**National Health**

**No. 44 of 1966**

An Act to amend the *National Health Act* 1953–1965 in relation to Pensioners, Special Account Contributors and Decimal Currency.

[Assented to 18 October, 1966]

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* 1966.

(2.) The *National Health Act* 1953–1965 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* 1953–1966.

**Commencement.**

**2.** Subject to this Act, this Act shall come into operation on the day on which it receives the Royal Assent.

**Interpretation.**

**3.**—(1.) Section 4 of the Principal Act is amended by omitting the definition of “pensioner” in sub-section (1.) and inserting in its stead the following definition:—

“‘pensioner’ means—

(*a*)a person to whom or in respect of whom there is being paid an age pension, an invalid pension or a widow’s pension under the *Social Services Act* 1947–1966, other than such a person to whom or in respect of whom such a pension would not be payable if any amendments of that Act, not being an amendment of a rate of pension specified in that Act, made after the commencement of the *Social Services Act* 1966 had not been made;

(*b*)a person to whom or in respect of whom there is being paid a service pension under the *Repatriation Act* 1920–1966, other than such a person to whom or in respect of whom such a pension would not be payable if any amendments of that Act, not being an amendment of a rate of pension specified in that Act, made after the commencement of the *Repatriation Act* 1966 had not been made; and

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

(2.) The amendment made by the last preceding sub-section shall be deemed to have come into operation on the date of commencement of the *Social Services Act* 1966.

**Payment to be made to the next multiple of Five cents.**

**4.** Section 22 of the Principal Act is amended by omitting the words “, as affected by the *Currency Act* 1965,”.

**Pensioners.**

**5.**—(1.) Section 54 of the Principal Act is amended by omitting from sub-section (1.) the words “One pound sixteen shillings” and inserting in their stead the words “Five dollars”.

(2.) The amendment made by the last preceding sub-section applies to Commonwealth benefit payable in respect of any day after the thirty-first day of December, One thousand nine hundred and sixty-six.

**Interpretation.**

**6.**—(1.) Section 66 of the Principal Act is amended by omitting from paragraph (*b*)of the definition of “standard rate benefit” in sub-section (1.) the words “Sixteen shillings” and inserting in their stead the words “Three dollars”.

(2.) The amendment made by the last preceding sub-section applies in respect of hospital treatment rendered after the thirty-first day of December, One thousand nine hundred and sixty-six.

**The Schedule.**

**7.** The Schedule to the Principal Act is repealed and the Schedule set out in the First Schedule to this Act inserted in its stead.

**Amendments in relation to decimal currency.**

**8.** The Principal Act is amended as set out in the Second Schedule to this Act.

THE SCHEDULES

FIRST SCHEDULE Section 7.

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“THE SCHEDULE Section 14.

Medical Services in respect of which Commonwealth Benefits are Payable

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 1.—Professional Attendances not Covered by an Item in any Part of this Schedule other** |  |
|  |  | **$** |
| 1. | Professional attendance by a medical practitioner other than a specialist in the practice of his specialty—each attendance | 0.80 |
| 2. | Professional attendance by a specialist in the practice of his specialty where patient is referred by another medical practitioner—for the first attendance | 2.50 |
| 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 | 1.20 |
| 4. | Professional attendance by a specialist in the practice of his specialty where patient is not referred by another medical practitioner—each attendance | 0.80 |

**Part 2.—Midwifery**

Division 1.—General

|  |  |  |
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| 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 | 0.80 |
| 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 | 8.00 |
| 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 | 10.00 |
| 12. | Antenatal care, confinement and postnatal care for nine days (not including any service or services covered by Division 2 of this Part) | 15.00 |
| 13. | Caesarean section and postnatal care for nine days | 25.00 |

