (S) | 100.00 | 90.00 | 80.00 | 70.00 | 70.00 | 70.00 |
| 5596 | Pelvic abscess, suprapubic drainage of (G) | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 |
| 5597 | Pelvic abscess, suprapubic drainage of (S) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| *Division 6—Ophthalmological* | | | | | | | |
| 5610 | Ophthalmological examination under general anaesthesia as an independent procedure | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 5614 | Eye, enucleation of (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 5616 | Eye, enucleation of (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5620 | Eye, enucleation of, and insertion of ball | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 |
| 5625 | Globe, evisceration of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5626 | Globe, evisceration of, and insertion of intrascleral ball | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 |
| 5628 | Anophthalmic orbit, insertion of cartilage or artificial implant as a delayed procedure | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5631 | Orbitotomy, lateral wall, medial wall or inferior wall | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 5632 | Orbitotomy, anterior | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5635 | Orbit, exenteration of, including skin grafting | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5637 | Orbit, exenteration of, including skin grafting, with temporalis muscle transplant | 135.00 | 135.00 | 135.00 | 135.00 | 135.00 | 135.00 |
| 5640 | Orbital cyst or tumour, excision of, requiring preparation of bone flap | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 5644 | Orbital cyst or tumour, excision of, not requiring preparation of bone flap | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 5649 | Perforating wound of globe, repair of, including procedures involving iris, lens, iris and lens or other intraocular structures | 150.00 | 180.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 5655 | Intraocular foreign body, removal from anterior segment | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 5656 | Intraocular foreign body, magnetic, removal from posterior segment | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 5659 | Intraocular foreign body, non-magnetic, removal from posterior segment | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 5662 | Abscess (intraorbital), drainage of | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 5667 | Tarsal cyst, extirpation of (G) | 9.00 | 9.00 | 9.00 | 9.00 | 8.00 | 8.00 |
| 5668 | Tarsal cyst, extirpation of (S) | 11.00 | 12.00 | 12.00 | 12.00 | 10.00 | 10.00 |
| 5673 | Tarsal cartilage, excision of | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 5674 | Ectropion, tarsal cauterisation for | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 5677 | Canthoplasty or tarsorrhaphy | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 5681 | Lacrimal sac, excision of or operation on | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 5685 | Dacryocystorrhinostomy | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5687 | Conjunctivorhinostomy | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5689 | Parotid duct, transplantation of, into conjunctival sac | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 5693 | Lacrimal canaliculus, reconstruction of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5697 | Lacrimal canaliculus, immediate repair of | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5701 | Lacrimal passages, probing or dilatation of, for obstruction (G) | 12.50 | 10.00 | 10.50 | 12.00 | 12.00 | 12.00 |
| 5702 | Lacrimal passages, probing or dilatation of, for obstruction (S) | 25.00 | 21.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 5704 | Punctum snip with dilatation of punctum | 25.00 | 21.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 5706 | Conjunctival peritomy | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 5708 | Conjunctival graft over cornea | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5710 | Trachoma, crushing operation for | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 5712 | Cornea or sclera, removal of superficial foreign body from | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 5718 | Cornea or sclera, removal of foreign body, involving deeper layers (G) | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 | 8.25 |
| 5719 | Cornea or sclera, removal of foreign body, involving deeper layers (S) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 5723 | Corneal scars, excision of, or partial keratectomy | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 |
| 5727 | Cornea, tattooing of | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 5731 | Cornea, epithelial debridement for dendritic ulcer | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 5735 | Cornea, transplantation of, including collection of implant | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 5739 | Keratoplasty—partial thickness | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 5746 | Conjunctiva, cautery of, including treatment of pannus—each attendance at which treatment is given | 11.50 | 11.50 | 11.50 | 11.50 | 11.50 | 11.50 |
| 5748 | Pterygium, removal of | 45.00 | 50.00 | 40.00 | 35.00 | 40.00 | 35.00 |
| 5751 | Pinguecula, removal of | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 5754 | Limbic tumour, removal of. | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 5758 | Lens extraction, including initial and subsequent needlings | 220.00 | 200.00 | 185.00 | 175.00 | 175.00 | 150.00 |
| 5762 | Insertion of artificial lens | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5764 | Artificial lens, removal of. | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 5766 | Cataract, juvenile, removal of, including subsequent needlings | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 5770 | Capsulectomy | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 5774 | Secondary cataract, needling of—each stage | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 5778 | Paracentesis in relation to eye | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 5782 | Glaucoma, filtering and allied operations for | 180.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 5786 | Goniotomy | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 5790 | Iridectomy or iridotomy | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 5791 | Iris, light coagulation of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5793 | Tumour of iris, excision of | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 5796 | Tumour, involving ciliary body or ciliary body and iris, excision of | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 5798 | Cyclodiathermy | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 5800 | Cyclocryotherapy | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 5802 | Detached retina, diathermy operation for | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 5806 | Detached retina, resection or buckling operation for | 220.00 | 250.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 5810 | Re-attachment of retina, revision operation for | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 5814 | Detached retina, light coagulation for | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 5818 | Detached retina, removal of encircling silicone band from | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 5822 | Detached retina, removal of encircling silicone band from, with excision of sclera | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 5826 | Cryopexy, without scleral resection or scleral infolding, for treatment of detached retina or pre-detachment disease of retina | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 5830 | Cryopexy, with scleral resection or scleral infolding, for treatment of detached retina of pre-detachment disease of retina | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 5834 | Retrobulbar transillumination | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 5838 | Retrobulbar injection of alcohol or other drug as an independent procedure | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 5842 | Squint, operation for correction of, involving any number of muscles of one or both eyes, not covered by Item 5846 | 100.00 | 100.00 | 85.00 | 70.00 | 85.00 | 70.00 |
| 5846 | Muscle transplant (Hummelsheim type, etc.) for squint | 120.00 | 120.00 | 105.00 | 90.00 | 105.00 | 90.00 |
| 5850 | Re-attachment of ruptured medial palpebral ligament | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5854 | Torn ocular muscle, repair of | 70.00 | 70.00 | 70.00 | 70.00 | 70.00 | 70.00 |
| 5856 | Re-suturing of wound following intraocular procedures with or without excision of prolapsed iris | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| *Division 7—Thoracic* | | | | | | | |
| 5908 | Thoracic cavity, aspiration or paracentesis of, or both (G) | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 5909 | Thoracic cavity, aspiration or paracentesis of, or both (S) | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 5912 | Pericardium, paracentesis of | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 5915 | Artificial pneumothorax—induction | 16.00 | 16.00 | 16.00 | 16.00 | 16.00 | 16.00 |
| 5920 | Artificial pneumothorax—each filling subsequent to induction. | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 | 8.20 |
| 5927 | Intercostal drain, insertion of, not involving resection of rib (G) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 5928 | Intercostal drain, insertion of, not involving resection of rib (S) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 5930 | Empyema, radical operation for, involving resection of rib (G) | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 | 64.00 |
| 5931 | Empyema, radical operation of, involving resection of rib (S) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 5937 | Thoracotomy, exploratory, with or without biopsy | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 5946 | Thoracotomy with pulmonary decortication | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 5948 | Thoracotomy with pleurectomy or pleurodesis | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 5951 | Thoracoplasty (complete) | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 5954 | Thoracoplasty (in stages)—each stage | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 5959 | Pectus excavatum or pectus carinatum, limited correction of | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 5960 | Pectus excavatum or pectus carinatum, radical correction of | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 5969 | Thoracoscopy, with or without division of pleural adhesions | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 5976 | Thoracic duct cannulisation. | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 5980 | Phrenic avulsion or crush | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 5986 | Pneumonectomy or lobectomy | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 5988 | Hydatid cysts of lungs, enucleation of | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 5992 | Correction of atresia of oesophagus | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 5997 | Oesophagectomy with direct anastomosis or with stomach transposition | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 6000 | Oesophagectomy with interposition of small or large bowel | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 |
| 6003 | Mediastinal abscess, drainage of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 6007 | Mediastinum, cervical exploration of, with or without biopsy | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 6012 | Left ventricular puncture | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 6015 | Pericardium, transthoracic drainage of (other than for treatment of constrictive pericarditis) | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 6021 | Bronchoscopy with left atrial puncture | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 6024 | Hernia, hiatus or other diaphragmatic, transthoracic repair of | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 6025 | Intrathoracic operation on heart, lungs, great vessels, bronchial tree, oesophagus or mediastinum, or on more than one of those organs, not covered by any other item in this Part | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 6029 | Cardiac catheterisation with or without fluoroscopy | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6034 | Cardiac catheterisation with oximetry | 47.00 | 47.00 | 47.00 | 47.00 | 47.00 | 47.00 |
| 6038 | Atrial balloon septostomy including preliminary cardiac catheterisation with oximetry | 105.00 | 105.00 | 105.00 | 105.00 | 105.00 | 105.00 |
| 6045 | Insertion or replacement of permanent internal pacemaker and myocardial electrodes by thoracotomy | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 6048 | Insertion or replacement of permanent transvenous electrode and pacemaker | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 6050 | Insertion or replacement of permanent transvenous electrode | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 6052 | Insertion or replacement of permanent pacemaker | 70.00 | 70.00 | 70.00 | 70.00 | 70.00 | 70.00 |
| 6058 | Open heart surgery, single valve replacement | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 |
| 6060 | Open heart surgery for congenital heart disease | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 |
| 6062 | Open heart surgery on more than one valve or involving more than one chamber | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 | 500.00 |
| 6065 | Open heart surgery not covered by any other item in this Part | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 | 350.00 |
| 6070 | Coronary artery or arteries, direct surgery to, employing cardiopulmonary by-pass | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 | 400.00 |
| *Division 8*—*Neuro-SurgicaI* | | | | | | | |
| 6102 | Local infiltration around nerve or in muscle with alcohol, novocaine or similar preparation—each attendance at which an injection is given | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 6104 | Nerve blocking with alcohol or other agent following localisation by electrical stimulator | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 6108 | Sympathetic trunk, injection into | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 6112 | Injection of intracranial ganglion, or primary branch of trigeminal nerve, with alcohol or similar substance | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 | 23.00 |
| 6116 | Lumbar puncture | 8.50 | 8.00 | 8.50 | 9.00 | 10.00 | 9.00 |
| 6120 | Cisternal puncture | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 6124 | Spinal or epidural injection for neurological diagnosis or for therapeutic reasons | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 6128 | Ventricular puncture | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6132 | Cutaneous or digital nerve, primary suture of (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 6133 | Cutaneous or digital nerve, primary suture of (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 6137 | Repair of divided digital nerve to thumb or finger (G) | 34.00 | 34.00 | 34.00 | 34.00 | 34.00 | 34.00 |
| 6138 | Repair of divided digital nerve to thumb or finger (S) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 6142 | Nerve trunk, primary suture of (G) | 56.00 | 56.00 | 56.00 | 56.00 | 56.00 | 56.00 |
| 6143 | Nerve trunk, primary suture of (S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 6144 | Nerve trunk, primary suture of (D) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 6147 | Nerve trunk, secondary suture of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 6148 | Nerve trunk, secondary suture of (D) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 6151 | Nerve, graft or anastomosis of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 6155 | Neuro-anastomosis, involving cranial nerves | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 6159 | Nerve, transposition of (G) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 6160 | Nerve, transposition of (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 6164 | Neurectomy, neurotomy, or removal of tumour from peripheral nerve (G) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 6165 | Neurectomy, neurotomy, or removal of tumour from peripheral nerve (S) | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 6169 | Neurectomy, periarterial | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 6173 | Neurectomy, intracranial or radical as in tic douloureux | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 6177 | Exploration of brachial plexus not covered by any other item in this Part | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6181 | Neurolysis by open operation, with or without transposition (G) | 40.00 | 45.00 | 35.00 | 30.00 | 35.00 | 30.00 |
| 6182 | Neurolysis by open operation, with or without transposition (S) | 60.00 | 60.00 | 45.00 | 40.00 | 45.00 | 40.00 |
| 6186 | Craniotomy, burr-hole (G) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 6187 | Craniotomy, burr-hole(S) | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 6191 | Intracranial haemorrhage, burr-hole craniotomy for (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 6192 | Intracranial haemorrhage, burr-hole craniotomy for (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6196 | Intracranial cyst, needling and drainage of | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 6197 | Fracture of skull, depressed or comminuted, operation for (G) | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 | 82.50 |

