



Statutory Rules 1992 No. 95¹

**Health Insurance (1991-1992 Diagnostic
Imaging Services Table) Regulations²
(Amendment)**

I, THE GOVERNOR-GENERAL of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following Regulations under the *Health Insurance Act 1973*.

Dated 7 April 1992.

BILL HAYDEN
Governor-General

By His Excellency's Command,

B. HOWE
Minister of State for Health,
Housing and Community Services

1. Commencement

1.1 These Regulations, other than subregulations 3.2, 3.3 and 3.4, commence on 1 May 1992.

1.2 Subregulations 3.2, 3.3 and 3.4 commence on 1 June 1992.

2. Amendment

2.1 The Health Insurance (1991-1992 Diagnostic Imaging Services Table) Regulations are amended as set out in these Regulations.

3. Schedule (Table of Diagnostic Imaging Services—Rules of Interpretation)

3.1 Rule 5:

Add at the end:

“(3) An item including the symbol ‘**(CP)**’ is an R-type diagnostic imaging service given by or on behalf of a specialist in diagnostic radiology at:

- (a) a comprehensive radiology service facility; or
- (b) a hospital or registered day hospital facility to a private patient who is receiving hospital treatment; or
- (c) a nursing home to a patient who is accommodated in the nursing home and is receiving nursing home care; or
- (d) a radiology practice located not less than 10 kilometres by the most direct road route from the nearest other radiology service facility operated by or on behalf of a specialist in diagnostic radiology, other than a radiology service facility in a hospital.

“(4) An item including the symbol ‘**(OP)**’ is an R-type diagnostic imaging service given by or on behalf of a specialist in diagnostic radiology at a radiology service facility that is not a comprehensive radiology service facility.

“(5) An item including the symbol ‘**(NS)**’ is an R-type diagnostic imaging service given by or on behalf of a medical practitioner who is not a specialist in diagnostic radiology.

“(6) An item including the symbol ‘**(A)**’ is an R-type diagnostic imaging service given by or on behalf of a specialist in diagnostic radiology if:

- (a) the specialist has personally:
 - (i) interviewed the patient at the radiology service facility where the service is given, either immediately before the service is given or during the rendering of the service; or
 - (ii) examined, at the radiology service facility where the service is given, the radiographic image of the patient made at the facility before the patient leaves the facility; or
- (b) the service is given at:
 - (i) a hospital or registered day hospital facility to a private patient who is receiving hospital treatment; or
 - (ii) a nursing home to a patient who is accommodated in the nursing home and is receiving nursing home care; or

- (iii) a radiology practice located not less than 30 kilometres by the most direct road route from the nearest comprehensive radiology service facility.

“(7) In this rule:

‘comprehensive radiology service facility’ means a radiology service facility at which:

- (a) radiology services are provided by or on behalf of a specialist in diagnostic radiology; and
- (b) the practice operating the facility provides services using equipment that is permanently installed or permanently located at the facility; and
- (c) the practice operating the facility provides plain X-ray services (being services specified in any of items 57501 to 57750 (inclusive), items 57756 to 58009 (inclusive), or items 58018 to 58910 (inclusive) in this table) and at least 2 of the following kinds of service:
 - (i) ultrasound services (being services specified in any of items 55003 to 55239 in this table);
 - (ii) X-ray services involving the use of fluoroscopy and image intensification equipment (being services specified in any of the following items in this table: 58012, 58015, 58719, 58722, 58725, 58728, 58913, 58916, 58919, 58922, 58925, 58928, 58931, 58934, 58937, 58940, 58943, 58946, 58961, 58964, 58967, 58970, 58973, 58976, 59700, 59703, 59712, 59724, 59727, 59730, 59739, 59741, 59751, 59753, 59927, or 60500 to 60512 (inclusive));
 - (iii) mammographic examinations (being services specified in any of items 59300 or 59303 in this table);
 - (iv) computerised tomography services (being services specified in any of the items in 56000 to 57406 (inclusive) in this table).”.

3.2 Paragraph 5 (3) (a):

Omit the paragraph, substitute:

- “(a) a comprehensive radiology service facility at which a specialist in diagnostic radiology was in attendance for not less than 5 hours between 9.00 a.m. and 5.00 p.m. on each of the 20 business days before the day on which the service was given; or”.