Division 2.—Special Services

|  |  |  |
| --- | --- | --- |
| 18. | Preeclampsia, eclampsia or antepartum haemorrhage, treatment of—each attendance | 0.80 |
| 19. | Threatened abortion, threatened miscarriage or hyperemesis gravidarum, requiring admission to hospital, treatment of—each attendance | 0.80 |
| 20. | Postpartum haemorrhage requiring special procedures such as packing, treatment of | 4.00 |
| 21. | Surgical induction of labour | 4.00 |
| 22 | Version, external or internal, under anaesthesia | 4.00 |
| 23. | Third degree tear, repair of | 7.00 |
| 24. | Evacuation by manual removal of the products of conception such as retained foetus, placenta, membranes or mole | 5.00 |
| 25. | Decapitation, craniotomy, cleidotomy or evisceration of foetus or any two or more of those services | 15.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 3.—Anaesthetics** | | |
| Division 1.—Anaesthetics other than Gaseous Anaesthetics | | |
|  |  | **$** |
| 30. | 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 $8.00 and where an anaesthetic referred to in Division 2 of this Part is not given | 2.00 |
| 31. | 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 $8.00 but does not exceed $18.00 and where an anaesthetic referred to in Division 2 of this Part is not given | 3.00 |
| 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 $18.00 but does not exceed $30.00 and where an anaesthetic referred to in Division 2 of this Part is not given | 4.00 |
| 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 $30.00 but does not exceed $40.00 and where an anaesthetic referred to in Division 2 of this Part is not given | 5.00 |
| 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 $40.00 and where an anaesthetic referred to in Division 2 of this Part is not given | 6.00 |
| 38. | Administration of an anaesthetic in association with an anaesthetic referred to in Division 2 of this Part | 1.00 |
|  |
| 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 $8.00 | 3.00 |
| 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 $8.00 but does not exceed $18.00 | 4.00 |
| 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 $18.00 but does not exceed $30.00 | 6.00 |
| 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 $30.00 but does not exceed $40.00 | 8.00 |
| 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 $40.00 | 10.00 |
| Division 3.—Dental Anaesthetics | | |
| 47. | Administration by a medical practitioner of an anaesthetic, other than an endotracheal anaesthetic, in connexion with a dental operation | 2.00 |
| 48. | Administration by a medical practitioner of an endotracheal anaesthetic in connexion with a dental operation | 4.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
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| **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 | 6.00 |
| **Part 5.—Assistance in Administration of an Anaesthetic** | | |
| 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 $50.00 | 2.50 |
| **Part 6.—Miscellaneous Procedures** | | |
| 60. | Electrocardiography, phonocardiography, stethography or ballistocardiography | 2.00 |
| 61. | Continuous electrocardiographic monitoring during anaesthesia | 3.00 |
| 62. | Intracardiac pressure recording at operation | 10.00 |
| 63. | Echoencephalography or echography | 4.00 |
| 64. | Electroencephalography, not covered by item 63, 65 or 66 in this Schedule | 6.00 |
| 65. | Electroencephalography, temporosphenoidal | 9.00 |
| 66. | Electrocorticography | 11.00 |
| 67. | Electroconvulsive therapy—each attendance at which treatment is given | 3.00 |
| 68. | Electromyography—involving estimation of nerve conduction times or stimulating response recording | 4.00 |
| 69. | Electromyography—involving sampling of muscle activity—each attendance at which procedure is performed | 2.00 |
| 70. | Tonography, in the management of glaucoma | 3.00 |
| 71. | Audiography | 2.00 |
| 72. | Test of ear, or tests of ears on the same occasion, for integrity of static labyrinth | 3.00 |
| 73. | Bronchospirometry, including gas analysis | 10.00 |
| 74. | Estimation of respiratory function by spirometer or other simple techniques—each attendance at which one or more tests are carried out | 4.00 |
| 75. | Estimation of respiratory function requiring complicated techniques— each attendance at which one or more tests are carried out | 8.00 |
| 76. | Perfusion of limb or organ using heart-lung machine or equivalent | 30.00 |
| 77. | Whole body perfusion, cardiac by-pass, using heart-lung machine or equivalent | 40.00 |
| 78. | Dialysis involving use of artificial kidney | 30.00 |
| 79. | Dialysis, peritoneal, for acute renal failure | 7.00 |
| 80. | Induced controlled hypothermia—total body | 7.00 |
| 81. | Intragastric freezing | 6.00 |
| 82. | Intragastric cooling (for a minimum of eight hours) | 12.00 |
| 83. | Fluids, intravenous or subcutaneous infusion of—percutaneous | 2.00 |
| 84. | Fluids, intravenous or subcutaneous infusion of—by open exposure | 3.00 |
| 85. | Intravenous infusion of a substance incorporating a cytotoxic agent | 4.00 |
| 86. | Intraarterial infusion of a substance incorporating a cytotoxic agent, preparation for | 5.00 |
| 87. | Blood transfusion, including collection from donor | 6.00 |
| 88. | Blood transfusion, using pooled blood or blood already collected | 4.00 |
| 89. | Blood transfusion with venesection and complete replacement of blood, including collection from donor | 8.00 |
| 90. | Blood transfusion with venesection and complete replacement of blood, using pooled blood or blood already collected | 6.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | | Commonwealth Benefit |
|  |  | |  |
| **Part 6.—Miscellaneous Procedures—*continued*** | | | |
|  | | | **$** |
| 91. | | Blood for purposes of transfusion, collection of | 3.00 |
| 92. | | Venesection, not covered by item 89 or 90 in this Schedule—each attendance at which venesection is performed | 1.00 |
| 93. | | Blood specimen for pathological test, intravenous collection of | 0.80 |
| 94. | | Blood for pathological test, collection of by arterial puncture | 2.00 |
| 95. | | Hormone or living tissue implantation—by incision | 3.00 |
| 96. | | Hormone or living tissue implantation—by cannula | 2.00 |
| **Part 7.—Pathological Services** | | | |
| Division 1.—Pathological Services in Relation to Blood | | | |
| 101. | | Haemoglobin estimation (where patient is referred by another medical practitioner) | 0.80 |
| 102. | | Red cell count | 0.80 |
| 103. | | White cell count | 0.80 |
| 104. | | Examination of blood film for abnormal red cells | 0.80 |
| 105. | | Red cell count and estimation of haemoglobin | 1.00 |
| 106. | | Red cell count and examination of blood film | 1.00 |
| 107. | | White cell count and differential leucocyte count | 1.00 |
| 108. | | Haemoglobin estimation and examination of blood film | 1.00 |
| 109. | | Red cell count, white cell count, estimation of haemoglobin and examination of blood film | 2.00 |
| 110. | | Platelet or reticulocyte count | 1.00 |
| 111. | | Wet eosinophil count | 1.00 |
| 112. | | Estimation of coagulation time | 0.80 |
| 113. | | Estimation of bleeding time | 0.80 |
| 114. | | Estimation of blood sedimentation rate (where patient is referred by another medical practitioner) | 1.00 |
| 115. | | Haematocrit estimation | 1.00 |
| 116. | | Recalcified plasma clotting time | 2.00 |
| 117. | | Determination of fragility of red blood cells | 3.00 |
| 118. | | Estimation of prothrombin time | 2.00 |
| 119. | | Qualitative test for cryoglobulin | 1.00 |
| 120. | | Clot retraction (quantitative test) | 2.00 |
| 121. | | Prothrombin consumption test | 3.00 |
| 122. | | Two-stage prothrombin estimation | 3.00 |
| 123. | | Thrombin generation test | 3.00 |
| 124. | | Thromboplastin generation screening test | 3.00 |
| 125. | | Thromboplastin generation test (full) | 5.00 |
| 126. | | Platelet function test | 3.00 |
| 127. | | Assay of antihaemophilic globulin or other blood coagulation factors—quantitative | 6.00 |
| 128. | | Estimation of red cell survival or life (radio-active technique) | 10.00 |
| 129. | | Blood grouping A.B.O. | 0.80 |
| 130. | | Compatibility testing—for each bottle tested up to five bottles | 1.00 |
| 131. | | Compatibility testing—where more than five bottles are tested | 5.00 |
| 132. | | M.N.or Rh typing | 1.00 |
| 133. | | Examination of blood serum for Anti-Rh or other blood group antibodies | 2.00 |
| 134. | | Determination and titration of cold agglutinins in blood | 1.00 |
| 135. | | Determination of anti-streptolysin titre or Rose-Waaler test | 2.00 |
| 136. | | Examination of blood for malarial, filarial or other parasites | 1.00 |
| 137. | | Examination of blood for lupus erythematosus cells | 2.00 |
| 138. | | Determination of Paul-Bunnell reaction | 1.50 |
| 139. | | Blood culture | 2.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 7.—Pathological Services—*continued*** | | |
| Division 1.—Pathological Services in Relation to Blood—*continued* | | |
|  |  | **$** |
| 140. | Blood sugar estimation—initial or repeated | 2.00 |
| 141. | Glucose tolerance or tolbutamide (blood glucose response) test | 4.00 |
| 142. | Xylose absorption test | 4.00 |
| 143. | Congo red test for amyloids | 6.00 |
| 144. | Estimation of alcohol, urea, chlorides, creatinine, cholesterol, phosphatase or similar substance—one substance | 2.00 |
| 145. | Estimation of any two substances referred to in the last preceding item | 4.00 |
| 146. | Estimation of any three substances referred to in item 144 in this Schedule | 6.00 |
| 147. | Estimation of any four substances referred to in item 144 in this Schedule | 8.00 |
| 148. | Estimation of any five or more substances referred to in item 144 in this Schedule | 10.00 |
| 149. | Estimation of total protein (by gravimetric methods’) | 1.00 |
| 150. | Estimation of lead | 4.00 |
| 151. | Examination of specimen obtained by sternal puncture or biopsy | 3.00 |
| 152. | Blood volume (dye method) | 3.00 |
| 153. | Estimation of blood volume—radio-active method | 4.00 |
| 154. | Cytological sex determination from blood film | 2.00 |
| 155. | Estimation of iron binding capacity | 2.00 |
| 156. | Estimation of mean diameter of red blood cells | 2.00 |
| 157. | Van den Bergh reaction—qualitative test | 1.00 |
| 158. | Van den Bergh reaction—quantitative test | 2.00 |
| 159. | Spectroscopic tests for blood and blood derivatives | 2.00 |
| 160. | Estimation of carbon dioxide combining power | 2.00 |
| 161. | Estimation by electrophoresis of serum protein, haemoglobin or similar substances | 3.00 |
| 162. | Protein bound iodine test | 5.00 |
| 163. | Thyroglobulin antibody estimation | 2.00 |
| 164. | Estimation of Vitamin B12 in serum or plasma | 3.00 |
| 165. | Radio-iodine uptake test or radio-active Vitamin B12 absorption test | 4.00 |
| 166. | Radio-active thyroidal clearance test | 3.00 |
| 167. | Radio-isotope scan | 2.00 |
| 168. | Radio-active protein bound iodine estimation | 4.00 |
| 169. | Coombs’ test (direct) | 1.00 |
| 170. | Coombs’ test (indirect) | 2.00 |
| 171. | Coombs’ titration test | 3.00 |
| 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) | 1.00 |
| 181. | Microscopical examination of centrifuged deposit (where patient is referred by another medical practitioner) | 0.80 |
| 182. | Microscopical and cultural examination for micro-organisms | 2.00 |
| 183. | Urinary white cell excretion test | 2.00 |
| 184. | Quantitative chemical estimation of sugar, albumin, urea, phosphates or similar substances—one substance | 2.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 7.—Pathological Services—*continued*** | | |
| Division 2.—Pathological Services in relation to Urine—*continued* | | |
|  |  | **$** |
| 185. | Quantitative chemical estimation of any two substances referred to in the last preceding item | 4.00 |
| 186. | Quantitative chemical estimation of any three or more substances referred to in item 184 in this Schedule | 6.00 |
| 187. | Quantitative test for presence of any pigment or substance not covered by any other item in this Part | 2.00 |
| 188. | Urea concentration or clearance test | 3.00 |
| 189. | Water elimination or Mosenthal kidney function or Diagnox blue test | 1.50 |
| 190. | Protamine sulphate titration | 1.00 |
| 191. | Pressor amine test | 4.00 |
| 192. | Estimation of lead or urinary steriods, thallium or porphyrins | 4.00 |
| 193. | Assay of ascorbic acid excretion | 2.00 |
|  | Division 3.—Pathological Services in Relation to Pus, Exudations and other Morbid Fluids |  |
| 201. | Microscopical examination of smear for cellular content and microorganisms | 0.80 |
| 202. | Cultural examination for, and identification of, aerobic microorganisms | 1.00 |
| 203. | Cultural examination for, and identification of, *CL*. *tetani* and other anaerobes | 2.00 |
| 204. | Microscopical and cultural examination and animal inoculation in connexion with the pathological examination of pus, exudations and other morbid fluids | 5.00 |
| 205. | Microscopical examination of vaginal and cervical discharge | 0.80 |
| 206. | Microscopical and cultural examination of vaginal discharge | 1.00 |