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|  |  | $ | $ | $ | $ | s | $ |
| 6198 | Fracture of skull, depressed or comminuted, operation for (S) | 110.0 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 6202 | Compound or complicated fracture or fractures of skull, operation for (G) | 112.50 | 112.50 | 112.50 | 112.50 | 112.50 | 112.50 |
| 6203 | Compound or complicated fracture or fractures of skull, operation for (S) | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 6207 | Reconstructive cranioplasty | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 6211 | Chronic subdural haematoma, operation for | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 6215 | Craniotomy involving osteoplastic flap | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 |
| 6219 | Aneurysm, intracranial, operation for | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 6223 | Craniotomy and tumour removal | 250.00 | 230.00 | 230.00 | 230.00 | 230.00 | 230.00 |
| 6225 | Cerebello-pontine angle tumour, transmastoid, trans-labyrinthine removal of | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 6227 | Transfrontal orbitotomy, for tumours or other lesions | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 6231 | Intracranial abscess, excision of | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 6235 | Intracranial infection, drainage of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 6239 | Leucotomy or lobotomy for psychiatric causes | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 6243 | Hemispherectomy | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 6247 | Temporal lobectomy | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 6251 | Chemopallidectomy, or other stereotactic procedure | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 6255 | Laminectomy for cordotomy, removal of tumour or for treatment or removal of intervertebral disc lesion | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 6259 | Spinal rhizolysis involving exposure of spinal nerve roots, with or without laminectomy | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 6263 | Sympathectomy (cervical, lumbar, thoracic, sacral or presacral) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| *Division 9—Treatment of Dislocations* | | | | | | | |
| *Dislocations Not Requiring Open Operation* | | | | | | | |
| 6310 | Mandible—first or second dislocation | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 6311 | Mandible—first or second dislocation (D) | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 6314 | Mandible—third or subsequent dislocation | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 |
| 6315 | Mandible—third or subsequent dislocation (D) | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 |
| 6318 | Clavicle (G) | 10.50 | 10.50 | 10.50 | 10.50 | 10.50 | 10.50 |
| 6320 | Clavicle (S) | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 6324 | Shoulder—first or second dislocation | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 6328 | Shoulder—third or subsequent dislocation-requiring anaesthesia | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 | 14.00 |
| 6333 | Shoulder—third or subsequent dislocation—not requiring anaesthesia | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 6337 | Elbow (G) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 6338 | Elbow (S) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 6343 | Carpus (G) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 6344 | Carpus (S) | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 6349 | Carpus on radius and ulna (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 6350 | Carpus on radius and ulna (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6354 | Finger (G) | 4.20 | 4.20 | 4.20 | 4.20 | 4.20 | 4.20 |
| 6355 | Finger(S) | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 |
| 6359 | Metacarpo-phalangeal joint of thumb (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 6360 | Metacarpo-phalangeal joint of thumb (S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 6365 | Hip (G) | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 | 41.50 |
| 6366 | Hip(S) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 6371 | Knee(G) | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 |
| 6372 | Knee (S) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 6377 | Patella (G) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 6378 | Patella (S) | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 6382 | Ankle (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 6383 | Ankle (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 6387 | Toe(G) | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 6388 | Toe(S) | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 | 6.60 |
| 6392 | Tarsus (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 6393 | Tarsus (S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 6397 | Spine (cervical), without fracture (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 6398 | Spine (cervical), without fracture (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 6402 | Spine (lumbar), without fracture (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 6404 | Spine (lumbar), without fracture (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| *Dislocations Requiring Open Operation* | | | | | | | |
| 6414 | Treatment of a dislocation requiring open operation, being a dislocation referred to in an item (other than an item that includes the symbol “(D)”) under the last preceding heading | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| 6416 | Treatment of a dislocation requiring open operation, being a dislocation referred to in Item 6311 or Item 6315 (D) | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| *Division 10—Treatment of Fractures* | | | | | | | |
| *Simple and Uncomplicated Fractures Not Requiring Open Operation* | | | | | | | |
| 6422 | Terminal phalanx of finger or thumb | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 | 8.00 |
| 6423 | Proximal phalanx of finger or thumb (G) | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 6426 | Proximal phalanx of finger or thumb (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |

