

NATIONAL HEALTH.

No. 37 of 1964.

An Act to amend the *National Health Act* 1953–1963.

[Assented to 28th May, 1964.]

BE it enacted by the Queen's Most Excellent Majesty, the Senate, and the House of Representatives of the Commonwealth of Australia, as follows:—

Short title
and citation.

1.—(1.) This Act may be cited as the *National Health Act* 1964.

(2.) The *National Health Act* 1953–1963* is in this Act referred to as the Principal Act.

(3.) The Principal Act, as amended by this Act, may be cited as the *National Health Act* 1953–1964.

Commence-
ment.

2.—(1.) Subject to this section, this Act shall come into operation on the day on which it receives the Royal Assent.

(2.) Sub-section (1.) of section three of this Act shall come into operation on the first day of July, One thousand nine hundred and sixty-four.

(3.) Sub-section (2.) of section three, sections five to thirteen (inclusive) and sections fifteen, sixteen and twenty-four of this Act shall come into operation on the first day of June, One thousand nine hundred and sixty-four.

Interpretation.

3.—(1.) Section four of the Principal Act is amended—

(a) by omitting paragraph (a) of the definition of “ hospital ” in sub-section (1.) and inserting in its stead the following paragraph:—

“ (a) an institution carried on exclusively or principally for the care and treatment of mentally ill or mentally defective persons, being an institution conducted by, or in receipt of a grant for maintenance from, a State; ”;
and

(b) by omitting paragraph (a) of the definition of “ nursing home ” in sub-section (1.) and inserting in its stead the following paragraph:—

“ (a) an institution carried on exclusively or principally for the care and treatment of mentally ill or mentally defective persons, being an institution conducted by, or in receipt of a grant for maintenance from, a State; or ”.

* Act No. 95, 1953, as amended by No. 68, 1955; Nos. 55 and 95, 1956; No. 92, 1957; No. 68, 1958; No. 72, 1959; No. 16, 1961; No. 82, 1962; and No. 77, 1963.

(2.) Section four of the Principal Act is amended by omitting sub-section (3.) and inserting in its stead the following sub-sections:—

“(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 medical service constituted by the administration of the anaesthetic.

“(4.) In this Act, a reference 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), other than an attendance at which an examination of the patient’s eyes is made in consequence of which spectacle lenses are prescribed.”.

4. After section nine of the Principal Act the following sections are inserted:—

“9A.—(1.) The Minister may, through any acoustic laboratory Hearing aids. established under the *Acoustic Laboratories Act* 1948 or in any other way, arrange for the supply by the Commonwealth of hearing aids to persons under the age of twenty-one years and suffering from defective hearing, and for the maintenance of hearing aids so supplied.

“(2.) A hearing aid supplied to a person under the last preceding sub-section remains the property of the Commonwealth.

“(3.) For the purposes of section one hundred and thirty-seven of this Act, any expenditure incurred by or on behalf of the Commonwealth in purchasing or otherwise obtaining hearing aids to be supplied under this section shall be deemed not to be expenditure of a capital nature.

“9B. The Minister may provide, or arrange for the provision Poliomyelitis vaccine. of, vaccine for the purpose of immunizing persons against poliomyelitis.”.

Interpretation.

5. Section thirteen of the Principal Act is amended—

(a) by omitting from sub-section (1.) the definition of “contributor” and inserting in its stead the following definition:—

“ ‘contributor’ means a person who pays contributions, or on whose behalf contributions are paid, to the medical benefits fund conducted by a registered medical benefits organization, being a person—

(a) who is, if there is rendered to him by or on behalf of a medical practitioner any one of all the medical services that were specified in the First Schedule to this Act as in force immediately before the first day of June, One thousand nine hundred and sixty-four, entitled, subject to the rules of the registered organization—

(i) to receive from the registered organization a fund benefit of an amount equal to, or greater than, the amount that was specified in that Schedule in relation to the medical service; or

(ii) to have the medical service provided without charge by or on behalf of a medical practitioner under a contract arrangement; or

(b) by whom or on whose behalf contributions to that medical benefits fund have been continuously payable from a date as at which he was a contributor within the meaning of the definition of ‘contributor’ that was in force for the purposes of this Part at that date,

and, except in relation to the payment of contributions, includes a dependant of such a person; ”;

(b) by omitting from sub-section (1.) the definition of “professional service” and inserting in its stead the following definition:—

“ ‘professional service’ means a medical service specified in the Schedule to this Act that is rendered by or on behalf of a medical practitioner; ”; and

- (c) by omitting from sub-section (2.) the word “professional” (wherever occurring) and inserting in its stead the word “medical”.

6. Section fourteen of the Principal Act is amended by omitting sub-section (1.) and inserting in its stead the following sub-section:—

Commonwealth benefit payable in respect of services specified in the Schedule.

“(1.) Where medical expenses are incurred by a contributor in respect of a professional service rendered to the contributor or to a dependant of the contributor, Commonwealth benefit of the amount specified in the Schedule to this Act in relation to that service is payable subject to and in accordance with the provisions of this Part.”.

7.—(1.) Section fifteen A of the Principal Act is amended by omitting sub-section (1.) and inserting in its stead the following sub-section:—

Medical service not specified in Schedule.

“(1.) Where a medical service is not specified in any of Parts 2 to 10 (inclusive) of the Schedule to this Act, the Minister may, by writing under his hand, determine an amount not exceeding Thirty pounds to be the appropriate amount of Commonwealth benefit in respect of that medical service and, where a contributor incurs or has incurred medical expenses in respect of the rendering by or on behalf of a medical practitioner of that medical service while the determination is in operation or is deemed to have been in operation—

- (a) that medical service shall be deemed to be a medical service specified in the Schedule to this Act; and
- (b) the amount specified in the determination shall be deemed to be specified in that Schedule in relation to that medical service.”.

(2.) Notwithstanding the amendment made by the last preceding sub-section, section fifteen A of the Principal Act continues in force for the purpose of determining an amount of Commonwealth benefit in respect of a medical service where a contributor has incurred medical expenses in respect of the rendering by or on behalf of a medical practitioner of that medical service before the commencement of this sub-section.

8. Section sixteen of the Principal Act is amended—

- (a) by omitting from sub-section (1.) the words “First or Second”;
- (b) by omitting from sub-section (1.) the words “either of those Schedules” (wherever occurring) and inserting in their stead the words “that Schedule”;
- (c) by omitting from sub-section (1.) the words “Twenty-two pounds ten shillings” (wherever occurring) and inserting in their stead the words “Thirty pounds”; and

Amount of Commonwealth benefit payable where two or more operations are performed.

(d) by omitting sub-section (2.) and inserting in its stead the following sub-sections:—

“(2.) This section does not apply in relation to an operation, being one of two or more operations performed under the one anaesthetic on the same contributor, if the medical 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.

“(3.) In this section, ‘operation’ includes—

- (a) a Caesarean section; and
- (b) the treatment of a dislocation or fracture,

but does not include a medical service specified in Division 2 of Part 10 of the Schedule to this Act.”.

Administration
of anaesthetic
and assistance
at operations.

9. Section seventeen of the Principal Act is amended by omitting sub-sections (2.) and (3.) and inserting in their stead the following sub-sections:—

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

“(3.) Where an amount of Commonwealth benefit is specified in the Schedule to this Act in respect of—

- (a) assistance at an operation;
- (b) the administration of an anaesthetic; or
- (c) assistance in the administration of an anaesthetic,

the amount so specified is the amount payable whether the assistance is rendered or the anaesthetic is administered by one or more than one medical practitioner.”.

Post-operative
treatment
deemed to
form part of
medical
service.

10. Section eighteen of the Principal Act is amended by omitting the words “a professional service specified in Part 1 of the First Schedule” and inserting in their stead the words “a medical service specified in Part 1 of the Schedule”.

Commonwealth
benefit not
payable where
medical
expenses are
payable to
public hospitals.

11. Section nineteen of the Principal Act is amended by omitting from sub-section (2.) the definition of “professional service” and inserting in its stead the following definition:—

“‘professional service’ does not include a medical service specified in items sixty-three to sixty-six (inclusive) in Part 6 of the Schedule to this Act or in any item in Part 7 or 8 of that Schedule;”.

Payment of
Commonwealth
benefit.

12. Section twenty-three of the Principal Act is amended by omitting from sub-section (2.) the words “specified in the First or Second Schedule to this Act”.

13. Section twenty-five of the Principal Act is amended by omitting sub-section (1.) and inserting in its stead the following sub-section:—

Commonwealth
benefit in case
of contract
arrangements.

“(1.) Where some or all professional services are provided for contributors under a contract arrangement made by a registered medical benefits organization to which those contributors pay contributions, the Minister may, in his discretion, authorize payment to the organization of an amount not exceeding one-half of the payments made by the organization to medical practitioners under the contract arrangement.”.

14. After section forty-nine of the Principal Act the following section is inserted:—

“ 49A. Where—

Payment to
contributor
in certain
circumstances.

(a) Commonwealth benefit is payable, under this Division, in respect of hospital treatment received by a contributor; and

(b) the Director-General is satisfied that an amount equal to the amount of that benefit has not been paid by an organization to the contributor or to the proprietor of the hospital, whether on behalf of the contributor or not, as provided by section forty-seven of this Act,

the Director-General may authorize payment of the amount of the Commonwealth benefit to the contributor or to the proprietor of the hospital on behalf of the contributor.”.

15. Section sixty-six of the Principal Act is amended by omitting from sub-section (1.) the definition of “standard rate benefit” and inserting in its stead the following definition:—

Interpretation.

“ ‘standard rate benefit’ means—

(a) in relation to medical fund benefit—medical fund benefits in respect of all the medical services specified in the Schedule to this Act, being benefits equal in amounts to the amounts respectively specified in that Schedule in relation to those medical services; and

(b) in relation to hospital fund benefit—hospital fund benefit at the rate of Sixteen shillings per day; ”.

16. Section sixty-seven of the Principal Act is repealed and the following section inserted in its stead:—

“ 67. An organization the rules of which provide that, subject to those rules, if a person who contributes to the medical benefits fund of the organization or the spouse or dependant of such a

Eligibility of
organizations
for registration
for purposes
of Part III.

person has any one of all the medical services that were specified in the First Schedule to this Act as in force immediately before the first day of June, One thousand nine hundred and sixty-four, rendered to him by or on behalf of a medical practitioner—

(a) there shall be paid to that person a medical fund benefit of an amount equal to, or greater than, the amount that was specified in that Schedule in relation to the medical service; or

(b) the medical service shall be provided without charge under a contract arrangement,

is eligible to apply for registration as a registered medical benefits organization.”.

Eligibility of
organizations
for registration
for purposes
of Part V.

17. Section sixty-eight of the Principal Act is amended by omitting sub-section (1.) and inserting in its stead the following sub-section:—

“(1.) An organization the rules of which provide for payment of a hospital fund benefit of an amount of not less than Sixteen shillings per day in respect of the hospital treatment of a contributor to its funds is eligible to apply for registration as a registered hospital benefits organization.”.

18.—(1.) After section seventy-three of the Principal Act, the following section is inserted:—

Conditions of
registration of
organizations.

“73A.—(1.) The conditions that the Minister may impose under the last preceding section include the following conditions:—

(a) a condition that the organization will not enter into a refund agreement or become an agent of a party to a refund agreement for the purposes of the refund agreement; and

(b) a condition that the organization will keep a record, in a form approved by the Director-General, of the names and addresses, being addresses last known to the organization, of all members of the organization who were, immediately before the commencement of this section, and have continued to be, parties to refund agreements with registered organizations.

“(2.) In this section, ‘refund agreement’ has the same meaning as in Part VII.”.

(2.) The conditions specified in the section inserted by the last preceding sub-section shall, for the purposes of the Principal Act, as amended by this Act, be deemed to be, or to be included in, the conditions subject to which each organization that is a registered organization on the date of commencement of this sub-section is registered.

19. Section eighty-four of the Principal Act is amended— Interpretation.

(a) by inserting in sub-section (1.), after the definition of “brand”, the following definition:—

“ ‘friendly society body’ means a body (whether corporate or unincorporate) carrying on business for the benefit of members of a friendly society or friendly societies; ” ;

(b) by inserting in sub-section (1.), after the definition of “pharmaceutical benefit”, the following definition:—

“ ‘refund agreement’ means an agreement or arrangement under which a payment may be made by or at the direction of a person to another person in the event of the other person being charged an amount in respect of the supply of a pharmaceutical benefit; ” ;
and

(c) by inserting after sub-section (1.) the following sub-section:—

“(1A.) Where a refund agreement was entered into before the twenty-fourth day of April, One thousand nine hundred and sixty-four, and, on or after that date—

(a) the agreement was or is renewed on or before the date on which it would, but for that renewal, have expired;

(b) the period of operation of the agreement was or is extended on or before the date on which it would, but for that extension, have expired; or

(c) the rights and obligations under the agreement of the party by or at whose direction payments may be made under the agreement were or are transferred to another person, the renewal, extension or transfer shall, for the purposes of this Act, be deemed not to have been or to be an entering into a new agreement.”.

20.—(1.) Section ninety-one of the Principal Act is repealed and the following section inserted in its stead:—

“ 91.—(1.) In this section, ‘ friendly society dispensary ’ means a pharmaceutical chemist, being a friendly society or a friendly society body. Friendly
society
dispensaries.

“(2.) Subject to the next succeeding sub-section, the approval, under the last preceding section, of a friendly society dispensary as a pharmaceutical chemist in respect of particular premises (whether granted before or after the commencement of this section) is an approval to supply pharmaceutical benefits to persons generally at or from those premises and that friendly society dispensary is entitled to supply pharmaceutical benefits to persons generally at or from those premises.