3.3 Subrule 5 (4):

Omit the subrule, substitute:

“(4) An item including the symbol ‘(OP)’ is an R-type diagnostic imaging service given by or on behalf of a specialist in diagnostic radiology:

- (a) at a radiology service facility that is not a comprehensive radiology service facility; or
- (b) at a comprehensive radiology service facility at which a specialist in diagnostic radiology was not in attendance for at least 5 hours between 9.00 a.m. and 5.00 p.m. on each of the 20 business days before the day on which the service was given.”.

3.4 Subrule 5 (7):

Insert the following definition:

“ ‘**business day**’ means a day which is not a Saturday, Sunday or public holiday in the place at which the radiology service facility is located;”.

3.5 Rule 8:

Omit “55000 to 55106 (inclusive)”, substitute “55000 to 55239 (inclusive)”.

3.6 Rule 8:

Omit “57500 to 60981 (inclusive)”, substitute “57501 to 60703 (inclusive)”.

3.7 Rule 11:

Omit the rule.

3.8 Rule 12:

Omit “60900 to 60981 (inclusive)”, substitute “60903 to 60984 (inclusive)”.

4. Schedule (Table of Diagnostic Imaging Services—Services and Fees)

4.1 Items 55000 to 55027 (inclusive):

Omit the items, substitute:

“55000	Ultrasonic cross-sectional echography, not associated with item 55003, 55007 or 55010, if the patient is not referred by a medical practitioner for ultrasonic examination, each ultrasonic examination not exceeding 2 examinations in any 1 pregnancy (NR)	32.00
55003	Ultrasonic cross-sectional echography performed by, or on behalf of, a medical practitioner other than a specialist in diagnostic radiology, if the patient is referred by a medical practitioner for ultrasonic examination not associated with item 55000, 55007 or 55010, and if the referring medical practitioner is not a member of a group of practitioners of which the first-mentioned practitioner is a member (R)	93.00
55007	Ultrasonic echography, unidimensional not associated with item 55000 or 55003 (R)	56.00

55010	Ultrasonic echography, unidimensional, not associated with item 55000 or 55003 (NR)	56.00
55013	Ultrasound scan of head (R) (A)	93.00
55016	Ultrasound scan of 1 or more structures of neck (R) (A)	93.00
55019	Ultrasound scan of 1 or both breasts (R) (A)	93.00
55022	Ultrasound scan of abdomen including urinary tract where performed (R) (A)	93.00
55025	Ultrasound scan of urinary tract (R) (A)	93.00
55028	Ultrasound scan of pelvis by any or all of transabdominal, transvaginal or transrectal approach (R) (A)	93.00
55031	Ultrasound scan of scrotum (R) (A)	93.00
55034	Ultrasound scan of pregnant uterus (R) (A)	93.00
55037	Ultrasound scan of 1 or more joints (R) (A)	93.00
55040	Ultrasound scan not otherwise specified (R) (A)	93.00”.

4.2 Items 55100 to 55106 (inclusive):

Omit the items, substitute:

“55101	M-Mode and 2-dimensional real time echocardiographic examination of the heart from at least 2 thoracic windows, performed using a mechanical sector scanner or phased array transducer, with measurement of blood flow velocities across the cardiac valves using pulsed wave and continuous wave Doppler techniques, with recordings on video tape, not associated with items in Group II, Subgroup 1 (R) (NS)	152.00
55104	M-Mode and 2-dimensional real time echocardiographic examination of the heart from at least 2 thoracic windows, performed using a mechanical sector scanner or phased array transducer, with measurement of blood flow velocities across the cardiac valves using pulsed wave and continuous wave Doppler techniques, with recordings on video tape, not associated with items in Group II, Subgroup 1 (R) (A)	152.00
55107	M-Mode and 2-dimensional real time echocardiographic examination of the heart from at least 2 thoracic windows, performed using a mechanical sector scanner or phased array transducer, with measurement of cardiac dimensions, with recordings on video tape, not associated with items in Group II, Subgroup 1 (R) (NS)	86.00