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|  |  | $ | $ | $ | $ | $ | $ |
| 6431 | Middle phalanx of finger (G) | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 6432 | Middle phalanx of finger (S) | 11.50 | 11.50 | 11.50 | 11.50 | 11.50 | 11.50 |
| 6437 | One or more metacarpals, not involving base of first carpometacarpal joint (G) | 16.50 | 15.00 | 17.00 | 15.00 | 15.00 | 15.00 |
| 6438 | One or more metacarpals, not involving base of first carpometarcarpal joint (S) | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 30.00 |
| 6442 | First metacarpal involving carpometacarpal joint (Bennett’s fracture)(G) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 6443 | First metacarpal involving carpometacarpal joint (Bennett’s fracture)(S) | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 6447 | Carpus (excluding navicular)(G) | 9.90 | 9.90 | 9.90 | 9.90 | 9.90 | 9.90 |
| 6448 | Carpus (excluding navicular)(S) | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 6455 | Navicular or carpal scaphoid (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 6456 | Navicular or carpal scaphoid (S) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 6458 | Colles’ fracture of wrist (G) | 22.00 | 25.00 | 28.00 | 21.00 | 21.00 | 21.00 |
| 6459 | Colles’ fracture of wrist (S) | 45.00 | 40.00 | 50.00 | 45.00 | 45.00 | 40.00 |
| 6463 | Distal end of radius or ulna, involving wrist | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 6467 | Radius (G) | 22.00 | 20.00 | 21.00 | 22.50 | 22.50 | 20.00 |
| 6468 | Radius (S) | 35.00 | 40.00 | 30.00 | 30.00 | 40.00 | 30.00 |
| 6470 | Ulna (G) | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 6471 | Ulna (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 6477 | Both shafts of forearm (G) | 33.00 | 30.00 | 32.00 | 30.00 | 34.00 | 30.00 |
| 6478 | Both shafts of forearm (S) | 60.00 | 50.00 | 50.00 | 50.00 | 45.00 | 45.00 |
| 6482 | Humerus (G) | 30.00 | 30.00 | 32.00 | 30.00 | 34.00 | 30.00 |
| 6483 | Humerus (S) | 60.00 | 50.00 | 50.00 | 50.00 | 45.00 | 45.00 |
| 6487 | Clavicle or sternum (G) | 16.50 | 16.00 | 15.00 | 12.50 | 14.00 | 12.50 |
| 6489 | Clavicle or sternum (S) | 25.00 | 24.00 | 25.00 | 20.00 | 20.00 | 20.00 |
| 6493 | Scapula (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 6494 | Scapula (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 6496 | One or more ribs—each attendance (G) | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 6499 | One or more ribs—each attendance (S) | 5.50 | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 |
| 6503 | Pelvis (excluding symphysis pubis) or sacrum (G) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6505 | Pelvis (excluding symphysis pubis) or sacrum (S) | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 6509 | Symphysis pubis (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 6510 | Symphysis pubis (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6515 | Femur (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 6516 | Femur (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 6521 | Fibula or tarsus (excepting os calcis or os talus) (G) | 16.50 | 17.50 | 16.00 | 15.00 | 15.00 | 15.00 |
| 6522 | Fibula or tarsus (excepting os calcis or os talus) (S) | 26.50 | 27.50 | 24.00 | 25.00 | 25.00 | 25.00 |
| 6524 | Tibia or patella (G) | 27.50 | 30.00 | 26.50 | 25.00 | 28.00 | 25.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | WA. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 6527 | Tibia or patella (S) | 40.00 | 40.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 6531 | Both shafts of leg (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 6532 | Both shafts of leg (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6537 | Ankle (Pott’s fracture), with or without dislocation of ankle (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 6538 | Ankle (Pott’s fracture), with or without dislocation of ankle (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6543 | Os calcis (calcaneous) or os talus (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 6544 | Os calcis (calcaneous) or os talus (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6549 | Metatarsals—one or more (G) | 16.50 | 15.00 | 16.00 | 15.00 | 15.00 | 15.00 |
| 6550 | Metatarsals—one or more (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 6552 | Phalanx of toe (other than great toe) | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 | 7.00 |
| 6559 | More than one phalanx of toe (other than great toe) | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 6564 | Distal phalanx of great toe | 9.40 | 9.40 | 9.40 | 9.40 | 9.40 | 9.40 |
| 6566 | Proximal phalanx of great toe (G) | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 6569 | Proximal phalanx of great toe (S) | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 | 12.00 |
| 6573 | Skull, not requiring operation—each attendance (G) | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 6575 | Skull, not requiring operation—each attendance (S) | 5.50 | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 |
| 6576 | Nasal bones, not requiring reduction- each attendance (G) | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 6580 | Nasal bones, not requiring reduction- each attendance (S) | 5.50 | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 |
| 6584 | Nasal bones, requiring reduction (G) | 22.50 | 20.00 | 23.50 | 22.50 | 20.00 | 15.00 |
| 6586 | Nasal bones, requiring reduction (S) | 45.00 | 45.00 | 40.00 | 30.00 | 32.00 | 25.00 |
| 6587 | Nasal bones, requiring reduction and involving osteotomies | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 6590 | Maxilla—not requiring splinting (G) | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 | 20.50 |
| 6592 | Maxilla—not requiring splinting (S) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 6593 | Maxilla—not requiring splinting (D) | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 6596 | Maxilla—with wiring of teeth or internal fixation | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 6598 | Maxilla—with wiring of teeth or internal fixation (D) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 6601 | Maxilla—with external fixation | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6602 | Maxilla—with external fixation (D) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6605 | Mandible—not requiring splinting (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 6606 | Mandible—not requiring splinting (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6607 | Mandible—not requiring splinting (D) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 6610 | Mandible—with wiring of teeth or internal fixation | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 6611 | Mandible—with wiring of teeth or internal fixation (D) | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 6614 | Mandible—skeletal pinning with external fixation | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 6615 | Mandible—skeletal pinning with external fixation(D) | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
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| 6618 | Zygoma (G) | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 | 22.50 |
| 6619 | Zygoma (S) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 6620 | Zygoma (D) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 6621 | Spine (excluding sacrum), transverse process or bone other than vertebral body, not requiring immobilization in plaster—each attendance (G) | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 6624 | Spine (excluding sacrum), transverse process or bone other than vertebral body, not requiring immobilization in plaster—each attendance (S) | 5.50 | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 |
| 6626 | Spine (excluding sacrum), vertebral body, without involvement of cord, not requiring immobilization in plaster—each attendance (G) | 4.00 | 3.60 | 3.50 | 3.40 | 3.50 | 3.60 |
| 6629 | Spine (excluding sacrum), vertebral body, without involvement of cord, not requiring immobilization in plaster—each attendance (S) | 5.50 | 5.50 | 5.00 | 5.00 | 5.00 | 5.00 |
| 6633 | Spine (excluding sacrum), transverse process or bone other than vertebral body, requiring immobilization in plaster or traction by skull calipers (G) | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 | 29.50 |
| 6634 | Spine (excluding sacrum), transverse process or bone other than vertebral body, requiring immobilization in plaster or traction by skull calipers (S) | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 6638 | Spine (excluding sacrum), vertebral body, without involvement of cord, requiring immobilization in plaster or traction by skull calipers (G) | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 | 49.00 |
| 6639 | Spine (excluding sacrum), vertebral body, without involvement of cord, requiring immobilization in plaster or traction by skull calipers (S) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 6643 | Spine (excluding sacrum), vertebral body, with involvement of cord | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| *Simple and Uncomplicated Fractures Requiring Open Operation* | | | | | | | |
| 6647 | Treatment of a simple and uncomplicated fracture requiring open operation, being a fracture referred to in an item (other than an item that includes the symbol “(D)”) under the last preceding heading | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| 6648 | Treatment of a simple and uncomplicated fracture requiring open operation, being a fracture referred to in item 6593, 6598, 6602, 6607, 6611, 6615 or 6620 (D) | Amount | Amount | Amount | \mount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | SA. | WA | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| *Compound Fractures Requiring Open Operation* | | | | | | | |
| 6651 | Treatment of a compound fracture requiring open operation, being a fracture referred to in an item (other than an item that includes the symbol “(D)”) under the first heading in this Division | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| 6652 | Treatment of a compound fracture requiring open operation, being a fracture referred to in item 6593, 6598, 6602, 6607, 6611, 6615 or 6620 (D) | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| *Complicated Fractures Requiring Open Operation* | | | | | | | |