| 207. | Examination of vaginal discharge for *T. vaginalis* | 0.80 |
| 208. | Serological typing of streptococci including *Str. pneumoniae* | 2.00 |
| 209. | Serological grouping (Lancefield) of streptococci | 2.00 |
| Division 4.—Serological Tests | | |
| 216. | Agglutination test, including agglutination test for enteric fever or Brucella infection—each antigen | 0.80 |
| 217. | Flocculation tests for syphilis, including Kline, Kahn, Eagle and similar tests—each test | 0.80 |
| 218. | Complement fixation test for syphilis (qualitative or quantitative) | 2.00 |
| 219. | Complement fixation test for gonorrhoea or hydatid | 2.00 |
| 220. | Latex flocculation test for rheumatoid arthritis or other conditions—each test | 0.80 |
| 221. | Complement fixation test for toxoplasmosis | 2.00 |
| 222. | Methylene blue dye test for toxoplasmosis | 2.00 |
| 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 | 2.00 |
| 224. | Haemagglutination or haemagglutination-inhibition test for the diagnosis of virus infection | 2.00 |
| Division 5.—Pathological Services in relation to Faeces | | |
| 231. | Microscopical examination for pus cells | 0.80 |
| 232. | Microscopical examination for helminthic infestation, worms and ova (all or any of them) | 1.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 7.—Pathological Services—*continued*** | | |
| Division 5.—Pathological Services in relation to Faeces—*continued* | | |
|  |  | $ |
| 233. | Microscopical examination for amoebae, flagellates, vegetative forms and cysts (all or any of them) | 1.00 |
| 234. | Chemical examination, including chemical examination for occult blood or urobilin | 0.80 |
| 235. | Estimation of lead or fat | 4.00 |
| 236. | Cultural examination for *S. typhi*, dysentery bacilli or other intestinal pathogens, without full fermentation reaction or serological or other investigation for purpose of identification | 1.00 |
| 237. | Cultural examination for *S. typhi*, dysentery bacilli or other intestinal pathogens, with full fermentation reaction or serological or other investigation for purpose of identification | 3.00 |
| 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 | 1.00 |
| 245. | Skin sensitivity tests for allergens, including skin sensitivity tests for hay fever, asthma and other allergic conditions—eleven or more reagents or injections | 2.00 |
| 246. | Determination of Casoni reaction for hydatid infestation | 1.00 |
| 247. | Determination of Von Pirquet, Mantoux or Vollmer patch reaction | 1.00 |
| 248. | Determination of Schick or Frei antigen reaction | 1.00 |
| Division 7.—Autogenous Vaccines | | |
| 253. | Preparation of autogenous vaccines | 2.00 |
| Division 8.—Examinations for Special Pathogens | | |
| 256. | Dark ground examination for *T. pallidum* | 2.00 |
|  | *Examination for Actinomyces* |  |
| 259. | Microscopical examination | 0.80 |
| 260. | Microscopical examination with culture aerobic and anaerobic | 2.00 |
| 261. | Microscopical examination with culture aerobic and anaerobic with animal inoculation | 6.00 |
|  | *Examination for Anthrax Bacilli* |  |
| 265. | Microscopical examination | 0.80 |
| 266. | Microscopical examination with cultural examination | 2.00 |
| 267. | Microscopical examination with cultural examination and animal inoculation | 6.00 |
|  | *Examination for Diphtheria Bacilli* |  |
| 271. | Microscopical examination of smear | 0.80 |
| 272. | Microscopical examination, cultural examination and biochemical reaction | 1.00 |
| 273. | Microscopical examination, cultural examination, biochemical reaction and virulence test | 6.00 |
| 274. | Microscopical examination, cultural examination, biochemical reaction, virulence test and typing of strains | 7.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 7.—Pathological Services—*continued*** |  |
|  | Division 8.—Examinations for Special Pathogens—*continued*  *Examination for Mycobacterium Tuberculosis* |  |
|  |  | **$** |
| 277. | Microscopical examination | 0.80 |
| 278. | Microscopical examination with cultural examination | 3.00 |
| 279. | Microscopical examination with cultural examination and animal inoculation | 6.00 |
|  | Division 9.—Calculi, Faecal Concretions and Gallstones |  |
| 282. | Qualitative examination of calculi, faecal concretions or gallstones | 1.00 |
|  | Division 10.—Pathological Services in Relation to Gastric Contents and Vomitus |  |
| 284. | General chemical and microscopical examination | 1.00 |
| 285. | Fractional meal test with analysis | 4.00 |
| 286. | Chemical examination for metallic poisons—qualitative | 1.00 |
| 287. | Chemical examination for metallic poisons—quantitative | 3.00 |
|  | Division 11.—Pathological Services in Relation to Hair and Skin |  |
| 290. | Microscopical examination, including examination for fungi | 1.00 |
| 291. | Microscopical examination with culture | 2.00 |
| 292. | Microscopical examination with culture and animal inoculation | 6.00 |
| 293. | Chemical examination of hair for metallic poisons—qualitative | 1.00 |
|  | Division 12.—Pathological Services in Relation to Cerebrospinal Fluid |  |
| 296. | Cytological examination | 0.80 |
| 297. | Chemical examination | 1.00 |
| 298. | Cytological and chemical examination | 2.00 |
| 299. | Cytological examination, chemical examination and bacteriological examination, including culture |  |
| 3.00 |
| 300. | Cytological examination, chemical examination and bacteriological examination, including culture with animal inoculation | 6.00 |
| 301. | Lange colloidal gold reaction | 2.00 |
| 302. | Flocculation tests for syphilis, including Kline, Kahn, Eagle and similar tests—each test | 0.80 |
|
| 303. | Wassermann reaction | 2.00 |
|  | Division 13.—Pathological Services in relation to Sputum |  |
| 307. | General microscopical examination | 0.80 |
| 308. | General microscopical examination with cultural examination | 2.00 |
|  | Division 14.—Pathological Services in relation to Morbid Anatomy |  |
| 310. | Histopathological examination of biopsy specimens—each specimen | 4.00 |
| 311. | Cytological examination, including examination for cancer cells of pleural fluid, peritoneal fluid, bronchial or cervical exudates or urine | 3.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 7.—Pathological Services—*continued*** | | |
| Division 15.—Miscellaneous Tests | | |
|  |  | **$** |
| 315. | Chemical estimation of body fluids not covered by any other item in this Part | 2.00 |
| 316. | Estimation of basal metabolic rate | 3.00 |
| 317. | Pregnancy tests, or tests for chorionic cancer, using rabbits, mice or rats | 3.00 |
| 318. | Pregnancy tests, or tests for chorionic cancer, using toads | 2.00 |
| 319. | Pregnancy tests, or tests for chorionic cancer, using immunochemical methods | 1.00 |
| 322. | Appraisal of semen or Huhner’s test | 2.00 |
| 323. | Quantitative assay of chorionic gonadotrophin | 4.00 |
| 324. | Chemical analysis of human milk | 2.00 |
| 325. | Liver function test | 2.00 |
|  | Division 16.—Investigation of Antibiotics and Chemotherapeutic Agents | |
| 330. | Chromatographic examination of serum, urine or other body fluids | 2.00 |
| 331. | Sensitivity tests of micro-organisms to antibiotics and chemotherapeutic agents | 2.00 |
| 332. | Assay of concentration of antibiotics and chemotherapeutic agents in body fluids | 2.00 |
| **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 | 2.00 |
| 402. | Hand, wrist, forearm, elbow or arm (elbow to shoulder) | 2.00 |
| 403. | Hand, wrist and lower forearm; upper forearm and elbow; or elbow and arm (elbow to shoulder) | 3.00 |
| 404. | Foot, ankle, lower leg, upper leg, knee or thigh (femur) | 3.00 |
| 405. | Foot, ankle and lower leg; or upper leg and knee | 3.00 |
|  | Division 2.—Radiographic Examination of Shoulder or Hip Joint and Report | |
| 410. | Shoulder region including clavicle and scapula | 3.00 |
| 411. | Hip joint | 3.00 |
| 412. | Pelvic girdle | 3.00 |
| 413. | Smith-Petersen nail—insertion or similar procedure | 6.00 |
| Division 3.—Radiographic Examination of Head and Report | | |
| 417. | Skull, sinuses or mastoids | 4.00 |
| 418. | Maxilla or orbit, or both | 4.00 |
| 419. | Mandible, malar bones or salivary calculus | 4.00 |
| 420. | Nose or eye | 2.00 |
| 421. | Larynx | 2.00 |
| Division 4.—Radiographic Examination of Spine and Report | | |
| 426. | Spine—any one region | 4.00 |
| 427. | Spine—two regions | 5.00 |
| 428. | Spine—full | 7.00 |
| 429. | Hemiskeleton (bone age study) | 4.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 8.—Radiological Services—*continued*** | | |
|  | Division 5.—Radiographic Examination of Thoracic Region and Report |  |
|  |  | **$** |
| 440. | Chest (lung fields) by direct radiography | 3.00 |
| 441. | Chest (lung fields) by direct radiography with fluoroscopic screening | 4.00 |
| 442. | Chest, by miniature radiography | 0.80 |
| 443. | Pleura | 3.00 |
| 444. | Orthodiagraphy | 3.00 |
| 445. | Teleoroentgenography with cardiac measurements | 3.00 |
| 446. | Cardiac examination (including barium swallow) | 4.00 |
| 447. | Cardiac measurements and kymography | 4.00 |
| 448. | Sternum or one or more ribs of any one side | 3.00 |
| 449. | One or more ribs of both sides | 4.00 |
|  | Division 6.—Radiographic Examination of Urinary Tract and Report |  |
| 460. | Plain renal only | 3.00 |
| 461. | Intravenous pyelography, including preliminary plain film | 7.00 |
| 462. | Retrograde pyelography | 3.00 |
| 463. | Cystography, urethrography or vesiculography, as an independent procedure | 4.00 |
| 464. | Perirenal insufflation | 3.00 |
|  | 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 | 3.00 |
| 471. | Barium or other opaque meal of oesophagus, stomach and duodenum, with or without screening of chest | 5.00 |
| 472. | Plain abdominal only | 3.00 |
| 473. | Barium or other opaque meal of oesophagus, stomach, duodenum and follow through to colon, with or without screening of chest | 6.00 |
| 474. | Barium or other opaque meal, small bowel series only | 4.00 |
| 475. | Barium or other opaque meal, appendix only | 3.00 |
| 476. | Opaque enema | 5.00 |
| 477. | Opaque enema, including air contrast study (two stages) | 7.00 |
| 478. | Graham’s test (cholecystography) | 5.00 |
| 479. | Cholangiography direct, operative or post-operative | 5.00 |
| 480. | Cholangiography—intravenous | 6.00 |
|  | Division 8.—Radiographic Examination for Localization of Foreign Bodies and Report |  |
| 485. | Foreign body in eye (special method, Sweet’s or other) | 3.00 |
| 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 | 1.00 |
|  | Division 9.—Radiographic Examination of Breasts and Report | |
| 490. | Radiographic examination of breast or breasts and report | 3.00 |
|  | Division 10.—Radiographic Examination in connexion with Pregnancy and Report |  |
| 494. | Pregnant uterus | 3.00 |
| 495. | Pelvimetry or placentography | 5.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
| **Part 8.—Radiological Services—*continued*** | | |
|  | Division 11.—Radiographic Examination with Opaque or Contrast Media, and Report |  |
|  | *Not including any service covered by Division* 16 *of this Part* | **$** |
| 500. | Serial angiocardiography (rapid cassette changing) | 8.00 |
| 501. | Serial angiocardiography (single plane—direct roll-film method) | 10.00 |
| 502. | Serial angiocardiography (bi-plane—direct roll-film method) | 10.00 |
| 503. | Serial angiocardiography (indirect roll-film method) | 10.00 |
| 504. | Discography | 5.00 |
| 505. | Intraosseous venography | 3.00 |
| 506. | Dacryocystography | 3.00 |
| 507. | Myelography, encephalography, cerebral angiography or ventriculography | 6.00 |
| 508. | Hysterosalpingography | 3.00 |
| 509. | Bronchography, arteriography, phlebography, aortography or splenography | 5.00 |
| 510. | Sialography or vasoepididymyography | 3.00 |
| 511. | Sinuses and fistulae—the amount of Commonwealth benefit payable for the radiographic examination of the area and report, plus | 1.00 |
| 512. | Pneumarthrography—the amount of Commonwealth benefit payable for the radiographic examination of the area and report, plus | 1.00 |
| 513. | Pneumoperitoneum | 3.00 |
|  | Division 12.—Tomography and Report |  |
| 517. | Tomography of any part and report | 5.00 |
|  | 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 | 2.00 |
|  | Division 14.—Fluoroscopic Examination (where Radiograph is not taken) and Report |  |
|  | *Not including any service covered by any other item in this Part* |  |
| 524. | Examination with general anaesthesia | 3.00 |
| 525. | Examination without general anaesthesia | 2.00 |
|  | 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 | 2.00 |
| 531. | Radiotherapy, other than superficial, orthovoltage therapy or mega-voltage 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 | 3.00 |
|  | *Implantation of Radio-active Substances for Tumour* |  |
| 534. | Lip | 7.00 |
| 535. | Mouth or tongue or both | 12.00 |
| 536. | Bladder | 25.00 |
| 537. | Prostate | 20.00 |
| 538. | Cervix or corpus uteri | 12.00 |
| 539. | Globe | 20.00 |
| 540. | Retina | 20.00 |