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55110	M-Mode and 2-dimensional real time echocardiographic examination of the heart from at least 2 thoracic windows, performed using a mechanical sector scanner or phased array transducer, with measurement of cardiac dimensions, with recordings on video tape, not associated with items in Group I1, Subgroup 1 (R) (A)	86.00
55113	M-Mode and 2-dimensional real time echocardiographic examination of the heart from at least 2 thoracic windows, performed using a mechanical sector scanner or phased array transducer, with measurement of blood flow velocities across the cardiac valves using pulsed wave and continuous wave Doppler techniques, together with real time colour flow mapping from at least 2 thoracic windows, with recordings on video tape, not associated with items in Group I1, Subgroup 1 (R) (NS)	235.00
55116	M-Mode and 2-dimensional real time echocardiographic examination of the heart from at least 2 thoracic windows, performed using a mechanical sector scanner or phased array transducer, with measurement of blood flow velocities across the cardiac valves using pulsed wave and continuous wave Doppler techniques, together with real time colour flow mapping from at least 2 thoracic windows, with recordings on video tape, not associated with items in Group I1, Subgroup 1 (R) (A)	235.00
55119	2-dimensional real time transoesophageal echocardiographic examination of the heart, not associated with any other echocardiographic examination (R) (NS)	235.00
55122	2-dimensional real time transoesophageal echocardiographic examination of the heart, not associated with any other echocardiographic examination (R) (A)	235.00
55125	2-dimensional real time transoesophageal echocardiographic examination of the heart, associated with another echocardiographic examination (R) (NS)	118.00
55128	2-dimensional real time transoesophageal echocardiographic examination of the heart, associated with another echocardiographic examination (R) (A)	118.00
55131	Intra-operative 2-dimensional real time transoesophageal echocardiography incorporating Doppler with colour flow mapping with recording onto video tape, performed during cardiac surgery incorporating sequential assessment of cardiac function before and after the surgical procedure (R)	335.00

Subgroup 3—Vascular

55200	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of carotid vessels (with or without vertebral arteries), peripheral vessels or intra-thoracic or intra-abdominal vascular structures (excluding cardiac and pregnancy related studies), (not associated with items in Group II, Subgroup 1)—1 examination and report (R) (NS)	160.00
55203	2 or more examinations of the kind referred to in item 55200 and report (not associated with item in Group II, Subgroup 1) (R) (NS)	275.00
55206	Duplex ultrasound involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of 1 or more vessels of the neck (not associated with items in Group II, Subgroup 1)—examination of 1 region and report (R) (A)	160.00
55209	Duplex ultrasound involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of 1 or more vessels of the upper limb or limbs (not associated with items in Group II, Subgroup 1)—examination of 1 region and report (R) (A)	160.00
55212	Duplex ultrasound involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of 1 or more vessels of the thorax (excluding cardiac studies) (not associated with items in Group II, Subgroup 1)—examination of 1 region and report (R) (A)	160.00
55215	Duplex ultrasound involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of 1 or more vessels of the abdomen (excluding pregnancy related studies), (not associated with items in Group II, Subgroup 1)—examination of 1 region and report (R) (A)	160.00
55218	Duplex ultrasound involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of 1 or more vessels of the lower limb or limbs, (not associated with items in Group II, Subgroup 1)—examination of 1 region and report (R) (A)	160.00
55221	Examination of 2 or more regions of the kind referred to in item 55206 to 55218, and report (not associated with item 55003) (R) (A)	275.00
55224	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of carotid vessels, with oculoplethysmography	

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	(not associated with item 55003)—examination and report (R) (NS)	192.00
55227	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of carotid vessels, with oculoplethysmography (not associated with item 55003)—examination and report (R) (A)	192.00
55230	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of peripheral vessels and carotid vessels, with oculoplethysmography (not associated with item 55003)— examination and report (R) (NS)	310.00
55233	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of peripheral vessels and carotid vessels, with oculoplethysmography (not associated with item 55003)— examination and report (R) (A)	310.00
55236	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of peripheral vessels before measured exercise using a treadmill or bicycle ergometer, and measurement of pressure after exercise for 10 minutes or until pressure is normal (unilateral or bilateral), (not associated with item 55003)— examination and report (R) (NS)	205.00
55239	Duplex scanning (unilateral or bilateral) involving B mode ultrasound imaging and integrated Doppler flow measurement by spectral analysis of peripheral vessels before measured exercise using a treadmill or bicycle ergometer, and measurement of pressure after exercise for 10 minutes or until pressure is normal (unilateral or bilateral), (not associated with item 55003)— examination and report (R) (A)	205.00".