| 6655 | Treatment of a complicated fracture involving viscera, blood vessels or nerves and requiring open operation being a fracture referred to in an item (other than an item that includes the symbol “(D)”) under the first heading in this Division | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| 6656 | Treatment of a complicated fracture involving viscera, blood vessels or nerves and requiring open operation being a fracture referred to in item 6593, 6598, 6602, 6607, 6611, 6615 or 6620 (D) | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 | rule 8 |
| *General* | | | | | | | |
| 6659 | Initial reduction (without full postoperative treatment) in a series of two or more reductions of a fracture, being a reduction that would, but for this item, be covered by an item under a preceding heading in this Division | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |
| 6660 | Initial reduction (without full postoperative treatment) in a series of two or more reductions of a fracture, being a reduction that would, but for this item, be covered by item 6593, 6598, 6602, 6607, 6611, 6615 or 6620 (D) | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | SA | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 6663 | Each subsequent reduction (without full post-operative treatment) in the series (other than the final reduction), being a reduction that would, but for this item, be covered by an item under a preceding heading in this Division | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |
| 6664 | Each subsequent reduction (without full post-operative treatment) in the series (other than the final reduction), being a reduction that would, but for this item, be covered by item 6593, 6598, 6602, 6607, 6611, 6615 or 6620 (D) | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |
| 6667 | Final reduction (including full postoperative treatment) in the series being a reduction that would, but for this item, be covered by an item under a preceding heading in this Division | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | Rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |
| 6668 | Final reduction (including full postoperative treatment) in the series, being a reduction that would, but for this item, be covered by item 6593, 6598, 6602, 6607, 6611, 6615 or 6620 (D) | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |
| 6671 | Treatment of avulsion of epiphysis of any part | Amount | Amount | Amount | Amount | Amount | Amount |
|  |  | under | under | under | under | under | under |
|  |  | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 | rule 9 |
|  | *Division 11—Orthopaedic* | | | | | | |
| 7010 | Accessory or sesamoid bone, removal of | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7014 | Epicondylitis, open operation for (G) | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 | 26.50 |
| 7016 | Epicondylitis, open operation for (S) | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 | 35.00 |
| 7020 | Digital nail, removal of | 6.50 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |
| 7025 | Incision of pulp space, paronychia or other acute infection of hands or feet, not covered by any other item in this Part | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 | 5.60 |
|  |
| 7029 | Middle palmar, thenar or hypothenar spaces, drainage of (G) | 9.90 | 9.90 | 9.90 | 9.90 | 9.90 | 9.90 |
| 7031 | Middle palmar, thenar or hypothenar spaces, drainage of (S) | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 7035 | Ingrowing toenail, excision of nail bed (G) | 16.50 | 18.00 | 15.00 | 15.00 | 15.00 | 15.00 |
| 7037 | Ingrowing toenail, excision of nail bed (S) | 40.00 | 30.00 | 30.00 | 25.00 | 30.00 | 20.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | SA | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7041 | Insertion of orthopaedic pin or wire where no other surgical procedure is performed (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7043 | Insertion of orthopaedic pin or wire where no other surgical procedure is performed (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7044 | Insertion of orthopaedic pin or wire where no other surgical procedure is performed (D) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7047 | Osteosynthesis by Smith-Petersen nail | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 7051 | Temporo-mandibular meniscectomy | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7052 | Temporo-mandibular meniscectomy (D) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7055 | Joint (other than spine), manipulation of, under general anaesthesia (G) | 19.00 | 19.00 | 19.00 | 19.00 | 19.00 | 19.00 |
| 7056 | Joint (other than spine), manipulation of, under general anaesthesia (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7060 | Spine, manipulation of, under general anaesthesia (G) | 25.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 7061 | Spine, manipulation of, under general anaesthesia (S) | 35.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7065 | Spine, application of plaster jacket | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 7069 | Risser jacket, localiser or turn-buckle jacket, application of, body only | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 7074 | Risser jacket, localiser or turn-buckle jacket, application of, body and head | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 |
| 7078 | Scoliosis, spinal fusion for | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 7082 | Scoliosis, re-exploration for adjustment or removal of Harrington rods or similar devices | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 7087 | Application of halo for spinal fusion in the treatment of scoliosis, as an independent procedure | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7091 | Bone graft to spine, posterior, not covered by Item 7095 or 7104 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7095 | Bone graft to spine, postero-lateral for spondylolisthesis | 230.00 | 230.00 | 230.00 | 230.00 | 230.00 | 230.00 |
| 7097 | Anterior interbody spinal fusion to cervical spine—one level | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 7098 | Anterior interbody spinal fusion to cervical spine—more than one level | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 7101 | Anterior interbody spinal fusion to lumbar or thoracic spine—one level | 230.00 | 230.00 | 230.00 | 230.00 | 230.00 | 230.00 |
| 7103 | Anterior interbody spinal fusion to lumbar or thoracic spine—more than one level | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 | 300.00 |
| 7104 | Bone graft to spine with laminectomy and posterior interbody fusion | 200.00 | 225.00 | 200.00 | 200.00 | 200.00 | 200.00 |
| 7108 | Bone graft not covered by any other item in this Part | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 7109 | Bone graft not covered by any other item in this Part (D) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7113 | Shoulder—removal of calcium deposit from cuff (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 7114 | Shoulder-removal of calcium deposit from cuff (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7118 | Shoulder—arthrotomy | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7122 | Shoulder—arthroplasty or plastic reconstruction | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 |
| 7126 | Shoulder—arthrodesis or arthrectomy | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7130 | Finger or other small joint—arthrodesis, arthrectomy or arthroplasty | 60.00 | 60.00 | 50.00 | 45.00 | 45.00 | 45.00 |
| 7135 | Small joint—arthrotomy (G) | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 | 12.50 |
| 7136 | Small joint—arthrotomy (S) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7141 | Zygapophyseal joints, arthrectomy of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7145 | Sacro-iliac joint—arthrodesis | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 7149 | Other large joint—arthrodesis, arthrectomy, arthroplasty or total synovectomy of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7154 | Other large joint—arthrotomy (G) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 7155 | Other large joint—arthrotomy (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7157 | Hip—arthrodesis | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 7158 | Hip—arthrectomy | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 7160 | Hip—arthroplasty (Austin Moore, Girdlestone or similar procedure) | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 7161 | Hip—arthroplasty, cup or mould (Smith-Petersen or similar procedure) | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 | 190.00 |
| 7162 | Hip-arthroplasty, total replacement (McKee-Farrer, Chamley or similar procedure) | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 | 275.00 |
| 7163 | Hip—arthrotomy | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7167 | Knee—arthrodesis, arthrectomy, arthroplasty or total synovectomy of | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 7171 | Knee—arthrotomy | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 7173 | Knee—arthroscopy of, not associated with any other operative procedure on that knee | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7176 | Knee—operation for internal derangement | 85.00 | 90.00 | 85.00 | 100.00 | 85.00 | 65.00 |
| 7180 | Knee—reconstruction of cruciate ligaments | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7184 | Knee—reconstruction of capsular ligaments | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7189 | Knee—excision of patella (G) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 7190 | Knee—excision of patella (S) | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 7195 | Knee—operation for recurrent dislocation of patella | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7199 | Joint, aspiration of, or intra-articular injection into, or both of those services (G) | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | SA | WA | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7200 | Joint, aspiration of, or intra-articular injection into, or both of those services (S) | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 7205 | Synovial cavity, aspiration of, or intra- synovial injection of, or both of those services (G) | 4.50 | 4.50 | 4.50 | 4.50 | 4.50 | 4.50 |