“(3.) Where—

- (a) approval is granted under the last preceding section to a pharmaceutical chemist, being a friendly society dispensary, in respect of premises in a State; and
- (b) at the time the approval is granted, the number of premises in that State in respect of which approvals for the supply of pharmaceutical benefits generally are in force in favour of pharmaceutical chemists, being friendly society dispensaries, is not less than the number of such premises on the date of commencement of this section,

the approval referred to in paragraph (a) of this sub-section is an approval to supply pharmaceutical benefits at or from the premises in respect of which the approval is granted—

- (c) where the approved pharmaceutical chemist is a friendly society—to the members of the friendly society, to their spouses and to their children under the age of sixteen years, only; and
- (d) where the approved pharmaceutical chemist is a friendly society body—to the members of the friendly society, or of any of the friendly societies, for the benefit of whom the body is carrying on business, to their spouses and to their children under the age of sixteen years, only.”.

(2.) Where an approval under section ninety of the *National Health Act* 1953, or that Act as amended at any time, that—

- (a) was granted before the twenty-fourth day of April, One thousand nine hundred and sixty-four; and
- (b) is in force on the date of commencement of this sub-section,

is not an approval to supply pharmaceutical benefits to persons generally, the approval shall, by force of this sub-section, be deemed to be an approval to supply pharmaceutical benefits to persons generally at or from the premises in respect of which the approval is in force.

21. Section ninety-two A of the Principal Act is repealed and the following sections are inserted in its stead:—

“ 92A.—(1.) The approval of a pharmaceutical chemist or a medical practitioner for the purposes of this Part (including an approval granted before the commencement of this section and an approval of a person or body referred to in section eighty-three of this Act) is, by force of this section, subject to the following conditions:—

Approvals to
be subject to
conditions.

- (a) a condition that the approved pharmaceutical chemist or approved medical practitioner will not, by advertisement, notice or otherwise, state or indicate that he is willing to supply all or any pharmaceutical benefits to all or any persons without charge or for a charge that is less than the maximum charge that he may make without contravening section eighty-seven of this Act;
- (b) a condition that, where the approved pharmaceutical chemist or approved medical practitioner makes, by advertisement, notice or otherwise, a statement with respect to the charge for which he is willing to supply, or with respect to his willingness to supply without charge, drugs or medicinal preparations generally or a class of drugs or medicinal preparations, he will indicate in the statement whether or not the statement relates to the supply of pharmaceutical benefits;
- (c) a condition that the approved pharmaceutical chemist or approved medical practitioner will not follow a practice of supplying all or any pharmaceutical benefits to all or any persons without charge or for a charge that is less than the maximum charge that he may make without contravening section eighty-seven of this Act;
- (d) a condition that the approved pharmaceutical chemist or approved medical practitioner will not enter into a refund agreement or become an agent of a party to a refund agreement for the purposes of the refund agreement; and
- (e) a condition that the approved pharmaceutical chemist, being a friendly society or a friendly society body, will keep a record, in a form approved by the Director-General, of the names and addresses, being addresses last known to the pharmaceutical chemist, of all members—
 - (i) where the pharmaceutical chemist is a friendly society—of the friendly society; or

- (ii) where the pharmaceutical chemist is a friendly society body—of the friendly society, or of any of the friendly societies, for the benefit of the members of which the pharmaceutical chemist is carrying on business,

who were, immediately before the twenty-fourth day of April, One thousand nine hundred and sixty-four, and have continued to be, parties to agreements or arrangements under which contributions were and are payable by those members or on their behalf to friendly societies, or to friendly society bodies, for the purpose of obtaining benefits in respect of medicines.

“(2.) The conditions specified in paragraphs (a), (b) and (c) of the last preceding sub-section do not apply in relation to—

- (a) the supply, or a statement relating to the supply, of pharmaceutical benefits upon prescriptions that are marked, in accordance with the regulations, as prescriptions in respect of pensioners;

- (b) the supply, or a statement relating to the supply, of pharmaceutical benefits by a friendly society or by a friendly society body to members—

- (i) in the case of a friendly society—of the friendly society; or

- (ii) in the case of a friendly society body—of the friendly society, or of any of the friendly societies, for the benefit of the members of which the friendly society body is carrying on business,

who were, immediately before the twenty-fourth day of April, One thousand nine hundred and sixty-four, and have continued to be, parties to agreements or arrangements under which contributions were and are payable by those members or on their behalf to friendly societies, or to friendly society bodies, for the purpose of obtaining benefits in respect of medicines; or

- (c) the supply, or a statement relating to the supply, of pharmaceutical benefits by a friendly society or by a friendly society body to the spouses, or to the children under the age of sixteen years, of members referred to in the last preceding paragraph.

“(3.) For the purposes of sections ninety-five and ninety-seven of this Act, any conduct of an approved pharmaceutical chemist or an approved medical practitioner that is a contravention of the conditions specified in this section shall be deemed to be conduct that is an abuse of his approval.

“92B. A person shall not enter into a refund agreement, being a contract of insurance, under which he is an insurer.

Persons not to enter into certain refund agreements.

Penalty: Five pounds.”.

22. Section one hundred and four of the Principal Act is amended by inserting after sub-section (1.) the following sub-section:—

Powers of authorized persons.

“(1A.) For the purpose of ascertaining whether section ninety-two B of this Act is being complied with, an authorized person may—

- (a) enter at all reasonable times the premises of a person who holds himself out as being willing to enter into an agreement or arrangement under which a payment may be made, by or at the direction of the person, to another person in the event of the other person being charged an amount in respect of the supply of a pharmaceutical benefit;
- (b) make such examination or inquiry of any person as he thinks fit; and
- (c) take from a person referred to in paragraph (a) of this sub-section a book, document or writing in his possession or custody.”.

23. Section one hundred and seven of the Principal Act is amended by omitting sub-section (2.) and inserting in its stead the following sub-section:—

Interpretation.

“(2.) For the purposes of this Part—

- (a) the Australian Capital Territory shall be deemed to be part of the State of New South Wales; and
- (b) the Northern Territory of Australia shall be deemed to be part of the State of South Australia.”.

The Schedule.

24. The Schedules to the Principal Act are repealed and the following Schedule is inserted in their stead:—

THE SCHEDULE.

Section 14.

MEDICAL SERVICES IN RESPECT OF WHICH
COMMONWEALTH BENEFITS ARE PAYABLE.

Item No.	Medical Service.	Commonwealth Benefit.
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Part 1.—Professional Attendances not Covered by an Item in any other
Part of this Schedule.

	£	s.	d.
1. Professional attendance by a medical practitioner other than a specialist in the practice of his specialty—each attendance ..	8	0	
2. Professional attendance by a specialist in the practice of his specialty where patient is referred by another medical practitioner—for the first attendance	1	5	0
3. Professional attendance by a specialist in the practice of his specialty where patient is referred by another medical practitioner—for each attendance subsequent to the first during a single course of treatment	12	0	
4. Professional attendance by a specialist in the practice of his specialty where patient is not referred by another medical practitioner—each attendance	8	0	

Part 2.—Midwifery.

DIVISION 1.—GENERAL.

9. Antenatal care (not including any service or services covered by item 12, 18, 19, 21 or 22 in this Schedule), where attendances do not exceed ten—each attendance	8	0	
10. Antenatal care (not including any service or services covered by item 12, 18, 19, 21 or 22 in this Schedule), where attendances exceed ten	4	0	0
11. Confinement and postnatal care for nine days (not including any service or services covered by item 12, 20, 21, 23, 24 or 25 in this Schedule), where the medical practitioner has not given the antenatal care	5	0	0
12. Antenatal care, confinement and postnatal care for nine days (not including any service or services covered by Division 2 of this Part)	7	10	0
13. Caesarean section and postnatal care for nine days	12	10	0

DIVISION 2.—SPECIAL SERVICES.

18. Pre-eclampsia, eclampsia or antepartum haemorrhage, treatment of—each attendance	8	0	
19. Threatened abortion, threatened miscarriage or hyperemesis gravidarum, requiring admission to hospital, treatment of—each attendance	8	0	
20. Postpartum haemorrhage requiring special procedures such as packing, treatment of	2	0	0
21. Surgical induction of labour	2	0	0
22. Version, external or internal, under anaesthesia	2	0	0
23. Third degree tear, repair of	3	10	0
24. Evacuation by manual removal of the products of conception such as retained foetus, placenta, membranes or mole	2	10	0
25. Decapitation, craniotomy, cleidotomy or evisceration of foetus or any two or more of those services	7	10	0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 3.—Anaesthetics.		
DIVISION 1.—ANAESTHETICS OTHER THAN GASEOUS ANAESTHETICS.		
		£ s. d.
30.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit does not exceed £4 and where an anaesthetic referred to in Division 2 of this Part is not given	1 0 0
31.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit exceeds £4 but does not exceed £9 and where an anaesthetic referred to in Division 2 of this Part is not given	1 10 0
32.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £9 but does not exceed £15 and where an anaesthetic referred to in Division 2 of this Part is not given	2 0 0
33.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £15 but does not exceed £20 and where an anaesthetic referred to in Division 2 of this Part is not given	2 10 0
34.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £20 and where an anaesthetic referred to in Division 2 of this Part is not given	3 0 0
38.	Administration of an anaesthetic in association with an anaesthetic referred to in Division 2 of this Part	10 0
DIVISION 2.—GASEOUS ANAESTHETICS.		
39.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable does not exceed £4	1 10 0
40.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £4 but does not exceed £9	2 0 0
41.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £9 but does not exceed £15	3 0 0
42.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £15 but does not exceed £20	4 0 0
43.	Administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable exceeds £20	5 0 0
DIVISION 3.—DENTAL ANAESTHETICS.		
47.	Administration by a medical practitioner of an anaesthetic, other than an endotracheal anaesthetic, in connexion with a dental operation	1 0 0
48.	Administration by a medical practitioner of an endotracheal anaesthetic in connexion with a dental operation	2 0 0
Part 4.—Regional Nerve Block or Field Block.		
50.	Abdominal or similar major field block; brachial plexus; caudal; cervical plexus; epidural (peridural); paravertebral (thoracic and lumbar); pudendal; sacral; spinal	3 0 0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 5.—Assistance in Administration of an Anaesthetic.		
		£ s. d.
53.	Assistance in the administration of an anaesthetic in connexion with a professional service or a series or combination of professional services for which the Commonwealth benefit payable is not less than £25	1 5 0
Part 6.—Miscellaneous Procedures.		
60.	Electrocardiography, phonocardiography, stethography or ballistocardiography	1 0 0
61.	Continuous electrocardiographic monitoring during anaesthesia ..	1 10 0
62.	Intracardiac pressure recording at operation	5 0 0
63.	Echoencephalography or echography	2 0 0
64.	Electroencephalography, not covered by item 63, 65 or 66 in this Schedule	3 0 0
65.	Electroencephalography, temporosphenoidal	4 10 0
66.	Electrocorticography	5 10 0
67.	Electroconvulsive therapy—each attendance at which treatment is given	1 10 0
68.	Electromyography—involving estimation of nerve conduction times or stimulating response recording	2 0 0
69.	Electromyography—involving sampling of muscle activity—each attendance at which procedure is performed	1 0 0
70.	Tonography, in the management of glaucoma	1 10 0
71.	Audiography	1 0 0
72.	Test of ear, or tests of ears on the same occasion, for integrity of static labyrinth	1 10 0
73.	Bronchspirometry, including gas analysis	5 0 0
74.	Estimation of respiratory function by spirometer or other simple techniques—each attendance at which one or more tests are carried out	2 0 0
75.	Estimation of respiratory function requiring complicated techniques—each attendance at which one or more tests are carried out	4 0 0
76.	Perfusion of limb or organ using heart-lung machine or equivalent	15 0 0
77.	Whole body perfusion, cardiac by-pass, using heart-lung machine or equivalent	20 0 0
78.	Dialysis involving use of artificial kidney	15 0 0
79.	Dialysis, peritoneal, for acute renal failure	3 10 0
80.	Induced controlled hypothermia—total body	3 10 0
81.	Intragastric freezing	3 0 0
82.	Intragastric cooling (for a minimum of eight hours)	6 0 0
83.	Fluids, intravenous or subcutaneous infusion of—percutaneous ..	1 0 0
84.	Fluids, intravenous or subcutaneous infusion of—by open exposure ..	1 10 0
85.	Intravenous infusion of a substance incorporating a cytotoxic agent	2 0 0
86.	Intraarterial infusion of a substance incorporating a cytotoxic agent, preparation for	2 10 0
87.	Blood transfusion, including collection from donor	3 0 0
88.	Blood transfusion, using pooled blood or blood already collected ..	2 0 0
89.	Blood transfusion with venesection and complete replacement of blood, including collection from donor	4 0 0
90.	Blood transfusion with venesection and complete replacement of blood, using pooled blood or blood already collected	3 0 0
91.	Blood for purposes of transfusion, collection of	1 10 0
92.	Venesection, not covered by item 89 or 90 in this Schedule—each attendance at which venesection is performed	10 0
93.	Blood specimen for pathological test, intravenous collection of ..	8 0
94.	Blood for pathological test, collection of by arterial puncture	1 0 0
95.	Hormone or living tissue implantation—by incision	1 10 0
96.	Hormone or living tissue implantation—by cannula	1 0 0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 7.—Pathological Services.		
DIVISION 1.—PATHOLOGICAL SERVICES IN RELATION TO BLOOD.		
		£ s. d.
101.	Haemoglobin estimation (where patient is referred by another medical practitioner)	8 0
102.	Red cell count	8 0
103.	White cell count	8 0
104.	Examination of blood film for abnormal red cells	8 0
105.	Red cell count and estimation of haemoglobin	10 0
106.	Red cell count and examination of blood film	10 0
107.	White cell count and differential leucocyte count	10 0
108.	Haemoglobin estimation and examination of blood film	10 0
109.	Red cell count, white cell count, estimation of haemoglobin and examination of blood film	1 0 0
110.	Platelet or reticulocyte count	10 0
111.	Wet eosinophil count	10 0
112.	Estimation of coagulation time	8 0
113.	Estimation of bleeding time	8 0
114.	Estimation of blood sedimentation rate (where patient is referred by another medical practitioner)	10 0
115.	Haematocrit estimation	10 0
116.	Recalcified plasma clotting time	1 0 0
117.	Determination of fragility of red blood cells	1 10 0
118.	Estimation of prothrombin time	1 0 0
119.	Qualitative test for cryoglobulin	10 0
120.	Clot retraction (quantitative test)	1 0 0
121.	Prothrombin consumption test	1 10 0
122.	Two-stage prothrombin estimation	1 10 0
123.	Thrombin generation test	1 10 0
124.	Thromboplastin generation screening test	1 10 0
125.	Thromboplastin generation test (full)	2 10 0
126.	Platelet function test	1 10 0
127.	Assay of antihaemophilic globulin or other blood coagulation factors—quantitative	3 0 0
128.	Estimation of red cell survival or life (radio-active technique)	5 0 0
129.	Blood grouping A.B.O.	8 0
130.	Compatibility testing—for each bottle tested up to five bottles	10 0
131.	Compatibility testing—where more than five bottles are tested	2 10 0
132.	M.N. or Rh typing	10 0
133.	Examination of blood serum for Anti-Rh or other blood group antibodies	1 0 0
134.	Determination and titration of cold agglutinins in blood	10 0
135.	Determination of anti-streptolysin titre or Rose-Waaler test	1 0 0
136.	Examination of blood for malarial, filarial or other parasites	10 0
137.	Examination of blood for lupus erythematosus cells	1 0 0
138.	Determination of Paul-Bunnell reaction	15 0
139.	Blood culture	1 0 0
140.	Blood sugar estimation—initial or repeated	1 0 0
141.	Glucose tolerance or tolbutamide (blood glucose response) test	2 0 0
142.	Xylose absorption test	2 0 0
143.	Congo red test for amyloids	3 0 0
144.	Estimation of alcohol, urea, chlorides, creatinine, cholesterol, phosphatase or similar substance—one substance	1 0 0
145.	Estimation of any two substances referred to in the last preceding item	2 0 0
146.	Estimation of any three substances referred to in item 144 in this Schedule	3 0 0
147.	Estimation of any four substances referred to in item 144 in this Schedule	4 0 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 7.—Pathological Services—*continued.*DIVISION 1.—PATHOLOGICAL SERVICES IN RELATION TO BLOOD—*continued.*