4.3 Items 56000 to 56027 (inclusive):

Omit the items, substitute:

“56000	Computerised tomography—scan of brain with or without scan of internal auditory meatus without intravenous contrast medium (not covered by item 57000 or 57100) (R) (A)	138.00
56003	Computerised tomography—scan of brain with or without scan of internal auditory meatus with intravenous contrast medium (not covered by item 57003 or 57103) (R) (A)	192.00
56006	Computerised tomography—scan of brain with or without scan of internal auditory meatus without intravenous contrast medium (minimum of 8 slices) and with intravenous contrast medium (not covered by item 57006 or 57106) (R) (A)	225.00
56009	Computerised tomography—scan of pituitary fossa by multiple thin slices (including reconstructions) without or with intravenous contrast medium and with or without brain scan (R) (A)	460.00
56012	Computerised tomography—scan of orbits by multiple thin slices (including reconstructions) without or with intravenous contrast medium and with or without brain scan (R) (A)	455.00
56015	Computerised tomography—scan of middle ear and temporal bone, unilateral or bilateral, detailed study by multiple thin slices (including reconstructions) without or with intravenous contrast medium and with or without brain scan (R) (A)	445.00
56018	Computerised tomography—scan of temporal bones with air study (including reconstructions) and including intrathecal injection, not including an associated brain scan (R) (A)	355.00
56021	Computerised tomography—scan of facial bones, sinuses and salivary glands—scan of 1 or more regions without intravenous contrast medium (R) (A)	250.00
56024	Computerised tomography—scan of facial bones, sinuses and salivary glands—scan of 1 or more regions with intravenous contrast medium (R) (A)	265.00
56027	Computerised tomography—scan of facial bones, sinuses and salivary glands—scan of 1 or more regions without and with intravenous contrast medium (R) (A)	375.00

4.4 Items 56100 to 56106 (inclusive):

Omit the items, substitute:

“56100	Computerised tomography—scan of soft tissues of neck including larynx, pharynx and upper oesophagus (not associated with cervical spine)—scan of 1 or more regions without intravenous contrast medium (not covered by item 56900) (R) (A)	355.00
56103	Computerised tomography—scan of soft tissues of neck including larynx, pharynx and upper oesophagus (not associated with cervical spine)—scan of 1 or more regions with intravenous contrast medium (not covered by item 56903) (R) (A)	385.00
56106	Computerised tomography—scan of soft tissues of neck including larynx, pharynx and upper oesophagus (not associated with cervical spine)—scan of 1 or more regions without and with intravenous contrast medium (not covered by item 56906) (R) (A)	420.00”.

4.5 Items 56200 to 56218 (inclusive):

Omit the items, substitute:

“56200	Computerised tomography—scan of spine, 1 or more regions—25 slices or less without intravenous contrast medium (R) (A)	176.00
56203	Computerised tomography—scan of spine, 1 or more regions—25 slices or less with intravenous contrast medium (R) (A)	205.00
56206	Computerised tomography—scan of spine, 1 or more regions—25 slices or less without and with intravenous contrast medium (R) (A)	275.00
56209	Computerised tomography—scan of spine, 1 or more regions—26 or more slices without intravenous contrast medium (R) (A)	250.00
56212	Computerised tomography—scan of spine, 1 or more regions—26 or more slices with intravenous contrast medium (R) (A)	275.00
56215	Computerised tomography—scan of spine, 1 or more regions—26 or more slices without and with intravenous contrast medium (R) (A)	385.00
56218	Computerised tomography—scan of spine, 1 or more regions with intrathecal contrast medium (not including the preparation by intrathecal injection of contrast medium) (R) (A)	250.00”.