| 7206 | Synovial cavity, aspiration of, or intra- synovial injection of, or both of those services (S) | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| 7210 | Joint, repair of capsule or ligament of | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 7214 | Foot or ankle region—triple arthrodesis | 110.00 | 125.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7218 | Calcanean spur, removal of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7221 | Hallux valgus, correction of (G) | 55.00 | 50.00 | 45.00 | 45.00 | 45.00 | 35.00 |
| 7222 | Hallux valgus, correction of (S) | 70.00 | 70.00 | 60.00 | 60.00 | 60.00 | 50.00 |
| 7224 | Hallux valgus, correction of, with osteotomy or osteectomy of phalanx or metatarsal (G) | 72.50 | 67.50 | 62.50 | 60.00 | 62.50 | 50.00 |
| 7225 | Hallux valgus, correction of, with osteotomy or osteectomy of phalanx or metatarsal (S) | 105.00 | 95.00 | 82.50 | 80.00 | 85.00 | 70.00 |
| 7226 | Hallux valgus, correction of, with osteotomy or osteectomy of phalanx or metatarsal and transplantation of adductor hallucis tendon | 125.00 | 115.00 | 102.50 | 100.00 | 105.00 | 90.00 |
| 7227 | Hallux valgus and hammer toe, correction of, with subcutaneous tenotomy, one or more tendons (G) | 78.75 | 73.75 | 68.75 | 68.75 | 68.75 | 60.00 |
| 7228 | Hallux valgus and hammer toe, correction of, with subcutaneous tenotomy, one or more tendons (S) | 100.00 | 100.00 | 90.00 | 90.00 | 90.00 | 80.00 |
| 7230 | Hallux rigidus, correction of | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7233 | Hammer toe, correction of (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 7234 | Hammer toe, correction of (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7238 | Cervical rib, removal of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7242 | Scalenotomy | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 7246 | Acromion or coraco-acromion ligament, removal of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7250 | Excision of exostosis of small bone (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 7252 | Excision of exostosis of small bone (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7253 | Excision of exostosis of small bone (D) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7256 | Excision of exostosis of large bone (G) | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 7257 | Excision of exostosis of large bone (S) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7261 | Osteotomy or osteectomy of phalanx, metacarpal or metatarsal (G) | 35.00 | 35.00 | 35.00 | 30.00 | 35.00 | 30.00 |
| 7263 | Osteotomy or osteectomy of phalanx, metacarpal or metatarsal (S) | 50.00 | 50.00 | 45.00 | 40.00 | 50.00 | 40.00 |
| 7266 | Osteotomy of phalanx, metacarpal or metatarsal, with internal fixation | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7271 | Osteotomy or osteectomy of fibula, radius, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | SA | WA | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7275 | Osteotomy of fibula, radius, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus, with internal fixation | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7280 | Osteotomy or osteectomy of tibia or humerus | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 7284 | Osteotomy or osteectomy of femur or pelvic bone | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 7289 | Osteotomy of tibia, humerus, femur or pelvic bone, with internal fixation | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 7292 | Osteotomy, bilateral iliac, preliminary to repair of ectopic bladder | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 7293 | Osteotomy of femur—sub-trochanteric | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 7297 | Osteectomy of vertebral bodies | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 | 115.00 |
| 7301 | Osteotomy and distraction for lengthening of limb | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 7305 | Removal of distracting apparatus from limb, without internal fixation | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 7309 | Removal of distracting apparatus from limb, with internal fixation | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7315 | Flexor tendon of hand, primary suture of (G) | 31.00 | 31.00 | 31.00 | 31.00 | 31.00 | 31.00 |
| 7316 | Flexor tendon of hand, primary suture of (S) | 41.00 | 41.00 | 41.00 | 41.00 | 41.00 | 41.00 |
| 7318 | Flexor tendon of hand, secondary suture of (G) | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 | 56.50 |
| 7319 | Flexor tendon of hand, secondary suture of (S) | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 7325 | Extensor tendon of hand, primary suture of (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7326 | Extensor tendon of hand, primary suture of (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 7328 | Extensor tendon of hand, secondary suture of (G) | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 | 37.50 |
| 7329 | Extensor tendon of hand, secondary suture of (S) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7333 | Achilles tendon or other large tendon, suture of (G) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7334 | Achilles tendon or other large tendon, suture of (S) | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 7338 | Tendon of foot, primary suture of (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7339 | Tendon of foot, primary suture of (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7343 | Tendon of foot, secondary suture of (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7344 | Tendon of foot, secondary suture of (S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 7348 | Tenotomy, subcutaneous, one or more tendons | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 7352 | Tenotomy, open, with or without tenoplasty | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7356 | Tendon or ligament transplantation not covered by any other item | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | SA | WA | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7360 | Iliopsoas tendon, transplantation of, to greater trochanter | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 7364 | Tendon graft | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 7368 | Achilles tendon or other large tendon— operation for lengthening. | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7372 | Tendon sheath, incision of (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7373 | Tendon sheath, incision of (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7377 | Stenosing tendovaginitis, open operation for (G) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 7378 | Stenosing tendovaginitis, open operation for (S) | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7382 | Tendon sheath of finger or thumb, synovectomy of | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 7386 | Cicatricial flexion contracture of joint, correction of, involving tissues deeper than skin and subcutaneous tissue | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7390 | Dupuytren’s contracture, subcutaneous fasciotomy (G) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7391 | Dupuytren’s contracture, subcutaneous fasciotomy(S) | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 7395 | Dupuytren’s contracture, radical operation for (G) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7396 | Dupuytren’s contracture, radical operation for (S) | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 | 80.00 |
| 7400 | Volkmann’s contracture, operation for | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| *Division 12—Paediatric* | | | | | | | |
| *Manipulation and Plaster Work for Correction of Congenital Abnormalities* | | | | | | | |
| 7450 | Congenital dislocation of hip— manipulation and plaster (one hip) | 35.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7454 | Talipes equinovarus—manipulation under general anaesthesia | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7458 | Talipes equinovarus—manipulation and plaster under general anaesthesia | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |
| 7462 | Calcaneus valgus—manipulation under general anaesthesia | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7466 | Calcaneus valgus—manipulation and plaster under general anaesthesia | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 | 11.00 |
| 7470 | Pes planus—manipulation under general anaesthesia | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7474 | Pes planus—manipulation and plaster under general anaesthesia | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 7478 | Genu varum or genu valgum—manipulation under general anaesthesia | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7482 | Genu varum or genu valgum—manipulation and plaster under general anaesthesia | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7486 | Genu varum or genu valgum—manipulation and plaster with osteoclasis | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7490 | Contractures, manipulation under general anaesthesia, not covered by any other item in this Part | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7494 | Contractures, manipulation and plaster under general anaesthesia, not covered by any other item in this Part | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 7498 | Spastic paralysis—manipulation and plaster (one limb) | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| *Operations for Correction of Congenital Abnormalities* | | | | | | | |