	£ s. d.
148. Estimation of any five or more substances referred to in item 144 in this Schedule	5 0 0
149. Estimation of total protein (by gravimetric methods)	10 0
150. Estimation of lead	2 0 0
151. Examination of specimen obtained by sternal puncture or biopsy	1 10 0
152. Blood volume (dye method)	1 10 0
153. Estimation of blood volume—radio-active method	2 0 0
154. Cytological sex determination from blood film	1 0 0
155. Estimation of iron binding capacity	1 0 0
156. Estimation of mean diameter of red blood cells	1 0 0
157. Van den Bergh reaction—qualitative test	10 0
158. Van den Bergh reaction—quantitative test	1 0 0
159. Spectroscopic tests for blood and blood derivatives	1 0 0
160. Estimation of carbon dioxide combining power	1 0 0
161. Estimation by electrophoresis of serum protein, haemoglobin or similar substances	1 10 0
162. Protein bound iodine test	2 10 0
163. Thyroglobulin antibody estimation	1 0 0
164. Estimation of Vitamin B12 in serum or plasma	1 10 0
165. Radio-iodine uptake test or radio-active Vitamin B12 absorption test	2 0 0
166. Radio-active thyroidal clearance test	1 10 0
167. Radio-isotope scan	1 0 0
168. Radio-active protein bound iodine estimation	2 0 0
169. Coombs' test (direct)	10 0
170. Coombs' test (indirect)	1 0 0
171. Coombs' titration test	1 10 0

DIVISION 2.—PATHOLOGICAL SERVICES IN RELATION TO URINE.

180. General examination for reaction, specific gravity, blood, albumin, Bence-Jones protein and sugar, with microscopical examination of centrifuged deposit with or without qualitative tests for urobilin, acetone, indican or bile pigment (where patient is referred by another medical practitioner)	10 0
181. Microscopical examination of centrifuged deposit (where patient is referred by another medical practitioner)	8 0
182. Microscopical and cultural examination for micro-organisms	1 0 0
183. Urinary white cell excretion test	1 0 0
184. Quantitative chemical estimation of sugar, albumin, urea, phosphates or similar substance—one substance	1 0 0
185. Quantitative chemical estimation of any two substances referred to in the last preceding item	2 0 0
186. Quantitative chemical estimation of any three or more substances referred to in item 184 in this Schedule	3 0 0
187. Quantitative test for presence of any pigment or substance not covered by any other item in this Part	1 0 0
188. Urea concentration or clearance test	1 10 0
189. Water elimination or Mosenthal kidney function or Diagnox blue test	15 0
190. Protamine sulphate titration	10 0
191. Pressor amine test	2 0 0
192. Estimation of lead or urinary steroids, thallium or porphyrins	2 0 0
193. Assay of ascorbic acid excretion	1 0 0

DIVISION 3.—PATHOLOGICAL SERVICES IN RELATION TO PUS, EXUDATIONS AND OTHER MORBID FLUIDS.

201. Microscopical examination of smear for cellular content and micro-organisms	8 0
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THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 7.—Pathological Services—continued.		
DIVISION 3.—PATHOLOGICAL SERVICES IN RELATION TO PUS, EXUDATIONS AND OTHER MORBID FLUIDS—continued.		
		£ s. d.
202.	Cultural examination for, and identification of, aerobic micro-organisms	10 0
203.	Cultural examination for, and identification of, <i>Cl. tetani</i> and other anaerobes	1 0 0
204.	Microscopical and cultural examination and animal inoculation in connexion with the pathological examination of pus, exudations and other morbid fluids	2 10 0
205.	Microscopical examination of vaginal and cervical discharge	8 0
206.	Microscopical and cultural examination of vaginal discharge	10 0
207.	Examination of vaginal discharge for <i>T. vaginalis</i>	8 0
208.	Serological typing of streptococci including <i>Str. pneumoniae</i>	1 0 0
209.	Serological grouping (Lancefield) of streptococci	1 0 0
DIVISION 4.—SEROLOGICAL TESTS.		
216.	Agglutination test, including agglutination test for enteric fever or Brucella infection—each antigen	8 0
217.	Flocculation tests for syphilis, including Kline, Kahn, Eagle and similar tests—each test	8 0
218.	Complement fixation test for syphilis (qualitative or quantitative)	1 0 0
219.	Complement fixation test for gonorrhoea or hydatid	1 0 0
220.	Latex flocculation test for rheumatoid arthritis or other conditions—each test	8 0
221.	Complement fixation test for toxoplasmosis	1 0 0
222.	Methylene blue dye test for toxoplasmosis	1 0 0
223.	Complement fixation test to detect antibodies to other bacterial, viral or fungal infections or parasitic infestations not covered by any other item in this Part	1 0 0
224.	Haemagglutination or haemagglutination-inhibition test for the diagnosis of virus infection	1 0 0
DIVISION 5.—PATHOLOGICAL SERVICES IN RELATION TO FAECES.		
231.	Microscopical examination for pus cells	8 0
232.	Microscopical examination for helminthic infestation, worms and ova (all or any of them)	10 0
233.	Microscopical examination for amoebae, flagellates, vegetative forms and cysts (all or any of them)	10 0
234.	Chemical examination, including chemical examination for occult blood or urobilin	8 0
235.	Estimation of lead or fat	2 0 0
236.	Cultural examination for <i>S. typhi</i> , dysentery bacilli or other intestinal pathogens, without full fermentation reaction or serological or other investigation for purpose of identification	10 0
237.	Cultural examination for <i>S. typhi</i> , dysentery bacilli or other intestinal pathogens, with full fermentation reaction or serological or other investigation for purpose of identification	1 10 0
DIVISION 6.—SKIN SENSITIVITY TESTS.		
244.	Skin sensitivity tests for allergens, including skin sensitivity tests for hay fever, asthma and other allergic conditions—up to ten reagents or injections	10 0
245.	Skin sensitivity tests for allergens, including skin sensitivity tests for hay fever, asthma and other allergic conditions—eleven or more reagents or injections	1 0 0
246.	Determination of Casoni reaction for hydatid infestation	10 0
247.	Determination of Von Pirquet, Mantoux or Vollmer patch reaction	10 0
248.	Determination of Schick or Frei antigen reaction	10 0

THE SCHEDULE—*continued*.

Item No.	Medical Service.	Commonwealth Benefit.
Part 7.—Pathological Services—<i>continued</i>.		
DIVISION 7.—AUTOGENOUS VACCINES.		
253.	Preparation of autogenous vaccines	£ s. d. 1 0 0
DIVISION 8.—EXAMINATIONS FOR SPECIAL PATHOGENS.		
256.	Dark ground examination for <i>T. pallidum</i>	1 0 0
<i>Examination for Actinomyces.</i>		
259.	Microscopical examination	8 0
260.	Microscopical examination with culture aerobic and anaerobic ..	1 0 0
261.	Microscopical examination with culture aerobic and anaerobic with animal inoculation	3 0 0
<i>Examination for Anthrax Bacilli.</i>		
265.	Microscopical examination	8 0
266.	Microscopical examination with cultural examination	1 0 0
267.	Microscopical examination with cultural examination and animal inoculation	3 0 0
<i>Examination for Diphtheria Bacilli.</i>		
271.	Microscopical examination of smear	8 0
272.	Microscopical examination, cultural examination and biochemical reaction	10 0
273.	Microscopical examination, cultural examination, biochemical reaction and virulence test	3 0 0
274.	Microscopical examination, cultural examination, biochemical reaction, virulence test and typing of strains	3 10 0
<i>Examination for Mycobacterium Tuberculosis.</i>		
277.	Microscopical examination	8 0
278.	Microscopical examination with cultural examination	1 10 0
279.	Microscopical examination with cultural examination and animal inoculation	3 0 0
DIVISION 9.—CALCULI, FAECAL CONCRETIONS AND GALLSTONES.		
282.	Qualitative examination of calculi, faecal concretions or gallstones	10 0
DIVISION 10.—PATHOLOGICAL SERVICES IN RELATION TO GASTRIC CONTENTS AND VOMITUS.		
284.	General chemical and microscopical examination	10 0
285.	Fractional meal test with analysis	2 0 0
286.	Chemical examination for metallic poisons—qualitative ..	10 0
287.	Chemical examination for metallic poisons—quantitative ..	1 10 0
DIVISION 11.—PATHOLOGICAL SERVICES IN RELATION TO HAIR AND SKIN.		
290.	Microscopical examination, including examination for fungi ..	10 0
291.	Microscopical examination with culture	1 0 0
292.	Microscopical examination with culture and animal inoculation ..	3 0 0
293.	Chemical examination of hair for metallic poisons—qualitative ..	10 0
DIVISION 12.—PATHOLOGICAL SERVICES IN RELATION TO CEREBROSPINAL FLUID.		
296.	Cytological examination	8 0
297.	Chemical examination	10 0
298.	Cytological and chemical examination	1 0 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 7.—Pathological Services—<i>continued.</i>		
DIVISION 12.—PATHOLOGICAL SERVICES IN RELATION TO CEREBROSPINAL FLUID—<i>continued.</i>		
		<i>£ s. d.</i>
299.	Cytological examination, chemical examination and bacteriological examination, including culture	1 10 0
300.	Cytological examination, chemical examination and bacteriological examination, including culture with animal inoculation ..	3 0 0
301.	Lange colloidal gold reaction	1 0 0
302.	Flocculation tests for syphilis, including Kline, Kahn, Eagle and similar tests—each test	8 0
303.	Wassermann reaction	1 0 0
DIVISION 13.—PATHOLOGICAL SERVICES IN RELATION TO SPUTUM.		
307.	General microscopical examination	8 0
308.	General microscopical examination with cultural examination ..	1 0 0
DIVISION 14.—PATHOLOGICAL SERVICES IN RELATION TO MORBID ANATOMY.		
310.	Histopathological examination of biopsy specimens—each specimen	2 0 0
311.	Cytological examination, including examination for cancer cells of pleural fluid, peritoneal fluid, bronchial or cervical exudates or urine	1 10 0
DIVISION 15.—MISCELLANEOUS TESTS.		
315.	Chemical estimation of body fluids not covered by any other item in this Part	1 0 0
316.	Estimation of basal metabolic rate	1 10 0
317.	Pregnancy tests, or tests for chorionic cancer, using rabbits, mice or rats	1 10 0
318.	Pregnancy tests, or tests for chorionic cancer, using toads ..	1 0 0
319.	Pregnancy tests, or tests for chorionic cancer, using immuno-chemical methods	10 0
322.	Appraisal of semen or Huhner's test	1 0 0
323.	Quantitative assay of chorionic gonadotrophin	2 0 0
324.	Chemical analysis of human milk	1 0 0
325.	Liver function test	1 0 0
DIVISION 16.—INVESTIGATION OF ANTIBIOTICS AND CHEMOTHERAPEUTIC AGENTS.		
330.	Chromatographic examination of serum, urine or other body fluids ..	1 0 0
331.	Sensitivity tests of micro-organisms to antibiotics and chemotherapeutic agents	1 0 0
332.	Assay of concentration of antibiotics and chemotherapeutic agents in body fluids	1 0 0
Part 8.—Radiological Services.		
DIVISION 1.—RADIOGRAPHIC EXAMINATION OF EXTREMITIES AND REPORT.		
401.	Digits or phalanges—all or any of either hand or either foot ..	1 0 0
402.	Hand, wrist, forearm, elbow or arm (elbow to shoulder) ..	1 0 0
403.	Hand, wrist and lower forearm; upper forearm and elbow; or elbow and arm (elbow to shoulder)	1 10 0
404.	Foot, ankle, lower leg, upper leg, knee or thigh (femur) ..	1 10 0
405.	Foot, ankle and lower leg; or upper leg and knee	1 10 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 8.—Radiological Services—*continued.*

DIVISION 2.—RADIOGRAPHIC EXAMINATION OF SHOULDER OR HIP JOINT AND REPORT.