4.6 Items 56300 to 56306 (inclusive):

Omit the items, substitute:

“56300	Computerised tomography—scan of chest (including lungs, mediastinum and pleura) without intravenous contrast medium (not covered by item 56700, 56800, 56900, 57000 or 57100) (R) (A)	250.00
56303	Computerised tomography—scan of chest (including lungs, mediastinum and pleura) with intravenous contrast medium (not covered by item 56703, 56803, 56903, 57003 or 57103) (R) (A)	285.00
56306	Computerised tomography—scan of chest (including lungs, mediastinum and pleura) without intravenous contrast medium (minimum of 8 slices) and with intravenous contrast medium (not covered by item 56706, 56806, 56906, 57006 or 57106) (R) (A)	360.00”.

4.7 Items 56400 to 56406 (inclusive):

Omit the items, substitute:

“56400	Computerised tomography—scan of upper abdomen (diaphragm to iliac crest) or pelvis without intravenous contrast medium (not covered by item 56700, 56800, 56900 or 57100) (R) (A)	138.00
56403	Computerised tomography—scan of upper abdomen (diaphragm to iliac crest) or pelvis with intravenous contrast medium (not covered by item 56703, 56803, 56903 or 57103) (R) (A)	168.00
56406	Computerised tomography—scan of upper abdomen (diaphragm to iliac crest) or pelvis without intravenous contrast medium (minimum of 8 slices) and with intravenous contrast medium (not covered by item 56706, 56806, 56906 or 57106) (R) (A)	275.00”.

4.8 Items 56500 to 56506 (inclusive):

Omit the items, substitute:

“56500	Computerised tomography—scan of upper abdomen and pelvis without intravenous contrast medium (not covered by item 56700, 56800, 56900 or 57100) (R) (A)	210.00
56503	Computerised tomography—scan of upper abdomen and pelvis with intravenous contrast medium (not covered by item 56703, 56803, 56903 or 57103) (R) (A)	255.00
56506	Computerised tomography—scan of upper abdomen and pelvis without intravenous contrast medium (minimum of 8 slices) and with intravenous contrast medium (not covered by item 56706, 56806, 56906 or 57106) (R) (A)	360.00”.

4.9 Items 56600 to 56624 (inclusive):

Omit the items, substitute:

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“56600	Computerised tomography—scan of extremities, 1 or more regions involving up to 20 slices without intravenous contrast medium (R) (A)	138.00
56603	Computerised tomography—scan of extremities, 1 or more regions involving up to 20 slices with intravenous contrast medium (R) (A)	168.00
56606	Computerised tomography—scan of extremities, 1 or more regions involving up to 20 slices without and with intravenous contrast medium (R) (A)	205.00
56609	Computerised tomography—scan of extremities, 1 or more regions involving more than 20 slices but not more than 40 slices without intravenous contrast medium (R) (A)	176.00
56612	Computerised tomography—scan of extremities, 1 or more regions involving more than 20 slices but not more than 40 slices with intravenous contrast medium (R) (A)	205.00
56615	Computerised tomography—scan of extremities, 1 or more regions involving more than 20 slices but not more than 40 slices without and with intravenous contrast medium (R) (A)	275.00
56618	Computerised tomography—scan of extremities, 1 or more regions involving more than 40 slices without intravenous contrast medium (R) (A)	250.00
56621	Computerised tomography—scan of extremities, 1 or more regions involving more than 40 slices with intravenous contrast medium (R) (A)	275.00
56624	Computerised tomography—scan of extremities, 1 or more regions involving more than 40 slices without and with intravenous contrast medium (R) (A)	350.00”.

4.10 Items 56700 to 56706 (inclusive):

Omit the items, substitute:

“56700	Computerised tomography—scan of chest and upper abdomen (from lung apices to iliac crest) without intravenous contrast medium (not covered by item 56800, 56900 or 57100) (R) (A)	250.00
56703	Computerised tomography—scan of chest and upper abdomen (from lung apices to iliac crest) with intravenous contrast medium (not covered by item 56803, 56903 or 57103) (R) (A)	290.00
56706	Computerised tomography—scan of chest and upper abdomen (from lung apices to iliac crest) without and with intravenous contrast medium (not covered by item 56806, 56906 or 57106) (R) (A)	365.00”.