| 541. | Any region or organ not referred to in a preceding item under this heading the implantation of which requires a major anaesthetic | 12.00 |
| 542. | Any region or organ referred to in the last preceding item the implantation of which does not require a major anaesthetic | 6.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 8.—Radiological Services—*continued*** |  |
|  | Division 15.—Radiotherapy—*continued* |  |
|  | *Application of Moulds of Radio-active Substances* | **$** |
| 546. | Alveolus, palate or antrum | 12.00 |
| 547. | Scar following radical mastectomy | 6.00 |
| 548. | Hand or other skin area or mucous membrane | 6.00 |
|  | *Injection of Radio-active Substances* |  |
| 550. | Intracavitary administration of radio-active substances | 5.00 |
|  | 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 | 3.00 |
| 555. | Intraosseous venography | 3.00 |
| 556. | Myelography | 4.00 |
| 557. | Encephalography | 10.00 |
| 558. | Cerebral angiography—percutaneous | 10.00 |
| 559. | Cerebral angiography—open exposure | 12.00 |
| 560. | Cerebral ventriculography | 15.00 |
| 561. | Bronchography | 3.00 |
| 562. | Aortography | 10.00 |
| 563. | Arteriography—peripheral, phlebography or splenography | 3.00 |
| 564. | Sinus or fistula, injection into | 1.00 |
| 565. | Perirenal insufflations | 3.00 |
| 566. | Pneumarthrography or pneumoperitoneum | 2.00 |
| 567. | Pyelography, cholecystography or similar procedure by intravenous injection | 2.00 |
| 568. | Retrograde pyelography, including cystoscopy with ureteric catheterization | 10.00 |
| 569. | Dacryocystography | 3.00 |
| 570. | Hysterosalpingography | 4.00 |
|  | **Part 9.—Assistance at Operations** |  |
| 585. | Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable does not exceed $8.00 | 2.00 |
| 586. | Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds $8.00 but does not exceed $18.00 | 3.00 |
|
| 587. | Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds $18.00 but does not exceed $30.00 | 5.00 |
| 588. | Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds $30.00 but does not exceed $40.00 | 7.00 |
| 589. | Assistance at any operation or series or combination of operations for which the Commonwealth benefit payable exceeds $40.00 | 9.00 |
|  | **Part 10.—Operations** |  |
|  | Division 1.—General Surgical |  |
| 600. | Biopsy of skin or mucous membrane, as an independent procedure | 3.00 |
| 601. | Biopsy of lymph gland, muscle or other deep tissue or organ, as an independent procedure | 5.00 |
| 602. | Biopsy (burr-hole), sternal | 5.00 |
| 603. | Scalene node biopsy | 7.00 |
| 604. | Bursa (large), including olecranon, calcanean or patellar, excision of | 10.00 |
| 605. | Bursa, incision of | 2.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 1.—General Surgical—*continued* | **$** |
| 606. | Dressing of localized burns (not involving grafting)—each attendance at which the procedure is performed | 1.00 |
| 607. | Dressing of burns, extensive, without anaesthesia (not involving grafting)—each attendance at which the procedure is performed | 2.00 |
| 608. | Dressing of localized burns under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed | 4.00 |
| 609. | Dressing of burns, extensive, under general anaesthesia (not involving grafting)—each attendance at which the procedure is performed | 7.00 |
| 610. | Superficial foreign body, removal of, not covered by any other item in this Part | 0.80 |
| 611. | Subcutaneous foreign body, removal of, not covered by any other item in this Part | 3.00 |
| 612. | Foreign body in muscle, tendon or other deep tissue, removal of, not covered by any other item in this Part | 10.00 |
| 613. | Ganglion or small bursa, excision of | 5.00 |
| 614. | Haematoma, aspiration of | 1.00 |
| 615. | Haematoma, furuncle, small abscess or similar lesion not requiring a general anaesthetic, incision with drainage of | 1.00 |
| 616. | Large haematoma, abscess, carbuncle, cellulitis or similar lesion requiring a general anaesthetic, incision with drainage of | 5.00 |
| 617. | Bone tumour, innocent, excision of, not covered by any other item in this Part | 20.00 |
| 618. | Keratoses, warts or similar lesions, electrosurgical destruction or chemotherapy of—each attendance at which the procedure is performed | 2.00 |
| 619. | Plantar wart, simple removal of | 3.00 |
| 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 | 3.00 |
| 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 | 5.00 |
| 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 | 5.00 |
| 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 | 8.00 |
| 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 | 5.00 |
| 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 | 8.00 |
| 626. | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large (more than 7 centimetres long), superficial | 8.00 |
| 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 | 12.00 |
| 628. | Cut throat, repair of, involving vessels or nerves, or both | 15.00 |
| 629. | Cut throat, repair of, involving vessels and nerves and oesophagus or trachea | 30.00 |
| 631. | Sinus, excision of, involving superficial tissues only | 3.00 |
| 632. | Sinus, excision of, involving muscle and deep tissue | 8.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 1.—General Surgical—*continued* | **$** |
| 634. | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, up to 3 centimetres in diameter | 3.00 |
| 635. | Tumour, cyst or scar, removal of cutaneous, subcutaneous or in mucous membrane, more than 3 centimetres in diameter | 5.00 |
| 636. | Tumour, cyst or scar, removal of, not covered by any other item in this Part, involving deeper tissue | 7.00 |
| 637. | Tumour or deep cyst, removal of, not covered by any other item in this Part, requiring wide excision | 20.00 |
| 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 | 40.00 |
| 639. | Muscle, excision of (limited) | 5.00 |
| 640. | Muscle, excision of (extensive) | 15.00 |
| 641. | Tongue or part of tongue, excision of | 40.00 |
| 642. | Tongue tie, repair of | 2.00 |
| 644. | Styloid process of temporal bone, removal of | 20.00 |
| 645. | Parotid gland, total extirpation of | 40.00 |
| 646. | Parotid gland, removal of tumour from | 15.00 |
| 647. | Parotid gland, superficial lobectomy or removal of tumour from, with exposure of facial nerve | 35.00 |
| 648. | Sublingual or submandibular gland, extirpation of | 15.00 |
| 649. | Salivary gland, incision of, or transoral ligation of salivary duct | 3.00 |
| 651. | Salivary gland, removal of calculus from | 12.00 |
| 652. | Salivary gland, dilatation or diathermy of duct | 3.00 |
| 653. | Salivary gland, removal of calculus from duct | 7.00 |
| 654. | Salivary gland, repair of cutaneous fistula of | 6.00 |
| 656. | Diverticulum of pharynx or larynx, excision of | 30.00 |
| 658. | Cervical oesophagostomy | 20.00 |
| 660. | Thyroglossal cyst or fistula, removal of | 20.00 |
| 665. | Neck, malignant tumour of, removal of | 40.00 |
| 666. | Thymectomy | 60.00 |
| 667. | Branchial cyst or branchial fistula, removal of | 25.00 |
| 668. | Cystic hygroma, removal of | 30.00 |
| 669. | Ranula, removal of | 10.00 |
| 671. | Thyroidectomy, total, or removal of parathyroid tumour | 40.00 |
| 672. | Thyroidectomy, sub-total | 35.00 |
| 673. | Thyroid, excision of localized tumour of | 20.00 |
| 677. | Gastrectomy, partial or complete | 50.00 |
| 678. | Partial gastrectomy and gastro-jejunostomy | 50.00 |
| 679. | Stomach, reconstruction of, by bowel transplant | 60.00 |
| 680. | Perforated peptic ulcer, suture of | 25.00 |
| 681. | Gastrostomy | 20.00 |
| 682. | Gastro-enterostomy or entero-colostomy | 30.00 |
| 683. | Vagotomy | 30.00 |
| 684. | Gastroscopy | 10.00 |
| 685. | Lipectomy for abdominal apron or similar condition | 25.00 |
| 688. | Appendicectomy | 20.00 |
| 689. | Drainage of appendiceal abscess, or for ruptured appendix or for peritonitis with or without appendicectomy | 20.00 |
| 690. | Laparotomy (exploratory) where no other procedure is performed | 20.00 |
| 691. | Laparotomy involving operation on abdominal viscera, not covered by any other item in this Part | 25.00 |
| 692. | Enterostomy or colostomy | 20.00 |
| 693. | Enterostomy or colostomy, closure or plastic repair of | 15.00 |
| 694. | Intussusception, reduction of, by fluid | 10.00 |
| 695. | Intussusception, laparotomy and reduction of | 25.00 |
| 696. | Intussusception, laparotomy and resection of | 40.00 |
| 697. | Volvulus, reduction of | 25.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 1.—General Surgical—*continued* | **$** |
| 698. | Peritoneal adhesions, separation of, where no other procedure is performed | 25.00 |
| 699. | Paracentesis abdominis | 2.00 |
| 700. | Caecostomy | 20.00 |
| 701. | Bowel, anastomosis of | 40.00 |
| 702. | Meckel’s diverticulum, removal of | 25.00 |
| 703. | Bowel or viscera, resection of | 40.00 |
| 706. | Ruptured viscus (including liver, spleen, bowel), repair or removal of | 30.00 |
| 707. | Abdomino-perineal resection | 60.00 |
| 708. | Entero-enterostomy | 30.00 |
| 709. | Small bowel intubation with biopsy | 10.00 |
| 710. | Small bowel intubation—as a separate procedure | 5.00 |
| 713. | Subphrenic abscess, drainage of | 20.00 |
| 714. | Retroperitoneal tumour, removal of | 40.00 |
| 715. | Retroperitoneal abscess, drainage of | 20.00 |
| 716. | Peritoneoscopy | 6.00 |
| 719. | Full thickness rectal biopsy | 7.00 |
| 720. | Rectum, radical operation for prolapse of, perineal approach | 25.00 |
| 721. | Rectum, radical operation for prolapse of, involving laparotomy | 35.00 |
| 722. | Rectum, anterior resection of, involving rectosigmoidectomy, not covered by item 707 or 1506 in this Schedule | 50.00 |
| 723. | Anal prolapse—circum-anal suture | 7.00 |
| 724. | Anal stricture, repair of | 15.00 |
| 725. | Sigmoidoscopic examination | 3.00 |
| 728. | Faecal fistula, repair of | 20.00 |
| 729. | Recto-vesical fistula, repair of | 30.00 |
| 730. | Haemorrhoids, removal, ligation or cauterization of | 12.00 |
| 731. | Haemorrhoids, incision of | 4.00 |
| 732. | Haemorrhoids, injection into—each attendance at which an injection is given | l.00 |
| 733. | Fistula in ano, subcutaneous, excision of | 12.00 |
| 734. | Fistula in ano, excision of (involving incision of external sphincter) | 20.00 |
| 735. | Ischio-rectal abscess, incision of | 5.00 |
| 736. | Fissure in ano, excision of | 5.00 |
| 737. | Anus, dilatation of, as an independent procedure | 2.00 |
| 738. | Disimpaction of faeces under anaesthesia | 5.00 |
| 739. | Rectal polyp, removal of | 5.00 |
| 744. | Liver tumour, removal of, other than by biopsy | 30.00 |
| 745. | Liver, massive resection of, or lobectomy | 60.00 |
| 746. | Liver abscess, abdominal drainage of | 20.00 |
| 747. | Liver abscess, transpleural drainage of | 30.00 |
| 748. | Hydatid of liver, peritoneum or viscus, operation for | 30.00 |
| 751. | Cholecystectomy | 30.00 |
| 752. | Cholecystostomy | 25.00 |
| 753. | Choledochotomy (with or without cholecystectomy) | 40.00 |
| 754. | Reconstruction of bile duct including choledochoduodenostomy, cholecystoduodenostomy, choledochoenterostomy, choledocho-gastrostomy, cholecystogastrostomy or cholecystenterostomy | 50.00 |
| 756. | Reconstruction of hepatic duct including anastomosis with gall bladder or intestine | 50.00 |
| 759. | Pancreas, partial excision of | 60.00 |
| 760. | Pancreas, drainage of | 20.00 |
| 763. | Splenectomy | 30.00 |
| 764. | Umbilical hernia, repair of, in person under ten years of age | 15.00 |
| 765. | Umbilical hernia, repair of, in person ten years of age or over | 20.00 |
| 770. | Ventral, incisional, lumbar or recurrent hernia, repair of | 25.00 |
| 771. | Femoral or inguinal hernia (not being ventral, incisional, lumbar or recurrent), repair of | 20.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 1.—General Surgical—*continued* | **$** |
| 772. | Diaphragmatic hernia, repair of | 40.00 |
| 775. | Hydrocele, tapping of | 2.00 |
| 776. | Hydrocele, removal of | 15.00 |
| 777. | Orchidectomy (simple) | 12.00 |
| 778. | Varicocele, removal of | 15.00 |
| 780. | Undescended testis, transplantation of, with associated hernia] repair | 25.00 |
| 781. | Secondary detachment of testis from thigh | 5.00 |
| 782. | Circumcision of person under four weeks of age | 2.00 |
| 783. | Circumcision of person under ten years of age but not less than four weeks of age | 4.00 |
| 784. | Circumcision of person ten years of age or over | 7.00 |
| 787. | Paraphimosis, reduction of, under anaesthesia, with or without dorsal incision | 3.00 |
| 790. | Coccyx, excision of | 12.00 |
| 791. | Pilonidal cyst or sinus, excision of | 15.00 |
| 793. | Tuberculous or neoplastic glands of neck, groin or axilla, limited excision of | 20.00 |
| 794. | Tuberculous or neoplastic glands of neck, groin or axilla, radical excision of | 30.00 |
| 797. | Simple mastectomy | 20.00 |
| 798. | Breast, excision of cyst, fibro adenoma or other local lesion or segmental resection for any other reason | 10.00 |
| 799. | Breast, radical amputation of | 40.00 |
|  | *Blood Vessels* |  |
| 803. | Vein or small artery, ligation of | 2.00 |