			£	s.	d.
410.	Shoulder region including clavicle and scapula	.. ..	1	10	0
411.	Hip joint	.. ..	1	10	0
412.	Pelvic girdle	.. ..	1	10	0
413.	Smith-Petersen nail—insertion or similar procedure	.. ..	3	0	0

DIVISION 3.—RADIOGRAPHIC EXAMINATION OF HEAD AND REPORT.

417.	Skull, sinuses or mastoids	.. ..	2	0	0
418.	Maxilla or orbit, or both	.. ..	2	0	0
419.	Mandible, malar bones or salivary calculus	.. ..	2	0	0
420.	Nose or eye	.. ..	1	0	0
421.	Larynx	.. ..	1	0	0

DIVISION 4.—RADIOGRAPHIC EXAMINATION OF SPINE AND REPORT.

426.	Spine—any one region	.. ..	2	0	0
427.	Spine—two regions	.. ..	2	10	0
428.	Spine—full	.. ..	3	10	0
429.	Hemiskelton (bone age study)	.. ..	2	0	0

DIVISION 5.—RADIOGRAPHIC EXAMINATION OF THORACIC REGION AND REPORT.

440.	Chest (lung fields) by direct radiography	.. ..	1	10	0
441.	Chest (lung fields) by direct radiography with fluoroscopic screening	.. ..	2	0	0
442.	Chest, by miniature radiography	.. ..	8	0	0
443.	Pleura	.. ..	1	10	0
444.	Orthodiagraphy	.. ..	1	10	0
445.	Teleoroentgenography with cardiac measurements	.. ..	1	10	0
446.	Cardiac examination (including barium swallow)	.. ..	2	0	0
447.	Cardiac measurements and kymography	.. ..	2	0	0
448.	Sternum or one or more ribs of any one side	.. ..	1	10	0
449.	One or more ribs of both sides	.. ..	2	0	0

DIVISION 6.—RADIOGRAPHIC EXAMINATION OF URINARY TRACT AND REPORT.

460.	Plain renal only	.. ..	1	10	0
461.	Intravenous pyelography, including preliminary plain film	.. ..	3	10	0
462.	Retrograde pyelography	.. ..	1	10	0
463.	Cystography, urethrography or vesiculography, as an independent procedure	.. ..	2	0	0
464.	Perirenal insufflation	.. ..	1	10	0

DIVISION 7.—RADIOGRAPHIC EXAMINATION OF ALIMENTARY TRACT AND BILIARY SYSTEM (WITH OR WITHOUT FLUOROSCOPY) AND REPORT.

470.	Oesophagus, with or without examination for foreign body or barium swallow	.. ..	1	10	0
471.	Barium or other opaque meal of oesophagus, stomach and duodenum, with or without screening of chest	.. ..	2	10	0
472.	Plain abdominal only	.. ..	1	10	0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 8.—Radiological Services—<i>continued.</i>		
DIVISION 7.—RADIOGRAPHIC EXAMINATION OF ALIMENTARY TRACT AND BILIARY SYSTEM (WITH OR WITHOUT FLUOROSCOPY) AND REPORT—<i>continued.</i>		
		<i>£ s. d.</i>
473.	Barium or other opaque meal of oesophagus, stomach, duodenum and follow through to colon, with or without screening of chest	3 0 0
474.	Barium or other opaque meal, small bowel series only	2 0 0
475.	Barium or other opaque meal, appendix only	1 10 0
476.	Opaque enema	2 10 0
477.	Opaque enema, including air contrast study (two stages)	3 10 0
478.	Graham's test (cholecystography)	2 10 0
479.	Cholangiography direct, operative or post-operative	2 10 0
480.	Cholangiography—intravenous	3 0 0
DIVISION 8.—RADIOGRAPHIC EXAMINATION FOR LOCALIZATION OF FOREIGN BODIES AND REPORT.		
485.	Foreign body in eye (special method, Sweet's or other) ..	1 10 0
486.	Foreign body, localization of and report, not covered by any other item in this Part—the amount of Commonwealth benefit payable for the radiographic examination of the area and report, plus ..	10 0
DIVISION 9.—RADIOGRAPHIC EXAMINATION OF BREASTS AND REPORT.		
490.	Radiographic examination of breast or breasts and report ..	1 10 0
DIVISION 10.—RADIOGRAPHIC EXAMINATION IN CONNEXION WITH PREGNANCY AND REPORT.		
494.	Pregnant uterus	1 10 0
495.	Pelvimetry or placentography	2 10 0
DIVISION 11.—RADIOGRAPHIC EXAMINATION WITH OPAQUE OR CONTRAST MEDIA, AND REPORT.		
<i>Not including any service covered by Division 16 of this Part.</i>		
500.	Serial angiocardiology (rapid cassette changing)	4 0 0
501.	Serial angiocardiology (single plane—direct roll-film method) ..	5 0 0
502.	Serial angiocardiology (bi-plane—direct roll-film method) ..	5 0 0
503.	Serial angiocardiology (indirect roll-film method)	5 0 0
504.	Discography	2 10 0
505.	Intraosseous venography	1 10 0
506.	Dacryocystography	1 10 0
507.	Myelography, encephalography, cerebral angiography or ventriculography	3 0 0
508.	Hysterosalpingography	1 10 0
509.	Bronchography, arteriography, phlebography, aortography or splenography	2 10 0
510.	Sialography or vasoepididymography	1 10 0
511.	Sinuses and fistulae—the amount of Commonwealth benefit payable for the radiographic examination of the area and report, plus	10 0
512.	Pneumarthrography—the amount of Commonwealth benefit payable for the radiographic examination of the area and report, plus	10 0
513.	Pneumoperitoneum	1 10 0
DIVISION 12.—TOMOGRAPHY AND REPORT.		
517.	Tomography of any part and report	2 10 0
DIVISION 13.—STEREOSCOPIC EXAMINATION AND REPORT.		
520.	Stereoscopic examination and report—the amount of Commonwealth benefit payable for the radiographic examination of the area and report, plus	1 0 0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 8.—Radiological Services—continued.		
DIVISION 14.—FLUOROSCOPIC EXAMINATION (WHERE RADIOGRAPH IS NOT TAKEN) AND REPORT.		
<i>Not including any service covered by any other item in this Part.</i>		
		£ s. d.
524.	Examination with general anaesthesia	1 10 0
525.	Examination without general anaesthesia	1 0 0
DIVISION 15.—RADIOTHERAPY.		
530.	Radiotherapy, superficial, (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	1 0 0
531.	Radiotherapy, other than superficial, orthovoltage therapy or megavoltage therapy (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	1 10 0
<i>Implantation of Radio-active Substances for Tumour.</i>		
534.	Lip	3 10 0
535.	Mouth or tongue or both	6 0 0
536.	Bladder	12 10 0
537.	Prostate	10 0 0
538.	Cervix or corpus uteri	6 0 0
539.	Globe	10 0 0
540.	Retina	10 0 0
541.	Any region or organ not referred to in a preceding item under this heading the implantation of which requires a major anaesthetic	6 0 0
542.	Any region or organ referred to in the last preceding item the implantation of which does not require a major anaesthetic	3 0 0
<i>Application of Moulds of Radio-active Substances.</i>		
546.	Alveolus, palate or antrum	6 0 0
547.	Scar following radical mastectomy	3 0 0
548.	Hand or other skin area or mucous membrane	3 0 0
<i>Injection of Radio-active Substances.</i>		
550.	Intracavitary administration of radio-active substances	2 10 0
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.		
554.	Discography	1 10 0
555.	Intraosseous venography	1 10 0
556.	Myelography	2 0 0
557.	Encephalography	5 0 0
558.	Cerebral angiography—percutaneous	5 0 0
559.	Cerebral angiography—open exposure	6 0 0
560.	Cerebral ventriculography	7 10 0
561.	Bronchography	1 10 0
562.	Aortography	5 0 0
563.	Arteriography—peripheral, phlebography or splenography	1 10 0
564.	Sinus or fistula, injection into	10 0
565.	Perirenal insufflation	1 10 0
566.	Pneumarthrography or pneumoperitoneum	1 0 0
567.	Pyelography, cholecystography or similar procedure by intravenous injection	1 0 0
568.	Retrograde pyelography, including cystoscopy with ureteric catheterization	5 0 0
569.	Dacryocystography	1 10 0
570.	Hysterosalpingography	2 0 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 9.—Assistance at Operations.

	£	s.	d.
585. Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable does not exceed £4	1	0	0
586. Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds £4 but does not exceed £9	1	10	0
587. Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds £9 but does not exceed £15	2	10	0
588. Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds £15 but does not exceed £20	3	10	0
589. Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds £20	4	10	0

Part 10.—Operations.

DIVISION 1.—GENERAL SURGICAL.

600. Biopsy of skin or mucous membrane, as an independent procedure	1	10	0
601. Biopsy of lymph gland, muscle or other deep tissue or organ, as an independent procedure	2	10	0
602. Biopsy (burr-hole), sternal	2	10	0
603. Scalene node biopsy	3	10	0
604. Bursa (large), including olecranon, calcanean or patellar, excision of	5	0	0
605. Bursa, incision of	1	0	0
606. Dressing of localized burns (not involving grafting)—each attendance at which the procedure is performed	10	0	
607. Dressing of burns, extensive, without anaesthesia (not involving grafting)—each attendance at which the procedure is performed	1	0	0
608. Dressing of localized burns under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed	2	0	0
609. Dressing of burns, extensive, under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed	3	10	0
610. Superficial foreign body, removal of, not covered by any other item in this Part	8	0	
611. Subcutaneous foreign body, removal of, not covered by any other item in this Part	1	10	0
612. Foreign body in muscle, tendon or other deep tissue, removal of, not covered by any other item in this Part	5	0	0
613. Ganglion or small bursa, excision of	2	10	0
614. Haematoma, aspiration of	10	0	
615. Haematoma, furuncle, small abscess or similar lesion not requiring a general anaesthetic, incision with drainage of	10	0	
616. Large haematoma, abscess, carbuncle, cellulitis or similar lesion requiring a general anaesthetic, incision with drainage of	2	10	0
617. Bone tumour, innocent, excision of, not covered by any other item in this Part	10	0	0
618. Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed	1	0	0
619. Plantar wart, simple removal of	1	10	0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—<i>continued.</i>		
DIVISION 1.—GENERAL SURGICAL—<i>continued.</i>		£ s. d.
620.	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 Part 2 of this Schedule	1 10 0
621.	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 Part 2 of this Schedule	2 10 0
622.	Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, small (not more than 7 centimetres long), superficial	2 10 0
623.	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	4 0 0
624.	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 Part 2 of this Schedule	2 10 0
625.	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 Part 2 of this Schedule	4 0 0
626.	Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), superficial	4 0 0
627.	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	6 0 0
628.	Cut throat, repair of, involving vessels or nerves, or both	7 10 0
629.	Cut throat, repair of, involving vessels and nerves and oesophagus or trachea	15 0 0
631.	Sinus, excision of, involving superficial tissues only	1 10 0
632.	Sinus, excision of, involving muscle and deep tissue	4 0 0
634.	Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter	1 10 0
635.	Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, more than 3 centimetres in diameter	2 10 0
636.	Tumour, cyst or scar, removal of, not covered by any other item in this Part, involving deeper tissue	3 10 0
637.	Tumour or deep cyst, removal of, not covered by any other item in this Part, requiring wide excision	10 0 0
638.	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	20 0 0
639.	Muscle, excision of (limited)	2 10 0
640.	Muscle, excision of (extensive)	7 10 0
641.	Tongue or part of tongue, excision of	20 0 0
642.	Tongue tie, repair of	1 0 0
644.	Styloid process of temporal bone, removal of	10 0 0
645.	Parotid gland, total extirpation of	20 0 0
646.	Parotid gland, removal of tumour from	7 10 0
647.	Parotid gland, superficial lobectomy or removal of tumour from, with exposure of facial nerve	17 10 0
648.	Sublingual or submandibular gland, extirpation of	7 10 0
649.	Salivary gland, incision of, or transoral ligation of salivary duct	1 10 0
651.	Salivary gland, removal of calculus from	6 0 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—<i>continued.</i>		
DIVISION 1.—GENERAL SURGICAL—<i>continued.</i>		
		£ s. d.
652.	Salivary gland, dilatation or diathermy of duct	1 10 0
653.	Salivary gland, removal of calculus from duct	3 10 0
654.	Salivary gland, repair of cutaneous fistula of	3 0 0
656.	Diverticulum of pharynx or larynx, excision of	15 0 0
658.	Cervical oesophagostomy	10 0 0
660.	Thyroglossal cyst or fistula, removal of	10 0 0
665.	Neck, malignant tumour of, removal of	20 0 0
666.	Thymectomy	30 0 0
667.	Branchial cyst or branchial fistula, removal of	12 10 0
668.	Cystic hygroma, removal of	15 0 0
669.	Ranula, removal of	5 0 0
671.	Thyroidectomy, total, or removal of parathyroid tumour	20 0 0
672.	Thyroidectomy, sub-total	17 10 0
673.	Thyroid, excision of localized tumour of	10 0 0
677.	Gastrectomy, partial or complete	25 0 0
678.	Partial gastrectomy and gastro-jejunostomy	25 0 0
679.	Stomach, reconstruction of by bowel transplant	30 0 0
680.	Perforated peptic ulcer, suture of	12 10 0
681.	Gastrostomy	10 0 0
682.	Gastro-enterostomy or entero-colostomy	15 0 0
683.	Vagotomy	15 0 0
684.	Gastroscoy	5 0 0
685.	Lipectomy for abdominal apron or similar condition	12 10 0
688.	Appendicectomy	10 0 0
689.	Drainage of appendiceal abscess, or for ruptured appendix or for peritonitis with or without appendicectomy	10 0 0
690.	Laparotomy (exploratory) where no other procedure is performed	10 0 0
691.	Laparotomy involving operation on abdominal viscera, not covered by any other item in this Part	12 10 0
692.	Enterostomy or colostomy	10 0 0
693.	Enterostomy or colostomy, closure or plastic repair of	7 10 0
694.	Intussusception, reduction of by fluid	5 0 0
695.	Intussusception, laparotomy and reduction of	12 10 0
696.	Intussusception, laparotomy and resection of	20 0 0
697.	Volvulus, reduction of	12 10 0
698.	Peritoneal adhesions, separation of, where no other procedure is performed	12 10 0
699.	Paracentesis abdominis	1 0 0
700.	Caecostomy	10 0 0
701.	Bowel, anastomosis of	20 0 0
702.	Meckel's diverticulum, removal of	12 10 0
703.	Bowel or viscera, resection of	20 0 0
706.	Ruptured viscus (including liver, spleen, bowel), repair or removal of	15 0 0
707.	Abdomino-perineal resection	30 0 0
708.	Entero-enterostomy	15 0 0
709.	Small bowel intubation with biopsy	5 0 0
710.	Small bowel intubation—as a separate procedure	2 10 0
713.	Subphrenic abscess, drainage of	10 0 0
714.	Retroperitoneal tumour, removal of	20 0 0
715.	Retroperitoneal abscess, drainage of	10 0 0
716.	Peritoneoscopy	3 0 0
719.	Full thickness rectal biopsy	3 10 0
720.	Rectum, radical operation for prolapse of, perineal approach	12 10 0
721.	Rectum, radical operation for prolapse of, involving laparotomy	17 10 0
722.	Rectum, anterior resection of, involving rectosigmoidectomy, not covered by item 707 or 1506 in this Schedule	25 0 0
723.	Anal prolapse—circum-anal suture	3 10 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—*continued.*DIVISION 1.—GENERAL SURGICAL—*continued.*