| 7510 | Subdural haemorrhage, tap for, each tap | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7514 | Subdural haemorrhage, osteoplastic flap and excision of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7519 | Hydrocephalus—suboccipital decompression, third ventriculostomy or Torkildsen’s operation | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7523 | Ventriculo-jugular shunt | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7528 | Ventriculo-atrial shunt for hydrocephalus | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7532 | Ventriculo-atrial shunt for hydrocephalus, revision or removal of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7537 | Hydrocephalus, spino-ureteral, spino- peritoneal or spino-pleural anastomosis of, or ventricular cable shunt for | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7541 | Craniostenosis, operation for—single suture | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7543 | Craniostenosis, operation for—more than one suture | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 7545 | Arachnoidal cyst, operation for | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7549 | Hypertelorism, correction of | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7554 | Choanal atresia, plastic repair of | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 7557 | Choanal atresia, repair of by puncture and dilatation | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 7561 | Macrocheilia, macroglossia or macro-stomia, operation for | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7565 | Torticollis, operation for | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7569 | Oesophagus, radical correction of congenital stenosis of | 195.00 | 195.00 | 195.00 | 195.00 | 195.00 | 195.00 |
| 7573 | Tracheo-oesophageal fistula, correction of | 195.00 | 195.00 | 195.00 | 195.00 | 195.00 | 195.00 |
| 7577 | Duodenal obstruction (congenital) anastomosis or resection of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7581 | Hypertrophic pyloric stenosis, operation for (G) | 67.50 | 67.50 | 67.50 | 67.50 | 67.50 | 67.50 |
| 7582 | Hypertrophic pyloric stenosis, operation for (S) | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 7586 | Congenital volvulus of the small intestine, correction of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7590 | Intestinal atresia or stenosis—excision or anatomosis (or both) | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | WA | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7594 | Hirschsprung’s disease, rectosigmoidectomy for | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7598 | Exomphalos, operation for | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7602 | Exomphalos, operation for, by plastic flap | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7607 | Imperforate anus, abdomino-perineal correction of | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7611 | Imperforate anus, correction of (other than abdomino-perineal) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7616 | Contracted bladder neck (congenital), wedge excision or perurethral resection of | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7620 | Urachal fistula, operation for | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7625 | Ectopic bladder—‘turning-in’ operation | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7629 | Pinhole urinary meatus—meatotomy (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7631 | Pinhole urinary meatus—meatotomy (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7635 | Urethral valves, open removal of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7640 | Incontinence of urine (congenital)—plastic operation to sphincter | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 7644 | Lymphangiectasis of limb (Milroy’s disease)—excision of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| *Operations for Excision of Congenital Abnormalities* | | | | | | | |
| 7649 | Abnormal limb, amputation of | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7653 | Extra digit, amputation of (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7655 | Extra digit, amputation of (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7659 | Dermoid, periorbital, excision of (G) | 19.00 | 19.00 | 19.00 | 19.00 | 19.00 | 19.00 |
| 7661 | Dermoid, periorbital, excision of (S) | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 | 25.00 |
| 7665 | Dermoid, orbital, excision of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7670 | Dermoid of nose, superficial, excision of (G) | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7671 | Dermoid of nose, superficial, excision of (S) | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7676 | Dermoid of nose, excision of, with intranasal extension | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7680 | Sacrococcygeal dermoid or teratoma other than pilonidal sinus, excision of | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 7685 | Myelomeningocele—excision of sac | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7688 | Myelomeningocele, extensive, requiring formal repair with skin flaps or Z plasty | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| *Operations for Acquired Conditions* | | | | | | | |
| 7700 | Megacolon, colectomy | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 7704 | Epiphysitis (Perthes’, Calve’s or Scheurermann’s) plaster for | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7708 | Epiphysitis (Sever’s, Kohler’s, Kienboch’s or Schlatter’s), plaster for | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| *Division 13*—*Plastic and Reconstructive  Meticulous Plastic Repair Designed to Obtain Maximal Functional or  Cosmetic Results including the Preparation of the Defect Requiring Repair* | | | | | | | |
| 7750 | Derma-fat fascia graft (including transplant or muscle flap) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7754 | Abrasive therapy, limited area | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 7758 | Abrasive therapy, extensive area | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7762 | Electrolysis epilation, each treatment | 10.00 | 8.00 | 7.50 | 7.50 | 8.00 | 7.50 |
| 7767 | Angioma, cauterisation of or injection into, under general anaesthesia | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7768 | Angioma, cauterisation of or injection into, under general anaesthesia (D) | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 | 8.80 |
| 7771 | Angioma of skin and subcutaneous tissue or mucous surface, small, excision and repair of | 25.00 | 25.00 | 20.00 | 20.00 | 20.00 | 16.00 |
| 7772 | Angioma of skin and subcutaneous tissue or mucous surface, small, excision and repair of (D) | 25.00 | 25.00 | 20.00 | 20.00 | 20.00 | 16.00 |
| 7775 | Angioma of skin and subcutaneous tissue or mucous surface, large, excision and repair of | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 7776 | Angioma of skin and subcutaneous tissue or mucous surface, large, excision and repair of (D) | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 | 30.00 |
| 7779 | Angioma involving deeper tissue, small, excision and repair of | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7783 | Angioma involving deeper tissue, large, excision and repair of | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 7787 | Haemangioma of neck, deep-seated, excision of | 105.00 | 105.00 | 105.00 | 105.00 | 105.00 | 105.00 |
| 7791 | Major excision and grafting for lymphoedema | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 7795 | Foreign implants for contour reconstruction | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| *Meticulous Plastic Repair of Limb (above hand or foot) or of  Trunk Designed to Obtain Maximal Functional or Cosmetic Results including the  Preparation of the Defect Requiring Repair* | | | | | | | |
| 7850 | Single stage local flap repair, simple, small | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7854 | Single stage local flap repair, complicated or large | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 7858 | Direct flap repair (cross leg or similar), first stage | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 7862 | Direct flap repair (cross leg or similar), second stage | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7866 | Direct flap repair, small, first stage | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 7870 | Direct flap repair, small, second stage | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 | 13.00 |
| 7874 | Indirect flap or tubed pedicle, formation of | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 |
| 7877 | Indirect flap or tubed pedicle, delay, intermediate transfer or detachment of | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7881 | Indirect flap or tubed pedicle, preparation of site and attachment to site | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7885 | Indirect flap or tubed pedicle, spreading of pedicle, as a separate procedure | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 7889 | Direct, indirect or local flap repair, revision of graft | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 7893 | Free grafts (split skin or pinch grafts) on granulating areas, small | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 | 16.50 |
| 7897 | Free grafts (split skin) on granulating areas, extensive | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 7901 | Free grafts (split skin) to extensive burns | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7905 | Free grafts (split skin) including elective dissection, small | 31.00 | 31.00 | 31.00 | 31.00 | 31.00 | 31.00 |
| 7909 | Free grafts (split skin) including elective dissection, extensive. | 65.00 | 75.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7913 | Free full thickness grafts | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7917 | Cineplasty for amputation stump | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 7921 | Mammaplasty, reduction or repositioning (unilateral) | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 7925 | Mammaplasty, augmentation, prosthetic (unilateral) | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 | 140.00 |
| 7929 | Mammaplasty, derma-fat fascia (unilateral) | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| *Meticulous Plastic Repair of Hands, Feet, Scalp, Face or Neck Designed to Obtain Maximal Functional or Cosmetic Results including the Preparation of the Defect Requiring Repair* | | | | | | | |