| 804. | Medium artery, ligation of | 7.00 |
| 805. | Saphenous vein, high ligation of | 10.00 |
| 806. | Great vessel (including carotid, jugular, subclavian, axillary, iliac or femoral vessel), ligation of | 20.00 |
| 807. | Varicose veins, excision or ligation of, not covered by any other item in this Part | 7.00 |
| 808. | Varicose veins, excision of, with high ligation of long saphenous vein | 17.00 |
| 809. | Varicose veins, excision of, with ligation of short saphenous vein | 10.00 |
| 810. | Varicose veins, excision of, with ligation of long and short saphenous veins | 20.00 |
| 811. | Varicose veins, sub-fascial ligation of | 12.00 |
| 812. | Varicose veins, injection into—each attendance at which an injection is given | 1.00 |
| 815. | Embolus, removal of, from artery of neck or extremities | 30.00 |
| 816. | Embolus, removal of, from artery of trunk | 40.00 |
| 819. | Arterial graft | 60.00 |
| 820. | Repositioning of internal carotid artery | 30.00 |
| 821. | Arterial anastomosis | 60.00 |
| 822. | Carotid body or carotid body tumour, removal of, without arterial anastomosis | 20.00 |
|  | *Operations for Acute Osteomyelitis* |  |
| 825. | Operation on terminal phalanx of finger or toe | 3.00 |
| 826. | Operation on phalanx other than terminal, metacarpus or metatarsus—one bone | 7.00 |
| 827. | Operation on sternum, clavicle, rib, ulna, radius, carpus, tibia, fibula, tarsus, mandible or maxilla (other than alveolar margins)—one bone | 12.00 |
| 828. | Operation on humerus or femur—one bone | 17.00 |
| 829. | Operation on skull | 15.00 |
| 830. | Operation on spine or pelvic bones—one bone | 20.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 1.—General Surgical—*continued* |  |
|  | *Operations for Chronic Osteomyelitis* | **$** |
| 835. | Operation on nasal bones | 7.00 |
| 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 | 15.00 |
| 837. | Operation on humerus or femur—one bone | 20.00 |
| 838. | Operation on spine or pelvic bones—one bone | 30.00 |
| 839. | Operation on skull | 25.00 |
| 840. | Operation on any combination of bones referred to in item 836 in this Schedule | 20.00 |
| 841. | Operation on any combination of bones not covered by the last preceding item | 30.00 |
|  | Division 2.—Amputation or Disarticulation of Limb |  |
| 850. | One finger or thumb | 6.00 |
| 851. | Additional finger or thumb—each | 2.00 |
| 852. | Through metacarpals | 15.00 |
| 853. | Hand, forearm or through arm | 17.00 |
| 854. | At shoulder | 30.00 |
| 855. | One toe or great toe | 5.00 |
| 856. | Additional toe or great toe—each | 2.00 |
| 857. | Foot | 20.00 |
| 858. | Through leg or at knee | 25.00 |
| 859. | Through thigh | 30.00 |
| 860. | At hip | 40.00 |
| 861. | Interscapulothoracic | 60.00 |
| 862. | Hindquarter | 60.00 |
|  | Division 3.—Ear, Nose and Throat |  |
| 870. | Aural polyp, removal of | 5.00 |
| 871. | Abscess or inflammation of middle ear, operation for | 3.00 |
| 872. | Mastoidectomy (cortical) | 25.00 |
| 873. | Mastoidectomy (radical or modified radical) | 40.00 |
| 874. | Mastoidectomy for decompression of facial nerve | 40.00 |
| 875. | Labyrinthotomy or destruction of labyrinth | 50.00 |
| 876. | Ear, removal of foreign body in, otherwise than by simple syringing | 5.00 |
| 877. | Fenestration operation—each ear | 60.00 |
| 878. | Venous graft to fenestration cavity | 25.00 |
| 879. | Stapedectomy | 60.00 |
| 880. | Stapes mobilization | 40.00 |
| 881. | Tympanoplasty | 40.00 |
| 882. | External auditory meatus, removal of exostoses in | 40.00 |
| 883. | Middle ear, exploration of | 25.00 |
| 884. | Middle ear, insertion of tube for drainage of | 10.00 |
| 885. | Perforation of tympanum, cauterization or diathermy of | 3.00 |
| 886. | Cholesteatoma, removal of, by suction ear toilet | 8.00 |
| 891. | Nose, removal of foreign body in, other than by simple probing | 20.00 |
| 892. | Nasal polyp or polypi (simple), removal of | 3.00 |
| 893. | Nasal polyp or polypi (requiring admission to hospital), removal of | 7.00 |
| 894. | Nasal septum, resection of | 17.00 |
| 895. | Cauterization or diathermy of septum or turbinates or pharynx— any one or more—each attendance at which the procedure is performed | 2.00 |
| 896. | Turbinectomy or dislocation of turbinate | 5.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 3.—Ear, Nose and Throat—*continued* | $ |
| 897. | Turbinates, submucous resection of | 12.00 |
| 898. | Maxillary antrum, proof puncture and lavage of | 2.00 |
| 899. | Maxillary antrum, lavage of—each attendance | 1.00 |
| 900. | Antrostomy (radical) | 25.00 |
| 901. | Antrostomy (radical) with transantral ethmoidectomy | 35.00 |
| 902. | Antrum, intranasal operation on, or removal of foreign body from | 12.00 |
| 903. | Antrum, drainage of, through tooth socket | 6.00 |
| 904. | Oro-antral fistula, plastic closure of | 25.00 |
| 905. | Frontal sinus, external operation on | 30.00 |
| 906. | Frontal sinus or ethmoid sinuses, intranasal operation on | 15.00 |
| 907. | Frontal sinus, catheterization of | 2.00 |
| 908. | Ethmoid sinuses, external operation on | 35.00 |
| 909. | Sphenoid sinus, proof puncture of | 3.00 |
| 910. | Sphenoid sinus, intranasal operation on | 15.00 |
| 911. | Trans-sphenoidal hypophysectomy | 40.00 |
| 912. | Eustachian tube, catheterization of | 2.00 |
| 920. | Division of pharyngeal adhesions | 6.00 |
| 921. | Nasopharyngeal tumour, operation for removal of, involving hard palate | 30.00 |
| 922. | Pharyngoplasty | 35.00 |
| 923. | Pharyngeal pouch, removal of | 30.00 |
| 924. | Pharyngotomy (lateral) | 35.00 |
| 930. | Tonsils or tonsils and adenoids, removal of, in a person aged less than twelve years | 7.00 |
| 931. | Tonsils or tonsils and adenoids, removal of, in a person twelve years of age or over | 10.00 |
| 932. | Adenoids, removal of | 4.00 |
| 933. | Lingual tonsil or lateral pharyngeal bands, removal of | 5.00 |
| 934. | Peritonsillar abscess (quinsy), incision of | 3.00 |
| 935. | Uvulotomy | 2.00 |
| 939. | Vallecular or pharyngeal cysts, removal of | 20.00 |
| 940. | Oesophagoscopy | 12.00 |
| 941. | Oesophagoscopy with biopsy | 17.00 |
| 942. | Oesophagus, removal of foreign body in | 20.00 |
| 943. | Insertion of Souttar’s tubes or dilatation of oesophagus—first dilatation | 15.00 |
| 944. | Insertion of Souttar’s tubes or dilatation of oesophagus—subsequent dilatation | 10.00 |
| 950. | Laryngectomy (total) | 50.00 |
| 951. | Larynx, direct examination of, as an independent procedure | 5.00 |
| 952. | Larynx, direct examination of, with biopsy | 7.00 |
| 953. | Larynx, direct examination of, with removal of tumour | 12.00 |
| 954. | Larynx, fractured, operation for | 30.00 |
| 955. | Larynx, external operation on, or laryngofissure | 30.00 |
| 960. | Arytenoid cartilages, fixation of | 40.00 |
| 961. | Arytenoid cartilage, removal of | 35.00 |
| 965. | Tracheotomy | 12.00 |
| 966. | Trachea, removal of foreign body in | 10.00 |
| 968. | Bronchoscopy, as an independent procedure | 10.00 |
| 969. | Bronchoscopy, with biopsy | 15.00 |
| 970. | Bronchus, removal of foreign body in | 20.00 |
|  | Division 4.—Urological |  |
| 980. | Adrenal gland, biopsy of | 30.00 |
| 981. | Adrenal gland, removal of | 40.00 |
| 982. | Nephrectomy for malignant disease | 40.08 |
| 986. | Nephrectomy (complete or partial) other than for maligant condition | 30.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 4.—Urological—*continued* | **$** |
| 987. | Nephrolithotomy, pyelolithotomy or ureterolithotomy | 35.00 |
| 988. | Nephrostomy | 25.00 |
| 989. | Nephropexy, as an independent procedure | 20.00 |
| 990. | Pyonephrosis, drainage of | 20.00 |
| 991. | Perinephric abscess, drainage of | 20.00 |
| 995. | Pelvi-ureteric junction, plastic procedures to | 40.00 |
| 996. | Divided ureter, repair of | 35.00 |
| 997. | Ureter, transplantation of, into skin | 30.00 |
| 998. | Ureter, transplantation of, into bladder | 35.00 |
| 999. | Ureter, transplantation of, into intestine | 40.00 |
| 1000. | Ureter, transplantation of, into isolated intestinal loop | 50.00 |
|  | *Operations on the Bladder* (*Closed*) |  |
| 1005. | Bladder, catheterization of—where no other surgical procedure is performed | 2.00 |
| 1006. | Cystoscopy | 7.00 |
| 1007. | Cystoscopy, with ureteric catheterization, with or without introduction of opaque medium | 10.00 |
| 1008. | Cystometrography | 4.00 |
| 1009. | Cystoscopic removal of foreign body | 12.00 |
| 1010. | Cystoscopy, with biopsy of bladder tumours | 12.00 |
| 1011. | Cystoscopy, with diathermy or resection of bladder tumours | 20.00 |
| 1012. | Cystoscopy, with ureteric meatotomy | 15.00 |
| 1013. | Cystoscopy, with diathermy of ureteric orifices | 15.00 |
| 1014. | Cystoscopy, with endoscopic bladder neck resection | 25.00 |
| 1015. | Cystoscopy, with endoscopic removal or manipulation of ureteric calculus | 15.00 |
| 1016. | Litholapaxy, with or without cystoscopy | 20.00 |
|  | *Operations on the Bladder (Open)* |  |
| 1020. | Bladder, repair of rupture of | 30.00 |
| 1021. | Cystostomy or cystotomy, suprapubic | 15.00 |
| 1022. | Bladder, partial excision or plastic repair of | 40.00 |
| 1023. | Bladder, excision of, with ureteric transplantation | 60.00 |
| 1024. | Bladder neck contracture, operation for | 30.00 |
| 1025. | Bladder tumours, suprapubic diathermy of | 30.00 |
| 1026. | Diverticulum of bladder, excision or obliteration of | 40.00 |
| 1027. | Vesical fistula, cutaneous, operation for | 20.00 |
|  | *Operations on the Prostate* |  |
| 1032. | Prostatectomy (suprapubic, perineal or retropubic) | 50.00 |
| 1033. | Prostatectomy (endoscopic) | 30.00 |
| 1034. | Median bar, endoscopic resection of | 25.00 |
| 1035. | Prostate, total excision of | 60.00 |
| 1036. | Prostate, biopsy of (perineal or endoscopic) | 15.00 |
| 1037. | Prostatic abscess, retropubic drainage of | 15.00 |
|  | *Operations on Urethra, Penis or Scrotum* |  |
| 1042. | Urethral sounds, passage of | 3.00 |
| 1043. | Urethral stricture, dilatation of | 3.00 |
| 1044. | Urethra, repair of rupture of | 30.00 |
| 1045. | Urethral fistula, closure of | 10.00 |
| 1046. | Urethroscopy with removal of stone or foreign body | 8.00 |
| 1047. | Urinary meatotomy | 5.00 |
| 1048. | Urethrotomy with excision of stricture | 30.00 |
| 1049. | Urethrotomy, perineal (external), as an independent procedure | 15.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 4.—Urological—*continued* |  |
|  | *Operations on Urethra, Penis or Scrotum*—continued | **$** |
| 1050. | Urethrotomy (internal) | 17.00 |
| 1051. | Urethroplasty not covered by any other item in this Part | 25.00 |
| 1052. | Urethral stricture, plastic repair of | 25.00 |
| 1053. | Hypospadias, correction of chordee | 17.00 |
| 1054. | Hypospadias, urethral reconstruction for | 30.00 |
| 1055. | Hypospadias, secondary correction of | 12.00 |
| 1056. | Epispadias, repair of, not involving sphincter | 30.00 |
| 1057. | Epispadias, repair of, including bladder neck closure | 40.00 |
| 1058. | Urethra, diathermy of | 12.00 |
| 1059. | Penis, partial amputation of | 20.00 |
| 1060. | Penis, complete or radical amputation of | 35.00 |
| 1061. | Penis, amputation of, with excision of glands | 50.00 |
| 1062. | Scrotum, partial excision of | 15.00 |
|  | *Operations on Testes, Vasa or Seminal Vesicles* |  |
| 1070. | Orchidectomy, with excision of retroperitoneal glands or seminal vesicles | 50.00 |
| 1071. | Orchidoplasty | 20.00 |
| 1072. | Epididymectomy | 17.00 |
| 1073. | Vasoepididymostomy | 25.00 |
| 1074. | Vasectomy (simple) | 10.00 |
| 1075. | Vasectomy (radical) including seminal vesicles | 35.00 |
| 1076. | Vasotomy or vasectomy (bilateral) | 15.00 |
| 1077. | Testicular biopsy | 7.00 |
| 1078. | Spermatocele, excision of | 12.00 |
|  | Division 5.—Gynaecological |  |
| 1085. | Bartholin’s cyst, excision of | 7.00 |
| 1086. | Bartholin’s abscess, incision of | 3.00 |
| 1087. | Skene’s duct, incision of, or removal of calculus from | 5.00 |
| 1088. | Urethra or urethral caruncle, cauterization of | 5.00 |
| 1089. | Urethral caruncle, excision of | 10.00 |
| 1090. | Clitoris, amputation of | 10.00 |
| 1091. | Vulvectomy (simple) | 20.00 |
| 1092. | Vulvectomy (radical) | 50.00 |
| 1093. | Pelvic lymph glands, excision of (radical) | 40.00 |
| 1094. | Colpotomy or colporrhaphy, not covered by any other item in this Part | 7.00 |
| 1095. | Hymenectomy | 5.00 |
| 1096. | Plastic repair to enlarge vaginal orifice | 10.00 |
| 1097. | Vagina, dilatation of, as an independent procedure—each attendance at which dilatation is performed |  |
|  | 1.00 |
| 1098. | Gynaecological examination under anaesthesia not performed in association with any service covered by any other item in this Part | 2.00 |
| 1099. | Simple tumour of vagina or vulva, removal of | 5.00 |
| 1100. | Vagina, complete removal of | 40.00 |
| 1101. | Vaginal reconstruction in congenital absence or gynaetresia | 40.00 |
| 1102. | Cystocele or rectocele, repair of, not covered by item 1103 or 1104 in this Schedule | 20.00 |
| 1103. | Cystocele and rectocele, repair of, not covered by the next succeeding item | 25.00 |