	£	s.	d.
724. Anal stricture, repair of	7	10	0
725. Sigmoidoscopic examination	1	10	0
728. Faecal fistula, repair of	10	0	0
729. Recto-vesical fistula, repair of	15	0	0
730. Haemorrhoids, removal, ligation or cauterization of	6	0	0
731. Haemorrhoids, incision of	2	0	0
732. Haemorrhoids, injection into—each attendance at which an injection is given	10	0	0
733. Fistula in ano, subcutaneous, excision of	6	0	0
734. Fistula in ano, excision of (involving incision of external sphincter)	10	0	0
735. Ischio-rectal abscess, incision of	2	10	0
736. Fissure in ano, excision of	2	10	0
737. Anus, dilatation of, as an independent procedure	1	0	0
738. Disimpaction of faeces under anaesthesia	2	10	0
739. Rectal polyp, removal of	2	10	0
744. Liver tumour, removal of, other than biopsy	15	0	0
745. Liver, massive resection of or lobectomy	30	0	0
746. Liver abscess, abdominal drainage of	10	0	0
747. Liver abscess, transpleural drainage of	15	0	0
748. Hydatid of liver, peritoneum or viscus, operation for	15	0	0
751. Cholecystectomy	15	0	0
752. Cholecystostomy	12	10	0
753. Choledochotomy (with or without cholecystectomy)	20	0	0
754. Reconstruction of bile duct including choledochoduodenostomy, cholecystoduodenostomy, choledochointerostomy, choledochogastrostomy, cholecystogastrostomy or cholecystenterostomy	25	0	0
756. Reconstruction of hepatic duct including anastomosis with gall bladder or intestine	25	0	0
759. Pancreas, partial excision of	30	0	0
760. Pancreas, drainage of	10	0	0
763. Splenectomy	15	0	0
764. Umbilical hernia, repair of, in person under ten years of age	7	10	0
765. Umbilical hernia, repair of, in person ten years of age or over	10	0	0
770. Ventral, incisional, lumbar or recurrent hernia, repair of	12	10	0
771. Femoral or inguinal hernia (not being ventral, incisional, lumbar or recurrent), repair of	10	0	0
772. Diaphragmatic hernia, repair of	20	0	0
775. Hydrocele, tapping of	1	0	0
776. Hydrocele, removal of	7	10	0
777. Orchidectomy (simple)	6	0	0
778. Varicocele, removal of	7	10	0
780. Undescended testis, transplantation of, with associated hernial repair	12	10	0
781. Secondary detachment of testis from thigh	2	10	0
782. Circumcision of person under four weeks of age	1	0	0
783. Circumcision of person under ten years of age but not less than four weeks of age	2	0	0
784. Circumcision of person ten years of age or over	3	10	0
787. Paraphimosis, reduction of, under anaesthesia, with or without dorsal incision	1	10	0
790. Coccyx, excision of	6	0	0
791. Pilonidal cyst or sinus, excision of	7	10	0
793. Tuberculous or neoplastic glands of neck, groin or axilla, limited excision of	10	0	0
794. Tuberculous or neoplastic glands of neck, groin or axilla, radical excision of	15	0	0
797. Simple mastectomy	10	0	0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—<i>continued.</i>		
DIVISION 1.—GENERAL SURGICAL—<i>continued.</i>		£ s. d.
798.	Breast, excision of cyst, fibro adenoma or other local lesion or segmental resection for any other reason	5 0 0
799.	Breast, radical amputation of	20 0 0
<i>Blood Vessels.</i>		
803.	Vein or small artery, ligation of	1 0 0
804.	Medium artery, ligation of	3 10 0
805.	Saphenous vein, high ligation of	5 0 0
806.	Great vessel (including carotid, jugular, subclavian, axillary, iliac or femoral vessel), ligation of	10 0 0
807.	Varicose veins, excision or ligation of, not covered by any other item in this Part	3 10 0
808.	Varicose veins, excision of, with high ligation of long saphenous vein	8 10 0
809.	Varicose veins, excision of, with ligation of short saphenous vein	5 0 0
810.	Varicose veins, excision of, with ligation of long and short saphenous veins	10 0 0
811.	Varicose veins, sub-fascial ligation of	6 0 0
812.	Varicose veins, injection into—each attendance at which an injection is given	10 0
815.	Embolus, removal of from artery of neck or extremities	15 0 0
816.	Embolus, removal of from artery of trunk	20 0 0
819.	Arterial graft	30 0 0
820.	Repositioning of internal carotid artery	15 0 0
821.	Arterial anastomosis	30 0 0
822.	Carotid body or carotid body tumour, removal of, without arterial anastomosis	10 0 0
<i>Operations for Acute Osteomyelitis.</i>		
825.	Operation on terminal phalanx of finger or toe	1 10 0
826.	Operation on phalanx other than terminal, metacarpus or metatarsus—one bone	3 10 0
827.	Operation on sternum, clavicle, rib, ulna, radius, carpus, tibia, fibula, tarsus, mandible or maxilla (other than alveolar margins)—one bone	6 0 0
828.	Operation on humerus or femur—one bone	8 10 0
829.	Operation on skull	7 10 0
830.	Operation on spine or pelvic bones—one bone	10 0 0
<i>Operations for Chronic Osteomyelitis.</i>		
835.	Operation on nasal bones	3 10 0
836.	Operation on scapula, sternum, clavicle, rib, ulna, radius, metacarpus, carpus, phalanx, tibia, fibula, metatarsus, tarsus, mandible or maxilla (other than alveolar margins)—one bone	7 10 0
837.	Operation on humerus or femur—one bone	10 0 0
838.	Operation on spine or pelvic bones—one bone	15 0 0
839.	Operation on skull	12 10 0
840.	Operation on any combination of bones referred to in item 836 in this Schedule	10 0 0
841.	Operation on any combination of bones not covered by the last preceding item	15 0 0
DIVISION 2.—AMPUTATION OR DISARTICULATION OF LIMB.		
850.	One finger or thumb	3 0 0
851.	Additional finger or thumb—each	1 0 0
852.	Through metacarpals	7 10 0
853.	Hand, forearm or through arm	8 10 0
854.	At shoulder	15 0 0
855.	One toe or great toe	2 10 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—<i>continued.</i>		
DIVISION 2.—AMPUTATION OR DISARTICULATION OF LIMB—<i>continued.</i>		£ s. d.
856.	Additional toe or great toe—each	1 0 0
857.	Foot	10 0 0
858.	Through leg or at knee	12 10 0
859.	Through thigh	15 0 0
860.	At hip	20 0 0
861.	Interscapulothoracic	30 0 0
862.	Hindquarter	30 0 0
DIVISION 3.—EAR, NOSE AND THROAT.		
870.	Aural polyp, removal of	2 10 0
871.	Abscess or inflammation of middle ear, operation for	1 10 0
872.	Mastoidectomy (cortical)	12 10 0
873.	Mastoidectomy (radical or modified radical)	20 0 0
874.	Mastoidectomy for decompression of facial nerve	20 0 0
875.	Labyrinthotomy or destruction of labyrinth	25 0 0
876.	Ear, removal of foreign body in, otherwise than by simple syringing	2 10 0
877.	Fenestration operation—each ear	30 0 0
878.	Venous graft to fenestration cavity	12 10 0
879.	Stapedectomy	30 0 0
880.	Stapes mobilization	20 0 0
881.	Tympanoplasty	20 0 0
882.	External auditory meatus, removal of exostoses in	20 0 0
883.	Middle ear, exploration of	12 10 0
884.	Middle ear, insertion of tube for drainage of	5 0 0
885.	Perforation of tympanum, cauterization or diathermy of	1 10 0
886.	Cholesteatoma, removal of, by suction ear toilet	4 0 0
891.	Nose, removal of foreign body in, other than by simple probing	10 0 0
892.	Nasal polyp or polypi (simple), removal of	1 10 0
893.	Nasal polyp or polypi (requiring admission to hospital), removal of	3 10 0
894.	Nasal septum, resection of	8 10 0
895.	Cauterization or diathermy of septum or turbinates or pharynx— any one or more—each attendance at which the procedure is performed	1 0 0
896.	Turbinectomy or dislocation of turbinate	2 10 0
897.	Turbinates, submucous resection of	6 0 0
898.	Maxillary antrum, proof puncture and lavage of	1 0 0
899.	Maxillary antrum, lavage of—each attendance	10 0 0
900.	Antrostomy (radical)	12 10 0
901.	Antrostomy (radical) with transantral ethmoidectomy	17 10 0
902.	Antrum, intranasal operation on, or removal of foreign body from	6 0 0
903.	Antrum, drainage of, through tooth socket	3 0 0
904.	Oro-antral fistula, plastic closure of	12 10 0
905.	Frontal sinus, external operation on	15 0 0
906.	Frontal sinus or ethmoid sinuses, intranasal operation on	7 10 0
907.	Frontal sinus, catheterization of	1 0 0
908.	Ethmoid sinuses, external operation on	17 10 0
909.	Sphenoid sinus, proof puncture of	1 10 0
910.	Sphenoid sinus, intranasal operation on	7 10 0
911.	Trans-sphenoidal hypophysectomy	20 0 0
912.	Eustachian tube, catheterization of	1 0 0
920.	Division of pharyngeal adhesions	3 0 0
921.	Nasopharyngeal tumour, operation for removal of, involving hard palate	15 0 0
922.	Pharyngoplasty	17 10 0
923.	Pharyngeal pouch, removal of	15 0 0
924.	Pharyngotomy (lateral)	17 10 0
930.	Tonsils or tonsils and adenoids, removal of, in a person aged less than twelve years	3 10 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 10:—Operations—<i>continued.</i>		
DIVISION 3.—EAR, NOSE AND THROAT—<i>continued.</i>		£ s. d.
931.	Tonsils or tonsils and adenoids, removal of, in a person twelve years of age or over	5 0 0
932.	Adenoids, removal of	2 0 0
933.	Lingual tonsil or lateral pharyngeal bands, removal of	2 10 0
934.	Peritonsillar abscess (quinsy), incision of	1 10 0
935.	Uvulotomy	1 0 0
939.	Vallecular or pharyngeal cysts, removal of	10 0 0
940.	Oesophagoscopy	6 0 0
941.	Oesophagoscopy with biopsy	8 10 0
942.	Oesophagus, removal of foreign body in	10 0 0
943.	Insertion of Souttar's tubes or dilatation of oesophagus—first dilatation	7 10 0
944.	Insertion of Souttar's tubes or dilatation of oesophagus—subsequent dilatation	5 0 0
950.	Laryngectomy (total)	25 0 0
951.	Larynx, direct examination of, as an independent procedure	2 10 0
952.	Larynx, direct examination of, with biopsy	3 10 0
953.	Larynx, direct examination of, with removal of tumour	6 0 0
954.	Larynx, fractured, operation for	15 0 0
955.	Larynx, external operation on, or laryngofissure	15 0 0
960.	Arytenoid cartilages, fixation of	20 0 0
961.	Arytenoid cartilage, removal of	17 10 0
965.	Tracheotomy	6 0 0
966.	Trachea, removal of foreign body in	5 0 0
968.	Bronchoscopy, as an independent procedure	5 0 0
969.	Bronchoscopy, with biopsy	7 10 0
970.	Bronchus, removal of foreign body in	10 0 0
DIVISION 4.—UROLOGICAL.		
980.	Adrenal gland, biopsy of	15 0 0
981.	Adrenal gland, removal of	20 0 0
982.	Nephrectomy for malignant disease	20 0 0
986.	Nephrectomy (complete or partial) other than for malignant condition	15 0 0
987.	Nephrolithotomy, pyelolithotomy or ureterolithotomy	17 10 0
988.	Nephrostomy	12 10 0
989.	Nephropexy, as an independent procedure	10 0 0
990.	Pyonephrosis, drainage of	10 0 0
991.	Perinephric abscess, drainage of	10 0 0
995.	Pelvi-ureteric junction, plastic procedures to	20 0 0
996.	Divided ureter, repair of	17 10 0
997.	Ureter, transplantation of, into skin	15 0 0
998.	Ureter, transplantation of, into bladder	17 10 0
999.	Ureter, transplantation of, into intestine	20 0 0
1000.	Ureter, transplantation of, into isolated intestinal loop	25 0 0
Operations on the Bladder (Closed).		
1005.	Bladder, catheterization of—where no other surgical procedure is performed	1 0 0
1006.	Cystoscopy	3 10 0
1007.	Cystoscopy, with ureteric catheterization, with or without introduction of opaque medium	5 0 0
1008.	Cystometrography	2 0 0
1009.	Cystoscopic removal of foreign body	6 0 0
1010.	Cystoscopy, with biopsy of bladder tumours	6 0 0
1011.	Cystoscopy, with diathermy or resection of bladder tumours	10 0 0
1012.	Cystoscopy, with ureteric meatotomy	7 10 0
1013.	Cystoscopy, with diathermy of ureteric orifices	7 10 0
1014.	Cystoscopy, with endoscopic bladder neck resection	12 10 0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—continued.		
DIVISION 4.—UROLOGICAL—continued.		
Operations on the Bladder (Closed)—continued.		£ s. d.
1015.	Cystoscopy, with endoscopic removal or manipulation of ureteric calculus	7 10 0
1016.	Litholapaxy, with or without cystoscopy	10 0 0
Operations on the Bladder (Open).		
1020.	Bladder, repair of rupture of	15 0 0
1021.	Cystostomy or cystotomy, suprapubic	7 10 0
1022.	Bladder, partial excision or plastic repair of	20 0 0
1023.	Bladder, excision of, with ureteric transplantation	30 0 0
1024.	Bladder neck contracture, operation for	15 0 0
1025.	Bladder tumours, suprapubic diathermy of	15 0 0
1026.	Diverticulum of bladder, excision or obliteration of	20 0 0
1027.	Vesical fistula, cutaneous, operation for	10 0 0
Operations on the Prostate.		
1032.	Prostatectomy (suprapubic, perineal or retropubic)	25 0 0
1033.	Prostatectomy (endoscopic)	15 0 0
1034.	Median bar, endoscopic resection of	12 10 0
1035.	Prostate, total excision of	30 0 0
1036.	Prostate, biopsy of (perineal or endoscopic)	7 10 0
1037.	Prostatic abscess, retropubic drainage of	7 10 0
Operations on Urethra, Penis or Scrotum.		
1042.	Urethral sounds, passage of	1 10 0
1043.	Urethral stricture, dilatation of	1 10 0
1044.	Urethra, repair of rupture of	15 0 0
1045.	Urethral fistula, closure of	5 0 0
1046.	Urethroscopy with removal of stone or foreign body	4 0 0
1047.	Urinary meatotomy	2 10 0
1048.	Urethrotomy with excision of stricture	15 0 0
1049.	Urethrotomy, perineal (external), as an independent procedure	7 10 0
1050.	Urethrotomy (internal)	8 10 0
1051.	Urethroplasty not covered by any other item in this Part	12 10 0
1052.	Urethral stricture, plastic repair of	12 10 0
1053.	Hypospadias, correction of chordae	8 10 0
1054.	Hypospadias, urethral reconstruction for	15 0 0
1055.	Hypospadias, secondary correction of	6 0 0
1056.	Epispadias, repair of, not involving sphincter	15 0 0
1057.	Epispadias, repair of, including bladder neck closure	20 0 0
1058.	Urethra, diathermy of	6 0 0
1059.	Penis, partial amputation of	10 0 0
1060.	Penis, complete or radical amputation of	17 10 0
1061.	Penis, amputation of, with excision of glands	25 0 0
1062.	Scrotum, partial excision of	7 10 0
Operations on Testes, Vasa or Seminal Vesicles.		
1070.	Orchidectomy, with excision of retroperitoneal glands or seminal vesicles	25 0 0
1071.	Orchidoplasty	10 0 0
1072.	Epididymectomy	8 10 0
1073.	Vasoepididymostomy	12 10 0
1074.	Vasectomy (simple)	5 0 0
1075.	Vasectomy (radical) including seminal vesicles	17 10 0
1076.	Vasotomy or vasectomy (bilateral)	7 10 0
1077.	Testicular biopsy	3 10 0
1078.	Spermatocele, excision of	6 0 0
DIVISION 5.—GYNAECOLOGICAL.		
1085.	Bartholin's cyst, excision of	3 10 0
1086.	Bartholin's abscess, incision of	1 10 0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—<i>continued.</i>		
DIVISION 5.—GYNAECOLOGICAL—<i>continued.</i>		£ s. d.
1087.	Skene's duct, incision of, or removal of calculus from	2 10 0
1088.	Urethra or urethral caruncle, cauterization of	2 10 0
1089.	Urethral caruncle, excision of	5 0 0
1090.	Clitoris, amputation of	5 0 0
1091.	Vulvectomy (simple)	10 0 0
1092.	Vulvectomy (radical)	25 0 0
1093.	Pelvic lymph glands, excision of (radical)	20 0 0
1094.	Colpotomy or colporrhaphy, not covered by any other item in this Part	3 10 0
1095.	Hymenectomy	2 10 0
1096.	Plastic repair to enlarge vaginal orifice	5 0 0
1097.	Vagina, dilatation of, as an independent procedure—each attendance at which dilatation is performed	10 0
1098.	Gynaecological examination under anaesthesia not performed in association with any service covered by any other item in this Part	1 0 0
1099.	Simple tumour of vagina or vulva, removal of	2 10 0
1100.	Vagina, complete removal of	20 0 0
1101.	Vaginal reconstruction in congenital absence or gynaetresia	20 0 0
1102.	Cystocele or rectocele, repair of, not covered by item 1103 or 1104 in this Schedule	10 0 0
1103.	Cystocele and rectocele, repair of, not covered by the next succeeding item	12 10 0
1104.	Colpoplasty, Donald-Fothergill or Manchester operation, (operation for genital prolapse)	15 0 0
1105.	Fistthrocele, operation for	5 0 0
1106.	Fistula between genital and urinary or alimentary tracts, repair of	20 0 0
1107.	Stress incontinence, sling operation for, as an independent procedure	17 10 0
1108.	Cervix, amputation or repair of, not covered by item 1104 in this Schedule	5 0 0
1109.	Cervix, cauterization, ionization or diathermy of	1 10 0
1110.	Cervix, removal of polyp from	2 0 0
1111.	Cervix, cone biopsy of	5 0 0
1112.	Cervix, dilatation of, not covered by the next succeeding item	2 0 0
1113.	Uterus, curettage of, with or without dilatation	2 10 0
1114.	Examination of the uterine cervix by a magnifying colposcope of the Hinselmann type or similar instrument	2 0 0
1115.	Cervix, purse string ligation of, for threatened miscarriage	2 10 0
1116.	Hysterectomy (other than vaginal)—subtotal	12 10 0
1117.	Hysterectomy (other than vaginal)—total	15 0 0
1118.	Hysterectomy and dissection of pelvic glands	25 0 0
1119.	Hysterotomy	7 10 0
1120.	Vaginal hysterectomy (with or without plastic repair operation)	17 10 0
1121.	Ectopic gestation, removal of	10 0 0
1122.	Myomectomy	12 10 0
1123.	Round ligaments, shortening of	10 0 0
1124.	Bicornuate uterus, plastic reconstruction for	8 0 0
1125.	Uterus, suspension or fixation of	10 0 0
1126.	Oophorectomy, salpingectomy, salpingo-oophorectomy or ligation of Fallopian tubes, not associated with hysterectomy	10 0 0
1127.	Ovarian, parovarian, fimbrial or broad ligament cyst, excision of, not covered by any other item in this Part	10 0 0
1128.	Salpingostomy or salpingolysis, or both	12 10 0
1129.	Fallopian tubes, implantation of, into uterus	12 10 0
1130.	Pelvic abscess, suprapubic drainage of	7 10 0
1131.	Rubin test for patency	2 0 0