| 7950 | Single stage local flap repair, simple, small | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7952 | Single stage local flap repair following removal of tumour, cyst or scar, cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter (G) | 45.00 | 44.50 | 44.50 | 44.50 | 44.50 | 44.00 |
| 7953 | Single stage local flap repair following removal of tumour, cyst or scar, cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter (S) | 52.50 | 52.50 | 50.00 | 50.00 | 50.00 | 48.00 |
| 7954 | Single stage local flap repair, complicated or large | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 7958 | Direct flap repair, small (cross finger or similar), first stage | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7962 | Direct flap repair, small (cross finger or similar), second stage | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7966 | Indirect flap or tubed pedicle, formation of | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7970 | Indirect flap or tubed pedicle, delay, intermediate transfer or detachment of | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 7974 | Indirect flap or tubed pedicle, preparation of site and attachment to site | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 7978 | Indirect flap or tubed pedicle, spreading of pedicle, as a separate procedure | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 7982 | Direct, indirect or local flap repair, revision of graft | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 | 39.00 |
| 7987 | Hair transplants, multiple punch or similar technique, involving not more than 40 punch grafts | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 | 20.00 |
| 7988 | Hair transplants, multiple punch or similar technique, involving more than 40 but not more than 100 punch grafts | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| 7989 | Hair transplants, multiple punch or similar technique, involving more than 100 punch grafts | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 7994 | Free grafts (split skin or pinch grafts) on granulating areas, small | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 | 22.00 |
| 7998 | Free grafts (split skin) on granulating areas, extensive | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 8002 | Free grafts (split skin) to extensive burns | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 8007 | Free grafts (split skin) including elective dissection, small | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8011 | Free grafts (split skin) including elective dissection, extensive. | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 8015 | Free full thickness grafts | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 8020 | Digit, transplantation of—complete procedure | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8024 | Macrodactyly, plastic reduction of, each finger | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 | 45.00 |
| 8029 | Face, operations involving supportive grafts | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8033 | Suspension operation for facial paralysis | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 8037 | Melonoplasty | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 | 250.00 |
| 8042 | Orbital cavity, reconstruction of floor or roof of | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
| 8046 | Maxilla, resection of | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 | 165.00 |
| 8050 | Mandible, resection of | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8051 | Mandible, resection of (D) | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8054 | Mandible, segmental resection of, for tumours | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8055 | Mandible, segmental resection of, for tumours (D) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8058 | Mandible, section-fixation for prognathism or retrognathism | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8059 | Mandible, section-fixation for prognathism or retrognathism (D) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8060 | Mandible, hemi-mandibular reconstruction with bone graft, not associated with Item 8050 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 8062 | Mandible, condylectomy | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8063 | Mandible, condylectomy (D) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | WA | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 8066 | Osteotomy or osteectomy of mandible (other than alveolar margins) for congenital malformation not covered by any other item in this Part | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 8067 | Osteotomy or osteectomy of mandible (other than alveolar margins) for congenital malformation not covered by any other item in this Part (D) | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 8070 | Osteotomy or Osteectomy of Maxilla (other than alveolar margins) for congenital malformation not covered by any other item in this Part | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8071 | Osteotomy or Osteectomy of Maxilla (other than alveolar margins) for congenital malformation not covered by any other item in this Part (D) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| *Meticulous Plastic repair of Eyelids, Nose, Ears, Lips, Palate or Pharynx designed to obtain maximal functional or cosmetic results including the preparation of the defect requiring repair* | | | | | | | |
| 8110 | Single stage local flap repair, simple, small | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8111 | Single stage local flap repair, simple, small (D) | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8114 | Single stage local flap repair, complicated or large | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 8119 | Direct flap repair, first stage | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 8123 | Direct flap repair, second stage | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8128 | Indirect flap or tubed pedicle, formation of | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 8132 | Indirect flap or tubed pedicle, delay, intermediate transfer or detachment of | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8136 | Indirect flap or tubed pedicle, preparation of site and attachment to site | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8141 | Indirect flap or tubed pedicle, spreading of pedicle, as a separate procedure | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 | 85.00 |
| 8145 | Direct, indirect or local flap repair, revision of graft | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 | 55.00 |
| 8150 | Free grafts (split skin or pinch grafts) on granulating areas, small | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 | 33.00 |
| 8154 | Free grafts (split skin) on granulating areas, extensive | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8159 | Free grafts (split skin) to extensive burns | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8163 | Free grafts (split skin) including elective dissection, small | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8167 | Free grafts (split skin) including elective dissection, extensive. | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8172 | Free full thickness grafts | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 8176 | Whole thickness repair of eyelid | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8180 | Partial reconstruction of eyelid or socket | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 8184 | Correction of ptosis (unilateral) | 120.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 8188 | Ectropion or entropion, correction of (unilateral) | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 8192 | Reduction of eyelid or eyelids of one eye | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 | 60.00 |
| 8196 | Symblepharon, grafting for | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8200 | Rhinoplasty involving correction of bony or cartilaginous vault of the nose | 110.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 8204 | Rhinoseptoplasty | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |
| 8208 | Rhinoplasty, cosmetic, not covered by Item 6584 or 6586 | 180.00 | 200.00 | 180.00 | 180.00 | 180.00 | 180.00 |
| 8212 | Rhinoplasty, secondary revision of | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 | 27.50 |
| 8216 | Rhinophyma, correction of | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8220 | Composite graft to nose or ear | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8224 | Lop ear, bat ear or similar deformity, correction of | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 | 100.00 |
| 8228 | Pinna, amputation of, complete | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 | 36.00 |
| 8232 | Congenital atresia, reconstruction of external auditory canal | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8236 | Full thickness lip reconstruction, other than than simple suture—complete procedure | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 8240 | Cleft lip, complete primary repair, unilateral | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 8244 | Cleft lip, complete primary repair, one stage, bilateral | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 | 160.00 |
| 8248 | Cleft lip, incomplete primary repair, unilateral | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8252 | Cleft lip, secondary correction, partial or incomplete | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 | 50.00 |
| 8256 | Cleft lip, secondary correction, complete revision | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 | 95.00 |
| 8260 | Cleft lip, secondary correction, Abbe flap | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 | 220.00 |
| 8264 | Cleft lip, secondary correction of nostril or nasal tip | 41.00 | 41.00 | 41.00 | 41.00 | 41.00 | 41.00 |
| 8268 | Cleft palate, primary repair, partial cleft | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 8269 | Cleft palate, primary repair, partial cleft (D) | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 | 120.00 |
| 8272 | Cleft palate, primary repair, complete deft | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |

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|  |  | Fees |  |  |  |  |  |
| Item No. | Medical service | N.S.W. | Vic. | Qld | S.A. | W.A. | Tas. |
|  |  | $ | $ | $ | $ | $ | $ |
| 8273 | Cleft palate, primary repair, complete cleft (D) | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 | 150.00 |
| 8276 | Cleft palate, secondary repair, incomplete | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8277 | Cleft palate, secondary repair, incomplete (D) | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 | 65.00 |
| 8280 | Cleft palate, secondary repair, lengthening procedure | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8281 | Cleft palate, secondary repair, lengthening procedure (D) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8284 | Cleft palate, partial repair, complex cleft | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8285 | Cleft palate, partial repair, complex cleft (D) | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 | 110.00 |
| 8288 | Pharyngeal flap or pharyngoplasty | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 | 130.00 |

SCHEDULE 2 Section 30

HEADS OF AGREEMENT

1. The agreement is to be in force for a specified period.

2. The agreement is to specify the hospitals in the State that are to be recognized hospitals for the purposes of the agreement.

3. Australia is to meet, in accordance with Heads 4 and 5, an amount equal to 50 per centum of the net operating costs of all the recognized hospitals in the State in respect of the period during which the agreement is in force or 50 per centum of the aggregate of the amounts paid by the State to all the recognized hospitals in the State towards meeting the costs of operating those hospitals during that period, whichever is the less.

4. Australia is to make daily bed payments, in accordance with section 31, to each recognized hospital in the State in respect of the period during which the agreement is in force.

5. Australia is to pay to the State an amount equal to the amount by which the aggregate of the daily bed payments under Head 4 is less than the amount that Australia is to meet under Head 3.

6. The State is to endeavour to ensure that care and treatment provided by recognized hospitals in the State, in accordance with Heads 7 to 10 (inclusive), are, or will be, available to all eligible persons in the State who wish to receive them.

7. An eligible person is to be entitled to receive care and treatment as a hospital patient in a recognized hospital free of charge.

8. An eligible person is to be entitled to receive free of charge out-patient services provided by a recognized hospital, but specified out-patient services may be restricted to persons who are able to satisfy a means test.

9. An eligible person who—

(a) is a private patient in a recognized hospital; or

(b) being a hospital patient in a recognized hospital, elects to pay hospital charges in respect of accommodation in a single room or small ward in the hospital,

is to be charged only in accordance with the scale of hospital charges set out in the agreement.

10. Unless the agreement otherwise provides, Heads 7 and 9 do not apply in relation to the care and treatment of an eligible person in a recognized hospital in respect of an injury or

SCHEDULE 2—continued

disease if the eligible person is entitled to the payment of, or has been paid, compensation or damages in respect of that injury or disease.

11. The agreement may be varied from time to time by agreement between Australia and the State.