| 1104. | Colpoplasty, Donald-Fothergill or Manchester operation (operation for genital prolapse) | 30.00 |
| 1105. | Urethrocele, operation for | 10.00 |
| 1106. | Fistula between genital and urinary or alimentary tracts, repair of | 40.00 |
| 1107. | Stress incontinence, sling operation for, as an independent procedure | 35.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 5.—Gynaecological—*continued* |  |
|  |  | **$** |
| 1108. | Cervix, amputation or repair of, not covered by item 1104 in this Schedule | 10.00 |
| 1109. | Cervix, cauterization, ionization or diathermy of | 3.00 |
| 1110. | Cervix, removal of polyp from | 4.00 |
| 1111. | Cervix, cone biopsy of | 10.00 |
| 1112. | Cervix, dilatation of, not covered by the next succeeding item | 4.00 |
| 1113. | Uterus, curettage of, with or without dilatation | 5.00 |
| 1114. | Examination of the uterine cervix by a magnifying colposcope of the Hinselmann type or similar instrument | 4.00 |
| 1115. | Cervix, purse string ligation of, for threatened miscarriage | 5.00 |
| 1116. | Hysterectomy (other than vaginal)—subtotal | 25.00 |
| 1117. | Hysterectomy (other than vaginal)—total | 30.00 |
| 1118. | Hysterectomy and dissection of pelvic glands | 50.00 |
| 1119. | Hysterotomy | 15.00 |
| 1120. | Vaginal hysterectomy (with or without plastic repair operation) | 35.00 |
| 1121. | Ectopic gestation, removal of | 20.00 |
| 1122. | Myomectomy | 25.00 |
| 1123. | Round ligaments, shortening of | 20.00 |
| 1124. | Bicornuate uterus, plastic reconstruction for | 16.00 |
| 1125. | Uterus, suspension or fixation of | 20.00 |
| 1126. | Oophorectomy, salpingectomy, salpingo-oophorectomy or ligation of Fallopian tubes, not associated with hysterectomy | 20.00 |
| 1127. | Ovarian, parovarian, fimbrial or broad ligament cyst, excision of, not covered by any other item in this Part | 20.00 |
| 1128. | Salpingostomy or salpingolysis, or both | 25.00 |
| 1129. | Fallopian tubes, implantation of, into uterus | 25.00 |
| 1130. | Pelvic abscess, suprapubic drainage of | 15.00 |
| 1131. | Rubin test for patency | 4.00 |
|  | Division 6.—Ophthalmological |  |
| 1150. | Eye, enucleation of | 17.00 |
| 1151. | Eye, enucleation of, and insertion of ball | 25.00 |
| 1152. | Globe, evisceration of | 20.00 |
| 1153. | Orbit, exenteration of | 35.00 |
| 1154. | Perforating wound of globe, repair of | 30.00 |
| 1155. | Intraocular foreign body, removal of | 40.00 |
| 1156. | Abscess (intraorbital), drainage of | 5.00 |
| 1157. | Tarsal cyst, extirpation of | 3.00 |
| 1158. | Tarsal cartilage, excision of | 12.00 |
| 1159. | Canthoplasty or tarsorrhaphy | 12.00 |
| 1160. | Lacrimal sac, excision of, or operation on | 15.00 |
| 1161. | Dacryocystorrhinostomy | 30.00 |
| 1162. | Lacrimal canaliculum, reconstruction of | 30.00 |
| 1163. | Lacrimal passages, probing or dilatation of, for obstruction | 3.00 |
| 1164. | Conjunctival peritomy | 6.00 |
| 1165. | Trachoma, crushing operation for | 7.00 |
| 1166. | Cornea or sclera, removal of superficial foreign body from | 1.00 |
| 1167. | Cornea or sclera, removal of foreign body, involving deeper layers | 4.00 |
| 1168. | Cornea, tattooing of | 12.00 |
| 1169. | Keratoplasty, superficial | 50.00 |
| 1170. | Cornea, transplantation of, including collection of implant | 60.00 |
| 1171. | Pterygium or Pinguecula, removal of | 12.00 |
| 1172. | Lens extraction (including initial and subsequent needlings) | 40.00 |
| 1173. | Insertion of artificial lens | 30.00 |
| 1174. | Cataract, juvenile, removal of, including subsequent needlings | 40.00 |
| 1175. | Secondary cataract, needling of—each stage | 10.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 6.—Ophthalmological—*continued* |  |
|  |  | **$** |
| 1176. | Paracentesis in relation to eye | 15.00 |
| 1177. | Glaucoma, filtering and allied operations for | 40.00 |
| 1178. | Iridectomy or iridotomy | 30.00 |
| 1179. | Cyclodiathermy | 15.00 |
| 1180. | Detached retina, diathermy, operation for | 50.00 |
| 1181. | Detached retina, resection or buckling operation for | 60.00 |
| 1182. | Detached retina, light coagulation for | 20.00 |
| 1183. | Retrobulbar transillumination | 5.00 |
| 1184. | Retrobulbar injection of alcohol | 5.00 |
| 1185. | Squint, operation for | 20.00 |
| 1186. | Suprachoroidal implantation of ocular muscle | 20.00 |
|  | Division 7.—Thoracic |  |
| 1200. | Thoracic cavity, aspiration or paracentesis of, or both | 2.00 |
| 1201. | Empyema, intercostal drainage of, not involving resection of rib | 6.00 |
| 1202. | Empyema, radical operation for, involving resection of rib | 20.00 |
| 1203. | Thoracotomy without pneumolysis | 25.00 |
| 1204. | Thoracotomy with pneumolysis | 30.00 |
| 1205. | Thoracotomy with pulmonary decortications | 40.00 |
| 1206. | Thoracoplasty (complete) | 50.00 |
| 1207. | Thoracoplasty (in stages)—each stage | 25.00 |
| 1208. | Thoracoscopy | 10.00 |
| 1209. | Thoracoscopy with division of pleural adhesions | 17.00 |
| 1210. | Thoracic duct cannulization | 6.00 |
| 1211. | Phrenic avulsion or crush | 7.00 |
| 1212. | Hydatid cysts of lungs, removal of | 35.00 |
| 1213. | Pericardium, drainage of by open operation | 30.00 |
| 1214. | Pneumonectomy or lobectomy | 60.00 |
| 1215. | Oesophagectomy or operation for atresia of oesophagus | 60.00 |
| 1216. | Oesophagus, reconstruction of, or replacement by bowel transplant | 60.00 |
| 1217. | Artificial pneumothorax—induction | 3.00 |
| 1218. | Artificial pneumothorax—each filling subsequent to induction | 2.00 |
| 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 | 60.00 |
| 1220. | Bronchoscopy with left atrial puncture | 20.00 |
| 1221. | Left ventricular puncture | 17.00 |
| 1222. | Blood dye—dilution indicator test | 6.00 |
| 1223. | Cardiac catheterization with or without fluoroscopy | 10.00 |
| 1224. | Cardiac catheterization with oximetry | 17.00 |
| 1225. | Implantation of cardiac pacemaker—extrathoracic | 10.00 |
|  | 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 | 1.00 |
| 1251. | Nerve trunk, primary suture of | 17.00 |
| 1252. | Cutaneous nerve, primary suture of | 7.00 |
| 1253. | Nerve, graft or anastomosis of | 30.00 |
| 1254. | Nerve trunk, secondary suture of | 20.00 |
| 1255. | Nerve, transposition of | 12.00 |
| 1256. | Neurectomy, neurotomy, or removal of tumour from peripheral nerve | 10.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 8.—Neuro-surgical—*continued* |  |
|  |  | **$** |
| 1257. | Neurectomy, periarterial | 30.00 |
| 1258. | Neurectomy, intracranial or radical as in tic douloureux | 40.00 |
| 1259. | Injection of intracranial ganglion, or primary branch of trigeminal nerve, with alcohol or similar substance | 15.00 |
| 1260. | Sympathectomy (cervical, lumbar, thoracic, sacral or presacral) | 30.00 |
| 1261. | Sympathetic trunk, injection into | 6.00 |
| 1262. | Neurolysis by open operation | 12.00 |
| 1263. | Fracture of skull, depressed or comminuted, operation for | 30.00 |
| 1264. | Complicated fracture or fractures of skull, operation for | 40.00 |
| 1265. | Reconstructive cranioplasty | 50.00 |
| 1266. | Chronic subdural haematoma, operation for | 40.00 |
| 1267. | Craniotomy, involving osteoplastic flap | 40.00 |
| 1268. | Intracranial haemorrhage, burr-hole craniotomy for | 15.00 |
| 1269. | Aneurysm, intracranial, operation for | 60.00 |
| 1270. | Craniotomy and tumour removal | 60.00 |
| 1271. | Intracranial cyst, needling and drainage of | 15.00 |
| 1272. | Craniotomy, burr-hole | 12.00 |
| 1273. | Transfrontal orbitotomy for tumours or other lesions | 50.00 |
| 1274. | Intracranial infection, drainage of | 30.00 |
| 1275. | Intracranial abscess, excision of | 60.00 |
| 1276. | Leucotomy or lobotomy for psychiatric causes | 40.00 |
| 1277. | Hemispherectomy | 60.00 |
| 1278. | Temporal lobectomy | 50.00 |
| 1279. | Laminectomy for cordotomy, removal of tumour or of intervertebral disc | 40.00 |
| 1280. | Lumbar puncture | 2.00 |
| 1281. | Cisternal puncture | 4.00 |
| 1282. | Ventricular puncture | 12.00 |
| 1283. | Spinal or epidural injection for neurological diagnosis or for therapeutic reasons | 3.00 |
| 1284. | Chemopallidectomy, or other stereotatic procedure | 50.00 |
|  | Division 9.—Treatment of Dislocations |  |
|  | *Dislocations not requiring Open Operation* |  |
| 1301. | Mandible—first or second dislocation | 2.00 |
| 1302. | Mandible—third or subsequent dislocation | 1.00 |
| 1303. | Clavicle | 6.00 |
| 1304. | Shoulder—first or second dislocation | 5.00 |
| 1305. | Shoulder—third or subsequent dislocation—requiring anaesthesia | 5.00 |
| 1306. | Shoulder—third or subsequent dislocation—not requiring anaesthesia | 2.00 |
| 1307. | Elbow | 6.00 |
| 1308. | Carpal bone | 4.00 |
| 1309. | Carpus on radius and ulna | 10.00 |
| 1310. | Finger | 2.00 |
| 1311. | Metacarpo-phalangeal joint of thumb | 5.00 |
| 1312. | Hip | 15.00 |
| 1313. | Knee | 12.00 |
| 1314. | Patella | 4.00 |
| 1315. | Ankle | 7.00 |
| 1316. | Toe | 2.00 |
| 1317. | Tarsus or tarsal bone | 5.00 |
| 1318. | Spine (cervical), without fracture | 15.00 |
| 1319. | Spine (lumbar), without fracture | 15.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 9.—Treatment of Dislocations—*continued* |  |
|  | *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*) Sixty dollars,  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*) | | |
|
|  |  | **$** |
| 1325. | Terminal phalanx of finger or thumb | 2.00 |
| 1326. | Proximal phalanx of finger or thumb | 5.00 |
| 1327. | Middle phalanx of finger | 3.00 |
| 1328. | One or more metacarpals, not involving base of first carpometacarpal joint | 5.00 |
| 1329. | One or more metacarpals, involving the first carpometacarpal joint (Bennett’s fracture) | 7.00 |
| 1330. | Carpal bone (excluding navicular) | 4.00 |
| 1331. | Navicular or carpal scaphoid | 10.00 |
| 1332. | Radius | 8.00 |
| 1333. | Ulna | 8.00 |
| 1334. | Both shafts of forearm | 12.00 |
| 1335. | Colles’ fracture of wrist | 7.00 |
| 1336. | Distal end of radius or ulna, involving wrist | 7.00 |
| 1337. | Humerus | 12.00 |
| 1338. | Clavicle or sternum | 5.00 |
| 1339. | Scapula | 7.00 |
| 1340. | One or more ribs—each attendance | 0.80 |
| 1341. | Maxilla—not requiring splinting | 8.00 |
| 1342. | Maxilla—with wiring of teeth or internal fixation | 15.00 |
| 1343. | Maxilla—with external fixation | 20.00 |
| 1344. | Mandible—not requiring splinting | 9.00 |
| 1345. | Mandible—with wiring of teeth or internal fixation | 15.00 |
| 1346. | Mandible—skeletal pinning with external fixation | 20.00 |
| 1347. | Zygoma | 7.00 |
| 1348. | Pelvis (excluding symphysis pubis) or sacrum | 12.00 |
| 1349. | Symphysis pubis | 10.00 |
| 1350. | Femur | 25.00 |
| 1351. | Patella, fibula or tarsal bone (excepting os calcis or os talus) | 5.00 |
| 1352. | Tibia | 10.00 |
| 1353. | Both shafts of leg | 20.00 |
| 1354. | Ankle (Pott’s fracture), with or without dislocation of ankle | 20.00 |
| 1355. | Os calcis (calcaneus) or os talus | 10.00 |
| 1356. | Metatarsals—one or more | 5.00 |
| 1357. | Phalanx of toe (other than great toe) | 2.00 |
| 1358. | More than one phalanx of toe (other than great toe) | 3.00 |
| 1359. | Distal phalanx of great toe | 3.00 |
| 1360. | Proximal phalanx of great toe | 4.00 |
| 1361. | Skull, not requiring operation—each attendance | 0.80 |
| 1362. | Nasal bones, not requiring reduction—each attendance | 0.80 |
| 1363. | Nasal bones, requiring reduction | 5.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **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 | | |
|
| 1364. | Spine (excluding sacrum), transverse process or bone other than vertebral body, not requiring immobilization in plaster—each attendance | **$** |
| 0.80 |
| 1365. | Spine (excluding sacrum), transverse process or bone other than vertebral body, requiring immobilization in plaster | 12.00 |
| 1366. | Spine (excluding sacrum), vertebral body, without involvement of cord, not requiring immobilization in plaster—each attendance | 0.80 |
| 1367. | Spine (excluding sacrum), vertebral body, without involvement of cord, requiring immobilization in plaster | 25.00 |
|
| 1368. | Spine (excluding sacrum), vertebral body, with involvement of cord | 50.00 |
| *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*)Sixty dollars,  whichever is the less | |
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|
| *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*) Sixty dollars,  whichever is the less | |
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| *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*)Sixty dollars,  whichever is the less | |
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|
|  | *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 | |
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|
| 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 | |
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|
| 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 | |
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|
| 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 | |
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First Schedule—*continued*

The schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 11.—Orthopaedic |  |
|  |  | **$** |
| 1401. | Hip—arthrodesis, arthrectomy or arthroplasty | 60.00 |
| 1402. | Hip—arthrotomy | 25.00 |
| 1403. | Knee—arthrodesis, arthrectomy or arthroplasty | 40.00 |
| 1404. | Knee—arthrotomy | 15.00 |
| 1405. | Knee—operation for internal derangement | 25.00 |
| 1406. | Knee—reconstruction of cruciate ligaments | 40.00 |
| 1407. | Knee—reconstruction of capsular ligaments | 30.00 |
| 1408. | Knee—excision of patella | 20.00 |
| 1409. | Knee—operation for recurrent dislocation of patella | 20.00 |
| 1410. | Shoulder—removal of calcium deposit from cuff | 10.00 |
| 1411. | Shoulder—arthrotomy | 20.00 |
| 1412. | Shoulder—arthroplasty or plastic reconstruction | 35.00 |
| 1413. | Shoulder—arthrodesis or arthrectomy | 35.00 |
| 1414. | Joint, repair of capsule or ligament of | 10.00 |
| 1415. | Sacro-iliac joint—arthrodesis | 30.00 |
| 1416. | Other large joint—arthrodesis, arthrectomy or arthroplasty | 25.00 |
| 1417. | Finger or other small joint—arthrodesis, arthrectomy or arthroplasty | 10.00 |
| 1418. | Other large joint—arthrotomy | 15.00 |
| 1419. | Small joint—arthrotomy | 5.00 |
| 1420. | Joint, aspiration of, or intra-articular injection into, or both of those services | 2.00 |
| 1421. | Foot or ankle region—triple arthrodesis | 30.00 |
| 1422. | Spine, manipulation of, under general anaesthesia | 10.00 |
| 1423. | Spine, application of plaster jacket | 5.00 |
| 1424. | Joint (other than spine), manipulation of, under general anaesthesia | 7.00 |
| 1425. | Osteotomy or osteectomy of phalanx, metacarpal or metatarsal | 12.00 |
| 1426. | Osteotomy or osteectomy of fibula, radius, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus | 17.00 |
| 1427. | Osteotomy or osteectomy of tibia, humerus, femur or pelvic bone | 25.00 |
| 1428. | Excision of exostosis of small bone | 10.00 |
| 1429. | Excision of exostosis of large bone | 15.00 |
| 1430. | Bone graft to spine, posterior, not covered by the next succeeding item | 30.00 |
| 1431. | Bone graft to spine with interbody spinal fusion | 50.00 |
| 1432. | Bone graft not covered by any other item in this Part | 25.00 |
| 1433. | Accessory or sesamoid bone, removal of | 10.00 |
| 1434. | Epicondylitis, open operation for | 10.00 |
| 1435. | Condylectomy | 20.00 |
| 1436. | Calcanean spur, removal of | 12.00 |
| 1437. | Hallux valgus, correction of | 17.00 |
| 1438. | Hallux rigidus, correction of | 17.00 |
| 1439. | Hammer toe, correction of | 12.00 |
| 1440. | Achilles tendon or other large tendon, suture of | 15.00 |
| 1441. | Flexor tendon of hand, primary suture of | 10.00 |
| 1442. | Flexor tendon of hand, secondary suture of | 12.00 |
| 1443. | Extensor tendon of hand, primary suture of | 7.00 |
| 1444. | Extensor tendon of hand, secondary suture of | 10.00 |
| 1445. | Tendon of foot, primary suture of | 7.00 |
| 1446. | Tendon of foot, secondary suture of | 10.00 |
| 1447. | Tenotomy, subcutaneous, one or more tendons | 7.00 |
| 1448. | Tenotomy, open, with or without tenoplasty | 12.00 |
| 1449. | Tendon or ligament transplantation | 17.00 |
| 1450. | Tendon graft | 25.00 |
| 1451. | Tendon splitting | 15.00 |
| 1452. | Dupuytren’s contracture, subcutaneous fasciotomy | 12.00 |
| 1453. | Dupuytren’s contracture, radical operation for | 20.00 |
| 1454. | Volkmann’s contracture, operation for | 20.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 11.—Orthopaedic:—*continued* |  |
|  |  | $ |
| 1455. | Tendon sheath, incision of | 5.00 |
| 1456. | Stenosing tendovaginitis, open operation for | 10.00 |
| 1457. | Middle palmar, thenar or hypothenar spaces, drainage of | 5.00 |
| 1458. | Incision of pulp space, paronychia or other acute infection of hands or feet, not covered by any other item in this Part | 2.00 |
| 1459. | Digital nail, removal of | 2.00 |
| 1460. | Acromion or coraco-acromion ligament, removal of | 15.00 |
| 1461. | Scalenotomy | 12.00 |
| 1462. | Exploration of brachial plexus not covered by any other item in this Part | 15.00 |
| 1463. | Cervical rib, removal of | 25.00 |
| 1465. | Ingrowing toenail, excision of nail bed | 5.00 |
| 1466. | Insertion of orthopaedic pin or wire where no other surgical procedure is performed | 6.00 |
| 1467. | Osteosynthesis by Smith-Petersen nail | 35.00 |
| 1468. | Cicatricial flexion contracture of joint, correction of, involving tissues deeper than skin and subcutaneous tissue | 20.00 |
|  | Division 12.—Paediatric |  |
|  | *Manipulations and Plaster Work for correction of Congenital Abnormalities* |  |
| 1480. | Congenital dislocation of the hip—manipulation and plaster (one hip) | 7.00 |
| 1481. | Talipes equinovarus—manipulation under general anaesthesia | 3.00 |
| 1482. | Talipes equinovarus—manipulation and plaster under general anaesthesia | 4.00 |
| 1483. | Calcaneus valgus—manipulation under general anaesthesia | 3.00 |
| 1484. | Calcaneus valgus—manipulation and plaster under general anaesthesia | 4.00 |
| 1485. | Pes planus—manipulation under general anaesthesia | 3.00 |
| 1486. | Pes planus—manipulation and plaster under general anaesthesia | 4.00 |
| 1487. | Genu varum or genu valgum—manipulation under general anaesthesia | 3.00 |
| 1488. | Genu varum or genu valgum—manipulation and plaster under general anaesthesia | 5.00 |
| 1489. | Genu varum or genu valgum—manipulation and plaster with osteoclasis | 12.00 |
| 1490. | Contractures, manipulation under general anaesthesia, not covered by any other item in this Part | 3.00 |
| 1491. | Contractures, manipulation and plaster under general anaesthesia, not covered by any other item in this Part | 4.00 |
| 1492. | Spastic paralysis—manipulation and plaster (one limb) | 4.00 |
|  | *Operations for correction of Congenital Abnormalities* |  |
| 1500. | Imperforate anus, abdominoperineal correction of | 50.00 |
| 1501. | Imperforate anus, correction of (other than abdominoperineal) | 20.00 |
| 1502. | Intestinal atresia or stenosis—excision or anastomosis (or both) | 40.00 |
| 1503. | Duodenal obstruction (congenital)—anastomosis or resection of | 40.00 |
| 1504. | Hypertrophic pyloric stenosis, operation for | 25.00 |
| 1505. | Congenital volvulus of the small intestine, correction of | 30.00 |
| 1506. | Hirschsprung’s disease, rectosigmoidectomy for | 50.00 |
| 1507. | Exomphalos, operation for | 25.00 |
| 1508. | Exomphalos, operation for, by plastic flap | 35.00 |
| 1509. | Oesophagus, radical correction of congenital stenosis of | 60.00 |
| 1510. | Tracheo-oesophageal fistula, correction of | 60.00 |
| 1511. | Contracted bladder neck (congenital), wedge excision or perurethral resection of | 30.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 12.—Paediatric—*continued* |  |
|  | *Operations for correction of Congenital Abnormalities*—continued | **$** |
| 1512. | Urachal fistula | 20.00 |
| 1513. | Ectopic bladder—’turning-in’ operation | 50.00 |
| 1514. | Pinhole urinary meatus—meatotomy | 5.00 |
| 1515. | Urethral valves, open removal of | 40.00 |
| 1516. | Incontinence of urine (congenital)—plastic operation to sphincter | 30.00 |
| 1517. | Myelomeningocele—excision of sac | 30.00 |
| 1518. | Hydrocephalus—suboccipital decompression, third ventriculostomy or Torkildsen’s operation |  |
| 50.00 |
| 1519. | Ventriculo-jugular shunt | 50.00 |
| 1520. | Ventriculo-atrial shunt for hydrocephalus | 50.00 |
| 1521. | Hydrocephalus, spino-ureteral, spino-peritoneal or spino-pleural anastomosis of, or ventricular cable shunt for | 40.00 |
| 1522. | Craniostenosis, operation for | 40.00 |
| 1523. | Arachnoidal cyst, operation for | 50.00 |
| 1524. | Subdural haemorrhage, tap for | 3.00 |
| 1525. | Subdural haemorrhage, osteoplastic flap and excision of | 50.00 |
| 1526. | Abnormal limb, amputation of | 15.00 |
| 1527. | Extra digit, amputation of | 5.00 |
| 1528. | Tetralogy of Fallot or patent ductus arteriosus, operation for | 60.00 |
| 1532. | Choanal atresia, repair of—transpalatine | 30.00 |
| 1533. | Choanal atresia, repair of—intranasal | 10.00 |
|  | *Operations for excision of Congenital Abnormalities* |  |
| 1541. | Dermoid, periorbital, excision of | 6.00 |
| 1542. | Dermoid, orbital, excision of | 25.00 |
| 1543. | Dermoid of nose, superficial, excision of | 6.00 |
| 1544. | Dermoid of nose, excision of, with intranasal extension | 20.00 |
| 1545. | Sacrococcygeal dermoid or teratoma other than pilonidal sinus, excision of | 30.00 |
|  | *Plastic operations for Congenital Abnormalities* |  |
| 1550. | Lymphangiectasis of limb (Milroy’s disease)—excision of | 25.00 |
| 1551. | Macrocheilia, macroglossia or macrostomia, operation for | 25.00 |
| 1552. | Angioma, cauterization or injection of under general anaesthesia | 3.00 |
| 1553. | Torticollis, operation for | 20.00 |
|  | *Operations for acquired Conditions* |  |
| 1560. | Portal hypertension, lienorenal anastomosis for | 60.00 |
| 1561. | Portal vein anastomosis | 60.00 |
| 1562. | Prolapsed rectum, injection of | 2.00 |
| 1563. | Megacolon, colectomy | 40.00 |
| 1564. | Epiphysitis (Perthes’ or Calve’s), plaster for | 5.00 |
| 1565. | Epiphysitis (Sever’s, Kohler’s, Kienboch’s or Schlatter’s), plaster for | 3.00 |
| 1566. | Epiphysitis (Scheuermann’s), plaster for | 5.00 |
|  | 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) | 20.00 |
| 1602. | Abrasive therapy, limited area | 10.00 |
| 1603. | Abrasive therapy, extensive | 20.00 |
| 1604. | Electrolysis epilation, each treatment | 2.00 |
| 1605. | Excision of angioma and direct repair, small | 6.00 |
| 1606. | Excision of angioma and direct repair, large | 10.00 |
| 1607. | Major excision and grafting for lymph-oedema | 30.00 |
| 1608. | Foreign implants for contour reconstruction | 17.00. |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  |  |  |
|  | **Part 10.—Operations—*continued*** |  |
|  | Division 13.—Plastic and Reconstructive—*continued* |  |
|  | *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 | 8.00 |
| 1617. | Single stage local flap repair, complicated or large | 12.00 |
| 1618. | Direct flap repair (cross leg or similar), first stage | 12.00 |
| 1619. | Direct flap repair (cross leg or similar), second stage | 7.00 |
| 1620. | Direct flap repair, small, (cross finger or similar), first stage | 8.00 |
| 1621. | Direct flap repair, small, (cross finger or similar), second stage | 4.00 |
| 1622. | Indirect flap or tubed pedicle, formation of | 12.00 |
| 1623. | Indirect flap or tubed pedicle, intermediate transfer of | 8.00 |
| 1624. | Indirect flap or tubed pedicle—separation and application to site | 17.00 |
| 1625. | Direct or indirect flap repair, revision of graft | 8.00 |
| 1626. | Free graft (split skin or pinch graft) on granulating areas, small | 5.00 |
| 1627. | Free graft (split skin) on granulating areas, extensive | 12.00 |
| 1628. | Free graft (split skin) to extensive burns | 20.00 |
| 1629. | Free grafts (split skin) including elective dissection, small | 10.00 |
| 1630. | Free grafts (split skin) including elective dissection, extensive | 20.00 |
| 1631. | Free full thickness grafts to defect not more than 32 square centimetres | 12.00 |
| 1632. | Free full thickness grafts to defect more than 32 square centimetres | 15.00 |
| 1633. | Cineplasty for amputation stump | 25.00 |
| 1634. | Mammaplasty (unilateral) | 35.00 |
|  | *Meticulous Plastic Repair of Hands, Feet, Scalp, Face or Neck designed to obtain maximal Functional or Cosmetic Results including the preparation of the Defect requiring Repair* |  |
| 1635. | Single stage local flap repair, simple, small | 12.00 |
| 1636. | Single stage local flap repair, complicated or large | 18.00 |
| 1637. | Direct flap repair (cross leg or similar), first stage | 18.00 |
| 1638. | Direct flap repair (cross leg or similar), second stage | 10.00 |
| 1639. | Direct flap repair, small, (cross finger or similar), first stage | 12.00 |
| 1640. | Direct flap repair, small, (cross finger or similar), second stage | 6.00 |
| 1641. | Indirect flap or tubed pedicle, formation of | 18.00 |
| 1642. | Indirect flap or tubed pedicle, intermediate transfer of | 12.00 |
| 1643. | Indirect flap or tubed pedicle—separation and application to site | 26.00 |
| 1644. | Direct or indirect flap repair, revision of graft | 12.00 |
| 1645. | Free graft (split skin or pinch graft) on granulating areas, small | 8.00 |
| 1646. | Free graft (split skin) on granulating areas, extensive | 18.00 |
| 1647. | Free graft (split skin) to extensive burns | 30 00 |
| 1648. | Free grafts (split skin) including elective dissection, small | 15.00 |
| 1649. | Free grafts (split skin) including elective dissection, extensive | 30.00 |
| 1650. | Free full thickness grafts to defect not more than 32 square centimetres | 18.00 |
| 1651. | Free full thickness grafts to defect more than 32 square centimetres | 22.00 |
| 1652. | Digit, transplantation of—complete procedure | 40.00 |
| 1653. | Syndactyly, correction of, each stage or each web | 12.00 |
| 1654. | Face, operations involving supportive grafts | 30.00 |
| 1655. | Suspension operation for facial paralysis | 30.00 |
| 1656. | Mandible, section—fixation for prognathism or retrognathism | 35.00 |
| 1657. | Mandible, resection of | 40.00 |
| 1658. | Maxilla, resection of | 50.00 |
| 1659. | Mandible, segmental resection of, for tumours | 35.00 |
| 1660. | Mandible, condylectomy | 20.00 |
| 1661. | Osteotomy or osteectomy of mandible (other than alveolar margin) for congenital malformation not covered by any other item in this Part | 17.00 |
| 1662. | Osteotomy or osteectomy of maxilla (other than alveolar margin) for congenital malformation not covered by any other item in this Part | 18.00 |