THE SCHEDULE—*continued*.

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—*continued*.

DIVISION 6.—OPHTHALMOLOGICAL.

	£	s.	d.
1150. Eye, enucleation of	8	10	0
1151. Eye, enucleation of, and insertion of ball	12	10	0
1152. Globe, evisceration of	10	0	0
1153. Orbit, exenteration of	17	10	0
1154. Perforating wound of globe, repair of	15	0	0
1155. Intraocular foreign body, removal of	20	0	0
1156. Abscess (intraorbital), drainage of	2	10	0
1157. Tarsal cyst, extirpation of	1	10	0
1158. Tarsal cartilage, excision of	6	0	0
1159. Canthoplasty or tarsorrhaphy	6	0	0
1160. Lacrimal sac, excision of, or operation on	7	10	0
1161. Dacryocystorrhinostomy	15	0	0
1162. Lacrimal canaliculum, reconstruction of	15	0	0
1163. Lacrimal passages, probing or dilatation of, for obstruction	1	10	0
1164. Conjunctival peritomy	3	0	0
1165. Trachoma, crushing operation for	3	10	0
1166. Cornea or sclera, removal of superficial foreign body from	10	0	0
1167. Cornea or sclera, removal of foreign body, involving deeper layers	2	0	0
1168. Cornea, tattooing of	6	0	0
1169. Keratoplasty, superficial	25	0	0
1170. Cornea, transplantation of, including collection of implant	30	0	0
1171. Pterygium or pinguecula, removal of	6	0	0
1172. Lens extraction (including initial and subsequent needlings)	20	0	0
1173. Insertion of artificial lens	15	0	0
1174. Cataract, juvenile, removal of, including subsequent needlings	20	0	0
1175. Secondary cataract, needling of—each stage	5	0	0
1176. Paracentesis in relation to eye	7	10	0
1177. Glaucoma, filtering and allied operations for	20	0	0
1178. Iridectomy or iridotomy	15	0	0
1179. Cyclodiathermy	7	10	0
1180. Detached retina, diathermy, operation for	25	0	0
1181. Detached retina, resection or buckling operation for	30	0	0
1182. Detached retina, light coagulation for	10	0	0
1183. Retrobulbar transillumination	2	10	0
1184. Retrobulbar injection of alcohol	2	10	0
1185. Squint, operation for	10	0	0
1186. Suprachoroidal implantation of ocular muscle	10	0	0

DIVISION 7.—THORACIC.

1200. Thoracic cavity, aspiration or paracentesis of, or both	1	0	0
1201. Empyema, intercostal drainage of, not involving resection of rib	3	0	0
1202. Empyema, radical operation for, involving resection of rib	10	0	0
1203. Thoracotomy without pneumolysis	12	10	0
1204. Thoracotomy with pneumolysis	15	0	0
1205. Thoracotomy with pulmonary decortication	20	0	0
1206. Thoracoplasty (complete)	25	0	0
1207. Thoracoplasty (in stages)—each stage	12	10	0
1208. Thoracoscopy	5	0	0
1209. Thoracoscopy with division of pleural adhesions	8	10	0
1210. Thoracic duct cannulization	3	0	0
1211. Phrenic avulsion or crush	3	10	0
1212. Hydatid cysts of lungs, removal of	17	10	0
1213. Pericardium, drainage of by open operation	15	0	0
1214. Pneumonectomy or lobectomy	30	0	0
1215. Ossophagotomy or operation for atresia of oesophagus	30	0	0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—*continued.*DIVISION 7.—THORACIC—*continued.*

		£	s.	d.
1216.	Oesophagus, reconstruction of or replacement by bowel transplant	30	0	0
1217.	Artificial pneumothorax—induction	1	10	0
1218.	Artificial pneumothorax—each filling subsequent to induction ..	1	0	0
1219.	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	30	0	0
1220.	Bronchoscopy with left atrial puncture	10	0	0
1221.	Left ventricular puncture	8	10	0
1222.	Blood dye—dilution indicator test	3	0	0
1223.	Cardiac catheterization with or without fluoroscopy	5	0	0
1224.	Cardiac catheterization with oximetry	8	10	0
1225.	Implantation of cardiac pacemaker—extrathoracic	5	0	0

DIVISION 8.—NEURO-SURGICAL.

1250.	Local infiltration around nerve or in muscle with alcohol, novocaine or similar preparation—each attendance at which an injection is given	10	0	0
1251.	Nerve trunk, primary suture of	8	10	0
1252.	Cutaneous nerve, primary suture of	3	10	0
1253.	Nerve, graft or anastomosis of	15	0	0
1254.	Nerve trunk, secondary suture of	10	0	0
1255.	Nerve, transposition of	6	0	0
1256.	Neurectomy, neurotomy, or removal of tumour from peripheral nerve	5	0	0
1257.	Neurectomy, periarterial	15	0	0
1258.	Neurectomy, intracranial or radical as in tic douloureux ..	20	0	0
1259.	Injection of intracranial ganglion, or primary branch of trigeminal nerve, with alcohol or similar substance	7	10	0
1260.	Sympathectomy (cervical, lumbar, thoracic, sacral or presacral) ..	15	0	0
1261.	Sympathetic trunk, injection into	3	0	0
1262.	Neurolysis by open operation	6	0	0
1263.	Fracture of skull, depressed or comminuted, operation for ..	15	0	0
1264.	Complicated fracture or fractures of skull, operation for ..	20	0	0
1265.	Reconstructive cranioplasty	25	0	0
1266.	Chronic subdural haematoma, operation for	20	0	0
1267.	Craniotomy, involving osteoplastic flap	20	0	0
1268.	Intracranial haemorrhage, burr-hole craniotomy for	7	10	0
1269.	Aneurysm, intracranial, operation for	30	0	0
1270.	Craniotomy and tumour removal	30	0	0
1271.	Intracranial cyst, needling and drainage of	7	10	0
1272.	Craniotomy, burr-hole	6	0	0
1273.	Transfrontal orbitotomy for tumours or other lesions	25	0	0
1274.	Intracranial infection, drainage of	15	0	0
1275.	Intracranial abscess, excision of	30	0	0
1276.	Leucotomy or lobotomy for psychiatric causes	20	0	0
1277.	Hemispherectomy	30	0	0
1278.	Temporal lobectomy	25	0	0
1279.	Laminectomy for cordotomy, removal of tumour or of inter-vertebral disc	20	0	0
1280.	Lumbar puncture	1	0	0
1281.	Cisternal puncture	2	0	0
1282.	Ventricular puncture	6	0	0
1283.	Spinal or epidural injection for neurological diagnosis or for therapeutic reasons	1	10	0
1284.	Chemopallidectomy, or other stereotatic procedure	25	0	0

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THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—continued.

DIVISION 9.—TREATMENT OF DISLOCATIONS.

Dislocations not requiring Open Operation.

			£	s.	d.
1301.	Mandible—first or second dislocation	.. ..	1	0	0
1302.	Mandible—third or subsequent dislocation	.. ..	10	0	
1303.	Clavicle .. ..	.. ..	3	0	0
1304.	Shoulder—first or second dislocation	.. ..	2	10	0
1305.	Shoulder—third or subsequent dislocation—requiring anaesthesia	.. ..	2	10	0
1306.	Shoulder—third or subsequent dislocation—not requiring anaesthesia	.. ..	1	0	0
1307.	Elbow .. ..	.. ..	3	0	0
1308.	Carpal bone .. ..	.. ..	2	0	0
1309.	Carpus on radius and ulna .. ..	.. ..	5	0	0
1310.	Finger .. ..	.. ..	1	0	0
1311.	Metacarpo-phalangeal joint of thumb	.. ..	2	10	0
1312.	Hip .. ..	.. ..	7	10	0
1313.	Knee .. ..	.. ..	6	0	0
1314.	Patella .. ..	.. ..	2	0	0
1315.	Ankle .. ..	.. ..	3	10	0
1316.	Toe .. ..	.. ..	1	0	0
1317.	Tarsus or tarsal bone .. ..	.. ..	2	10	0
1318.	Spine (cervical), without fracture	.. ..	7	10	0
1319.	Spine (lumbar), without fracture	.. ..	7	10	0

Dislocations requiring Open Operation.

1320. Treatment of a dislocation requiring open operation, being a dislocation referred to in an item under the last preceding heading—
 (a) the amount specified in the item plus one-half of that amount; or
 (b) Thirty pounds,
 whichever is the less

DIVISION 10.—TREATMENT OF FRACTURES.

Simple and Uncomplicated Fractures not requiring Open Operation (not including any service covered by item 1377, 1378 or 1379 in this Schedule).

			£	s.	d.
1325.	Terminal phalanx of finger or thumb	.. ..	1	0	0
1326.	Proximal phalanx of finger or thumb	.. ..	2	10	0
1327.	Middle phalanx of finger	.. ..	1	10	0
1328.	One or more metacarpals, not involving base of first carpo-metacarpal joint	.. ..	2	10	0
1329.	One or more metacarpals, involving the first carpometacarpal joint (Bennett's fracture)	.. ..	3	10	0
1330.	Carpal bone (excluding navicular)	.. ..	2	0	0
1331.	Navicular or carpal scaphoid	.. ..	5	0	0
1332.	Radius .. ..	.. ..	4	0	0
1333.	Ulna .. ..	.. ..	4	0	0
1334.	Both shafts of forearm	.. ..	6	0	0
1335.	Colles' fracture of wrist	.. ..	3	10	0
1336.	Distal end of radius or ulna, involving wrist	.. ..	3	10	0
1337.	Humerus .. ..	.. ..	6	0	0
1338.	Clavicle or sternum	.. ..	2	10	0
1339.	Scapula .. ..	.. ..	3	10	0
1340.	One or more ribs—each attendance	.. ..	8	0	
1341.	Maxilla—not requiring splinting	.. ..	4	0	0
1342.	Maxilla—with wiring of teeth or internal fixation	.. ..	7	10	0
1343.	Maxilla—with external fixation	.. ..	10	0	0
1344.	Mandible—not requiring splinting	.. ..	4	10	0
1345.	Mandible—with wiring of teeth or internal fixation	.. ..	7	10	0
1346.	Mandible—skeletal pinning with external fixation	10	0	0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—continued.

DIVISION 10.—TREATMENT OF FRACTURES—continued.

Simple and Uncomplicated Fractures not requiring Open Operation (not including any service covered by item 1377, 1378 or 1379 in this Schedule)—continued.

	£	s.	d.
1347. Zygoma	3	10	0
1348. Pelvis (excluding symphysis pubis) or sacrum	6	0	0
1349. Symphysis pubis	5	0	0
1350. Femur	12	10	0
1351. Patella, fibula or tarsal bone (excepting os calcis or os talus)	2	10	0
1352. Tibia	5	0	0
1353. Both shafts of leg	10	0	0
1354. Ankle (Pott's fracture), with or without dislocation of ankle	10	0	0
1355. Os calcis (calcaneus) or os talus	5	0	0
1356. Metatarsals—one or more	2	10	0
1357. Phalanx of toe (other than great toe)	1	0	0
1358. More than one phalanx of toe (other than great toe)	1	10	0
1359. Distal phalanx of great toe	1	10	0
1360. Proximal phalanx of great toe	2	0	0
1361. Skull, not requiring operation—each attendance	8	0	
1362. Nasal bones, not requiring reduction—each attendance	8	0	
1363. Nasal bones, requiring reduction	2	10	0
1364. Spine (excluding sacrum), transverse process or bone other than vertebral body, not requiring immobilization in plaster—each attendance	8	0	
1365. Spine (excluding sacrum), transverse process or bone other than vertebral body, requiring immobilization in plaster	6	0	0
1366. Spine (excluding sacrum), vertebral body, without involvement of cord, not requiring immobilization in plaster—each attendance	8	0	
1367. Spine (excluding sacrum), vertebral body, without involvement of cord, requiring immobilization in plaster	12	10	0
1368. Spine (excluding sacrum), vertebral body, with involvement of cord	25	0	0

Simple and Uncomplicated Fractures requiring Open Operation (not including any service covered by item 1377, 1378 or 1379 in this Schedule).

1374. Treatment of a simple and uncomplicated fracture requiring open operation, being a fracture referred to in an item under the last preceding heading—
 (a) the amount specified in that item plus one-third of that amount; or
 (b) Thirty pounds,
 whichever is the less

Compound Fractures requiring Open Operation (not including any service covered by item 1377, 1378 or 1379 in this Schedule).

1375. Treatment of a compound fracture requiring open operation, being a fracture referred to in an item under the first heading in this Division—
 (a) the amount specified in that item plus one-half of that amount; or
 (b) Thirty pounds,
 whichever is the less

Complicated Fractures requiring Open Operation (not including any service covered by item 1377, 1378 or 1379 in this Schedule).

1376. Treatment of a complicated fracture involving viscera, blood vessels or nerves and requiring open operation, being a fracture referred to in an item under the first heading in this Division—
 (a) the amount specified in that item plus three-quarters of that amount; or
 (b) Thirty pounds,
 whichever is the less

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—*continued.*DIVISION 10.—TREATMENT OF FRACTURES—*continued.**General.*

1377. Initial reduction (without full post-operative 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—one-half of the amount specified in that item
1378. 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—one-half of the amount specified in that item
1379. Final reduction (including full post-operative 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—the amount specified in that item
1383. Treatment of avulsion of epiphysis of any part—the amount specified in this Division for the treatment of a simple and uncomplicated fracture of that part not requiring open operation

DIVISION 11.—ORTHOPAEDIC.

£ s. d.

1401.	Hip—arthrodesis, arthrectomy or arthroplasty	..	..	30	0	0
1402.	Hip—arthrotomy	..	..	12	10	0
1403.	Knee—arthrodesis, arthrectomy or arthroplasty	..	..	20	0	0
1404.	Knee—arthrotomy	..	..	7	10	0
1405.	Knee—operation for internal derangement	..	..	12	10	0
1406.	Knee—reconstruction of cruciate ligaments	..	..	20	0	0
1407.	Knee—reconstruction of capsular ligaments	..	..	15	0	0
1408.	Knee—excision of patella	..	..	10	0	0
1409.	Knee—operation for recurrent dislocation of patella	..	..	10	0	0
1410.	Shoulder—removal of calcium deposit from cuff	..	..	5	0	0
1411.	Shoulder—arthrotomy	..	..	10	0	0
1412.	Shoulder—arthroplasty or plastic reconstruction	..	..	17	10	0
1413.	Shoulder—arthrodesis or arthrectomy	..	..	17	10	0
1414.	Joint, repair of capsule or ligament of	..	..	5	0	0
1415.	Sacro-iliac joint—arthrodesis	..	..	15	0	0
1416.	Other large joint—arthrodesis, arthrectomy or arthroplasty	..	..	12	10	0
1417.	Finger or other small joint—arthrodesis, arthrectomy or arthroplasty	..	..	5	0	0
1418.	Other large joint—arthrotomy	..	..	7	10	0
1419.	Small joint—arthrotomy	..	..	2	10	0
1420.	Joint, aspiration of, or intra-articular injection into, or both of those services	..	..	1	0	0
1421.	Foot or ankle region—triple arthrodesis	..	..	15	0	0
1422.	Spine, manipulation of, under general anaesthesia	..	..	5	0	0
1423.	Spine, application of plaster jacket	..	..	2	10	0
1424.	Joint (other than spine), manipulation of, under general anaesthesia	..	..	3	10	0
1425.	Osteotomy or osteectomy of phalanx, metacarpal or metatarsal	..	..	6	0	0
1426.	Osteotomy or osteectomy of fibula, radius, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus	..	..	8	10	0
1427.	Osteotomy or osteectomy of tibia, humerus, femur or pelvic bone	..	..	12	10	0
1428.	Excision of exostosis of small bone	..	..	5	0	0
1429.	Excision of exostosis of large bone	..	..	7	10	0
1430.	Bone graft to spine, posterior, not covered by the next succeeding item	..	..	15	0	0
1431.	Bone graft to spine with interbody spinal fusion	..	..	25	0	0
1432.	Bone graft not covered by any other item in this Part	..	..	12	10	0
1433.	Accessory or sesamoid bone, removal of	..	..	5	0	0
1434.	Epicondylitis, open operation for	5	0	0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—*continued.*DIVISION 11.—ORTHOPAEDIC—*continued.*

	£	s.	d.
1435. Condylectomy	10	0	0
1436. Calcaneal spur, removal of	6	0	0
1437. Hallux valgus, correction of	8	10	0
1438. Hallux rigidus, correction of	8	10	0
1439. Hammer toe, correction of	6	0	0
1440. Achilles tendon or other large tendon, suture of	7	10	0
1441. Flexor tendon of hand, primary suture of	5	0	0
1442. Flexor tendon of hand, secondary suture of	6	0	0
1443. Extensor tendon of hand, primary suture of	3	10	0
1444. Extensor tendon of hand, secondary suture of	5	0	0
1445. Tendon of foot, primary suture of	3	10	0
1446. Tendon of foot, secondary suture of	5	0	0
1447. Tenotomy, subcutaneous, one or more tendons	3	10	0
1448. Tenotomy, open, with or without tenoplasty	6	0	0
1449. Tendon or ligament transplantation	8	10	0
1450. Tendon graft	12	10	0
1451. Tendon splitting	7	10	0
1452. Dupuytren's contracture, subcutaneous fasciotomy	6	0	0
1453. Dupuytren's contracture, radical operation for	10	0	0
1454. Volkmann's contracture, operation for	10	0	0
1455. Tendon sheath, incision of	2	10	0
1456. Stenosing tendovaginitis, open operation for	5	0	0
1457. Middle palmar, thenar or hypothenar spaces, drainage of	2	10	0
1458. Incision of pulp space, paronychia or other acute infection of hands or feet, not covered by any other item in this Part	1	0	0
1459. Digital nail, removal of	1	0	0
1460. Acromion or coraco-acromion ligament, removal of	7	10	0
1461. Scalenotomy	6	0	0
1462. Exploration of brachial plexus not covered by any other item in this Part	7	10	0
1463. Cervical rib, removal of	12	10	0
1465. Ingrowing toenail, excision of nail bed	2	10	0
1466. Insertion of orthopaedic pin or wire where no other surgical procedure is performed	3	0	0
1467. Osteosynthesis by Smith-Petersen nail	17	10	0
1468. Cicatricial flexion contracture of joint, correction of, involving tissues deeper than skin and subcutaneous tissue	10	0	0

DIVISION 12.—PAEDIATRIC.