First Schedule—*continued*

The Schedule—*continued*

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| Item No. | Medical Service | Commonwealth Benefit |
|  |  |  |
|  | **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* |  |
|  |  | **$** |
| 1670. | Single stage local flap repair, simple, small | 16.00 |
| 1671. | Single stage local flap repair, complicated or large | 24.00 |
| 1672. | Direct flap repair (cross leg or similar), first stage | 24.00 |
| 1673. | Direct flap repair (cross leg or similar), second stage | 14.00 |
| 1674. | Direct flap repair, small, (cross finger or similar), first stage | 16.00 |
| 1675. | Direct flap repair, small, (cross finger or similar), second stage | 8.00 |
| 1676. | Indirect flap or tubed pedicle, formation of | 24.00 |
| 1677. | Indirect flap or tubed pedicle, intermediate transfer of | 16.00 |
| 1678. | Indirect flap or tubed pedicle—separation and application to site | 34.00 |
| 1679. | Direct or indirect flap repair, revision of graft | 16.00 |
| 1680. | Free graft (split skin or pinch graft) on granulating areas, small | 10.00 |
| 1681. | Free graft (split skin) on granulating areas, extensive | 24.00 |
| 1682. | Free graft (split skin) to extensive burns | 40.00 |
| 1683. | Free grafts (split skin) including elective dissection, small | 20.00 |
| 1684. | Free grafts (split skin) including elective dissection, extensive | 40.00 |
| 1685. | Free full thickness grafts to defect not more than 32 square centimetres | 24.00 |
| 1686. | Free full thickness grafts to defect more than 32 square centimetres | 30.00 |
| 1687. | Whole thickness eyelid reconstruction—complete procedure | 25.00 |
| 1688. | Partial reconstruction of eyelid or socket | 7.00 |
| 1689. | Correction of ptosis (unilateral) | 25.00 |
| 1690. | Ectropion or entropion, correction of, or reduction of eyelids | 20.00 |
| 1691. | Symblepharon, grafting for | 20.00 |
| 1692. | Nasal skeletal deformity (involving refracture or septoplasty), correction of | 25.00 |
| 1693. | Skeletal supportive grafts to nose | 25.00 |
| 1694. | Corrective rhinoplasty (cosmetic) | 25.00 |
| 1695. | Forehead rhinoplasty—complete procedure | 35.00 |
| 1696. | Rhinophyma, correction of | 20.00 |
| 1697. | Rhinoplasty, secondary revision of | 10.00 |
| 1698. | Composite graft to nose or ear | 15.00 |
| 1699. | Lop ear, bat ear or similar deformity, correction of | 25.00 |
| 1700. | Ear reconstruction (congenital or traumatic deficiency)—per stage | 12.00 |
| 1701. | Congenital atresia, reconstruction of external auditory canal | 35.00 |
| 1702. | Full thickness lip reconstruction, other than simple suture—complete procedure | 25.00 |
| 1703. | Cleft lip complete, primary repair, unilateral | 30.00 |
| 1704. | Cleft lip complete, primary repair, one stage, bilateral | 40.00 |
| 1705. | Cleft lip incomplete, primary repair, unilateral | 20.00 |
| 1706. | Cleft lip secondary correction, partial or incomplete | 15.00 |
| 1707. | Cleft lip secondary correction, complete revision | 25.00 |
| 1708. | Cleft lip secondary correction, abbé transplant | 35.00 |
| 1709. | Cleft lip secondary correction of nostril or nasal tip | 15.00 |
| 1710. | Cleft palate, primary repair, partial cleft | 30.00 |
| 1711. | Cleft palate, primary repair, complete cleft | 40.00 |
| 1712. | Cleft palate, secondary repair, incomplete | 20.00 |
| 1713. | Cleft palate, secondary repair, lengthening procedure | 35.00 |
| 1714. | Pharyngeal flap | 35.00” |

SECOND SCHEDULE Section 8.

Amendments of the Principal Act in Relation to Decimal Currency

|  |  |  |
| --- | --- | --- |
| Provisions amended | Omit— | Insert— |
| Section 15a(1.)R | Thirty pounds | Sixty dollars |
| Section 16(1.)(*a*) | Thirty pounds | Sixty dollars |
| Section 16(1.)(*b*) | Thirty pounds | Sixty dollars |
| Section 16(1.)(*c*) | Thirty pounds | Sixty dollars |
| Section 16(1.)(*d*) | Thirty pounds | Sixty dollars |
| Section 16(1.)(*e*) | Thirty pounds | Sixty dollars |
| Section 30 | One hundred pounds | Two hundred dollars |
| Section 37a | One hundred pounds | Two hundred dollars |
| Section 38(1.) | Sixteen shillings | One dollar sixty cents |
| Section 41 | Twenty pounds | Forty dollars |
| Section 42(2.) | Twenty pounds | Forty dollars |
| Section 43 | Twenty pounds | Forty dollars |
| Section 46(1.) | One pound | Two dollars |
| Section 46(2.) | Eight shillings | Eighty cents |
|  | One pound | Two dollars |
| Section 48(1.) | Sixteen shillings | One dollar sixty cents |
|  | Eight shillings | Eighty cents |
|  | One pound | Two dollars |
| Section 48(2.)(*a*) | Sixteen shillings | One dollar sixty cents |
| Section 53(1.) | Eight shillings | Eighty cents |
| Section 56(1.) | One pound | Two dollars |
| Section 60 | Twenty pounds | Forty dollars |
| Section 61 | Twenty pounds | Forty dollars |
| Section 62 | One hundred pounds | Two hundred dollars |
| Section 68(1.) | Sixteen shillings | One dollar sixty cents |
| Section 68(2.) | Sixteen shillings | One dollar sixty cents |
| Section 74(1.) | One hundred pounds | Two hundred dollars |
| Section 74(5.) | One hundred pounds | Two hundred dollars |
| Section 74(6.) | One hundred pounds | Two hundred dollars |
| Section 74(7.) | One hundred pounds | Two hundred dollars |
| Section 75(5.) | One hundred pounds | Two hundred dollars |
| Section 76 | One hundred pounds | Two hundred dollars |
| Section 78(1.) | One hundred pounds | Two hundred dollars |
| Section 82(1.) | One hundred pounds | Two hundred dollars |
| Section 82(2.) | One hundred pounds | Two hundred dollars |
| Section 82(3.) | One hundred pounds | Two hundred dollars |
| Section 82(4.) | One hundred pounds | Two hundred dollars |
| Section 82(5.) | One hundred pounds | Two hundred dollars |
| Section 82(6.) | One hundred pounds | Two hundred dollars |
| Section 82p | One hundred pounds | Two hundred dollars |
| Section 87(2.) | Five shillings | Fifty cents |
| Section 87(3.) | Five shillings | Fifty cents |
|  | Five shillings by a number | Fifty cents by a number |
| Section 88(2.) | One hundred pounds | Two hundred dollars |
| Section 88(3.) | One hundred pounds | Two hundred dollars |
| Section 92b | Five pounds | Ten dollars |
| Section 98(2.) | Ten pounds | Twenty dollars |
| Section 99(2a.)(*a*) | Five shillings | Fifty cents |
| Section 99(2a.)(*b*) | Five shillings | Fifty cents |
| Section 103 | One hundred pounds | Two hundred dollars |
| Section 104(2.) | One hundred pounds | Two hundred dollars |
| Section 104(3.) | One hundred pounds | Two hundred dollars |
| Section 128(1.) | One hundred pounds | Two hundred dollars |
| Section 129(1.) | One hundred pounds | Two hundred dollars |
| Section 134 | One hundred pounds | Two hundred dollars |
| Section 140(*b*) | Fifty pounds | One hundred dollars |