Manipulations and Plaster Work for correction of Congenital Abnormalities.

1480. Congenital dislocation of the hip—manipulation and plaster (one hip)	3	10	0
1481. Talipes equinovarus—manipulation under general anaesthesia	1	10	0
1482. Talipes equinovarus—manipulation and plaster under general anaesthesia	2	0	0
1483. Calcaneus valgus—manipulation under general anaesthesia	1	10	0
1484. Calcaneus valgus—manipulation and plaster under general anaesthesia	2	0	0
1485. Pes planus—manipulation under general anaesthesia	1	10	0
1486. Pes planus—manipulation and plaster under general anaesthesia	2	0	0
1487. Genu varum or genu valgum—manipulation under general anaesthesia	1	10	0
1488. Genu varum or genu valgum—manipulation and plaster under general anaesthesia	2	10	0
1489. Genu varum or genu valgum—manipulation and plaster with osteoclasis	6	0	0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
Part 10.—Operations—continued.		
DIVISION 12.—PAEDIATRIC—continued.		
Manipulations and Plaster Work for correction of Congenital Abnormalities—continued.		
		£ s. d.
1490.	Contractures, manipulation under general anaesthesia, not covered by any other item in this Part	1 10 0
1491.	Contractures, manipulation and plaster under general anaesthesia, not covered by any other item in this Part	2 0 0
1492.	Spastic paralysis—manipulation and plaster (one limb)	2 0 0
Operations for correction of Congenital Abnormalities.		
1500.	Imperforate anus, abdomino-perineal correction of	25 0 0
1501.	Imperforate anus, correction of (other than abdomino-perineal)	10 0 0
1502.	Intestinal atresia or stenosis—excision or anastomosis (or both)	20 0 0
1503.	Duodenal obstruction (congenital)—anastomosis or resection of	20 0 0
1504.	Hypertrophic pyloric stenosis, operation for	12 10 0
1505.	Congenital volvulus of the small intestine, correction of	15 0 0
1506.	Hirschsprung's disease, rectosigmoidectomy for	25 0 0
1507.	Exomphalos, operation for	12 10 0
1508.	Exomphalos, operation for by plastic flap	17 10 0
1509.	Oesophagus, radical correction of congenital stenosis of	30 0 0
1510.	Tracheo-oesophageal fistula, correction of	30 0 0
1511.	Contracted bladder neck (congenital), wedge excision or perurethral resection of	15 0 0
1512.	Urachal fistula	10 0 0
1513.	Ectopic bladder—"turning-in" operation	25 0 0
1514.	Pinhole urinary meatus—meatotomy	2 10 0
1515.	Urethral valves, open removal of	20 0 0
1516.	Incontinence of urine (congenital)—plastic operation to sphincter	15 0 0
1517.	Myelomeningocele—excision of sac	15 0 0
1518.	Hydrocephalus—suboccipital decompression, third ventricu- lostomy or Torkildsen's operation	25 0 0
1519.	Ventriculo-jugular shunt	25 0 0
1520.	Ventriculo-atrial shunt for hydrocephalus	25 0 0
1521.	Hydrocephalus, spino-ureteral, spino-peritoneal or spino-pleural anastomosis of, or ventricular cable shunt for	20 0 0
1522.	Craniostenosis, operation for	20 0 0
1523.	Arachnoidal cyst, operation for	25 0 0
1524.	Subdural haemorrhage, tap for	1 10 0
1525.	Subdural haemorrhage, osteoplastic flap and excision of	25 0 0
1526.	Abnormal limb, amputation of	7 10 0
1527.	Extra digit, amputation of	2 10 0
1528.	Tetralogy of Fallot or patent ductus arteriosus, operation for	30 0 0
1532.	Choanal atresia, repair of—transpalatine	15 0 0
1533.	Choanal atresia, repair of—intranasal	5 0 0
Operations for excision of Congenital Abnormalities.		
1541.	Dermoid, periorbital, excision of	3 0 0
1542.	Dermoid, orbital, excision of	12 10 0
1543.	Dermoid of nose, superficial, excision of	3 0 0
1544.	Dermoid of nose, excision of, with intranasal extension	10 0 0
1545.	Sacrocccygeal dermoid or teratoma other than pilonidal sinus, excision of	15 0 0
Plastic operations for Congenital Abnormalities.		
1550.	Lymphangiectasis of limb (Milroy's disease)—excision of	12 10 0
1551.	Macrocheilia, macroglossia or macrostomia, operation for	12 10 0
1552.	Angioma, cauterization or injection of under general anaesthesia	1 10 0
1553.	Torticollis, operation for	10 0 0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—continued.

DIVISION 12.—PAEDIATRIC—continued.

Operations for acquired Conditions.

		£	s.	d.
1560.	Portal hypertension, lienorenal anastomosis for	30	0	0
1561.	Portal vein anastomosis	30	0	0
1562.	Prolapsed rectum, injection of	1	0	0
1563.	Megacolon, colectomy	20	0	0
1564.	Epiphysitis (Perthes' or Calve's), plaster for	2	10	0
1565.	Epiphysitis (Sever's, Kohler's, Kienboch's or Schlatter's), plaster for	1	10	0
1566.	Epiphysitis (Scheuermann's), plaster for	2	10	0

DIVISION 13.—PLASTIC AND RECONSTRUCTIVE.

Meticulous Plastic Repair designed to obtain maximal Functional or Cosmetic Results including the preparation of the Defect requiring Repair.

1601.	Derma-fat-fascia graft (including transplant or muscle flap) ..	10	0	0
1602.	Abrasive therapy, limited area	5	0	0
1603.	Abrasive therapy, extensive	10	0	0
1604.	Electrolysis epilation, each treatment	1	0	0
1605.	Excision of angioma and direct repair, small	3	0	0
1606.	Excision of angioma and direct repair, large	5	0	0
1607.	Major excision and grafting for lymph-oedema	15	0	
1608.	Foreign implants for contour reconstruction	8	10	0

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.

1616.	Single stage local flap repair, simple, small	4	0	0
1617.	Single stage local flap repair, complicated or large	6	0	0
1618.	Direct flap repair (cross leg or similar), first stage	6	0	0
1619.	Direct flap repair (cross leg or similar), second stage	3	10	0
1620.	Direct flap repair, small, (cross finger or similar), first stage	4	0	0
1621.	Direct flap repair, small, (cross finger or similar), second stage	2	0	0
1622.	Indirect flap or tubed pedicle, formation of	6	0	0
1623.	Indirect flap or tubed pedicle, intermediate transfer of	4	0	0
1624.	Indirect flap or tubed pedicle—separation and application to site	8	10	0
1625.	Direct or indirect flap repair, revision of graft	4	0	0
1626.	Free graft (split skin or pinch graft) on granulating areas, small	2	10	0
1627.	Free graft (split skin) on granulating areas, extensive	6	0	0
1628.	Free graft (split skin) to extensive burns	10	0	0
1629.	Free grafts (split skin) including elective dissection, small	5	0	0
1630.	Free grafts (split skin) including elective dissection, extensive	10	0	0
1631.	Free full thickness grafts to defect not more than 32 square centimetres	6	0	0
1632.	Free full thickness grafts to defect more than 32 square centimetres	7	10	0
1633.	Cineplasty for amputation stump	12	10	0
1634.	Mammoplasty (unilateral)	17	10	0

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.

1635.	Single stage local flap repair, simple, small	6	0	0
1636.	Single stage local flap repair, complicated or large	9	0	0
1637.	Direct flap repair (cross leg or similar), first stage	9	0	0
1638.	Direct flap repair (cross leg or similar), second stage	5	0	0
1639.	Direct flap repair, small, (cross finger or similar), first stage	6	0	0
1640.	Direct flap repair, small, (cross finger or similar), second stage	3	0	0

THE SCHEDULE—*continued.*

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—*continued.*DIVISION 13.—PLASTIC AND RECONSTRUCTIVE—*continued.*

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—continued.

	£	s.	d.
1641. Indirect flap or tubed pedicle, formation of	9	0	0
1642. Indirect flap or tubed pedicle, intermediate transfer of	6	0	0
1643. Indirect flap or tubed pedicle—separation and application to site	13	0	0
1644. Direct or indirect flap repair, revision of graft	6	0	0
1645. Free graft (split skin or pinch graft) on granulating areas, small	4	0	0
1646. Free graft (split skin) on granulating areas, extensive	9	0	0
1647. Free graft (split skin) to extensive burns	15	0	0
1648. Free grafts (split skin) including elective dissection, small	7	10	0
1649. Free grafts (split skin) including elective dissection, extensive	15	0	0
1650. Free full thickness grafts to defect not more than 32 square centimetres	9	0	0
1651. Free full thickness grafts to defect more than 32 square centimetres	11	0	0
1652. Digit, transplantation of—complete procedure	20	0	0
1653. Syndactyly, correction of, each stage or each web	6	0	0
1654. Face, operations involving supportive grafts	15	0	0
1655. Suspension operation for facial paralysis	15	0	0
1656. Mandible, section—fixation for prognathism or retrognathism	17	10	0
1657. Mandible, resection of	20	0	0
1658. Maxilla, resection of	25	0	0
1659. Mandible, segmental resection of, for tumours	17	10	0
1660. Mandible, condylectomy	10	0	0
1661. Osteotomy or osteectomy of mandible (other than alveolar margin) for congenital malformation not covered by any other item in this Part	8	10	0
1662. Osteotomy or osteectomy of maxilla (other than alveolar margin) for congenital malformation not covered by any other item in this Part	9	0	0
<i>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.</i>			
1670. Single stage local flap repair, simple, small	8	0	0
1671. Single stage local flap repair, complicated or large	12	0	0
1672. Direct flap repair (cross leg or similar), first stage	12	0	0
1673. Direct flap repair (cross leg or similar), second stage	7	0	0
1674. Direct flap repair, small, (cross finger or similar), first stage	8	0	0
1675. Direct flap repair, small, (cross finger or similar), second stage	4	0	0
1676. Indirect flap or tubed pedicle, formation of	12	0	0
1677. Indirect flap or tubed pedicle, intermediate transfer of	8	0	0
1678. Indirect flap or tubed pedicle—separation and application to site	17	0	0
1679. Direct or indirect flap repair, revision of graft	8	0	0
1680. Free graft (split skin or pinch graft) on granulating areas, small	5	0	0
1681. Free graft (split skin) on granulating areas, extensive	12	0	0
1682. Free graft (split skin) to extensive burns	20	0	0
1683. Free grafts (split skin) including elective dissection, small	10	0	0
1684. Free grafts (split skin) including elective dissection, extensive	20	0	0
1685. Free full thickness grafts to defect not more than 32 square centimetres	12	0	0
1686. Free full thickness grafts to defect more than 32 square centimetres	15	0	0
1687. Whole thickness eyelid reconstruction—complete procedure	12	10	0
1688. Partial reconstruction of eye-lid or socket	3	10	0
1689. Correction of ptosis (unilateral)	12	10	0

THE SCHEDULE—continued.

Item No.	Medical Service.	Commonwealth Benefit.
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Part 10.—Operations—continued.

DIVISION 13.—PLASTIC AND RECONSTRUCTIVE—continued.

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—continued.

	£	s.	d.
1690. Entropion or entropion, correction of, or reduction of eyelids ..	10	0	0
1691. Symblepharon, grafting for	10	0	0
1692. Nasal skeletal deformity (involving refracture or septoplasty), correction of	12	10	0
1693. Skeletal supportive grafts to nose	12	10	0
1694. Corrective rhinoplasty (cosmetic)	12	10	0
1695. Forehead rhinoplasty—complete procedure	17	10	0
1696. Rhinophyma, correction of	10	0	0
1697. Rhinoplasty, secondary revision of	5	0	0
1698. Composite graft to nose or ear	7	10	0
1699. Lop ear, bat ear or similar deformity, correction of	12	10	0
1700. Ear reconstruction (congenital or traumatic deficiency)—per stage	6	0	0
1701. Congenital atresia, reconstruction of external auditory canal ..	17	10	0
1702. Full thickness lip reconstruction, other than simple suture— complete procedure	12	10	0
1703. Cleft lip complete, primary repair, unilateral	15	0	0
1704. Cleft lip complete, primary repair, one stage, bilateral	20	0	0
1705. Cleft lip incomplete, primary repair, unilateral	10	0	0
1706. Cleft lip secondary correction, partial or incomplete	7	10	0
1707. Cleft lip secondary correction, complete revision	12	10	0
1708. Cleft lip secondary correction, abbé transplant	17	10	0
1709. Cleft lip secondary correction of nostril or nasal tip	7	10	0
1710. Cleft palate, primary repair, partial cleft	15	0	0
1711. Cleft palate, primary repair, complete cleft	20	0	0
1712. Cleft palate, secondary repair, incomplete	10	0	0
1713. Cleft palate, secondary repair, lengthening procedure	17	10	0
1714. Pharyngeal flap	17	10	0