4.11 Items 56800 to 56806 (inclusive):

Omit the items, substitute:

“56800	Computerised tomography—scan of chest, abdomen and pelvis without intravenous contrast medium (not covered by item 56900) (R) (A)	325.00
56803	Computerised tomography—scan of chest, abdomen and pelvis with intravenous contrast medium (not covered by item 56903) (R) (A)	365.00
56806	Computerised tomography—scan of chest, abdomen and pelvis without and with intravenous contrast medium (not covered by item 56906) (R) (A)	510.00”.

4.12 Items 56900 to 56906 (inclusive):

Omit the items, substitute:

“56900	Computerised tomography—scan of neck, chest, abdomen and pelvis without intravenous contrast medium (R) (A)	465.00
56903	Computerised tomography—scan of neck, chest, abdomen and pelvis with intravenous contrast medium (R) (A)	510.00
56906	Computerised tomography—scan of neck, chest, abdomen and pelvis without and with intravenous contrast medium (R) (A)	615.00”.

4.13 Items 57000 to 57006 (inclusive):

Omit the items, substitute:

“57000	Computerised tomography—scan of brain and chest without intravenous contrast medium (R) (A)	250.00
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57003	Computerised tomography—scan of brain and chest with intravenous contrast medium (R) (A)	290.00
57006	Computerised tomography—scan of brain and chest without and with intravenous contrast medium (R) (A)	400.00

4.14 Items 57100 to 57106 (inclusive):

Omit the items, substitute:

“57100	Computerised tomography—scan of chest and upper abdomen (from lung apices to iliac crest) and scan of brain without intravenous contrast medium (R) (A)	355.00
57103	Computerised tomography—scan of chest and upper abdomen (from lung apices to iliac crest) and scan of brain with intravenous contrast medium (R) (A)	400.00
57106	Computerised tomography—scan of chest and upper abdomen (from lung apices to iliac crest) and scan of brain without and with intravenous contrast medium (R) (A)	510.00”.

4.15 Item 57200:

Omit the item, substitute:

“57200	Computerised tomography—pelvimetry (R) (A)	138.00”.
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4.16 Items 57300 and 57303:

Omit the items, substitute:

“57300	Computerised tomography—dynamic scan of region not associated with another item in this Group (R) (A)	168.00
57303	Computerised tomography—dynamic scan of region when associated with another item in this Group (R) (A)	Amount under rule 13”.

4.17 Items 57400 to 57406 (inclusive):

Omit the items, substitute:

“57400	Computerised tomography—scan of brain without intravenous contrast medium (R) (A)	70.00
57403	Computerised tomography—scan of brain with intravenous contrast medium (R) (A)	85.00
57406	Computerised tomography—scan of brain without and with intravenous contrast medium (R) (A)	132.00”.

4.18 Items 57500 to 57527 (inclusive):

Omit the items, substitute:

“57501	Digits or phalanges—all or any of 1 hand (R) (CP)	40.00
57504	Digits or phalanges—all or any of 1 hand (R) (OP)	29.00
57507	Digits or phalanges—all or any of 1 hand (R) (NS)	29.00
57510	Digits or phalanges—all or any of 1 hand (NR)	29.00
57513	Digits or phalanges—all or any of 1 foot (R) (CP)	40.00
57516	Digits or phalanges—all or any of 1 foot (R) (OP)	29.00
57519	Digits or phalanges—all or any of 1 foot (R) (NS)	29.00
57522	Digits or phalanges—all or any of 1 foot (NR)	29.00
57525	Hand, wrist, forearm, elbow or humerus (R) (CP)	40.00
57528	Hand, wrist, forearm, elbow or humerus (R) (OP)	29.00
57531	Hand, wrist, forearm, elbow or humerus (R) (NS)	29.00
57534	Hand, wrist, forearm, elbow or humerus (NR)	29.00
57537	Hand, wrist and lower forearm or upper forearm and elbow or elbow and humerus (R) (CP)	54.00
57540	Hand, wrist and lower forearm or upper forearm and elbow or elbow and humerus (R) (OP)	39.00
57543	Hand, wrist and lower forearm or upper forearm and elbow or elbow and humerus (R) (NS)	39.00
57546	Hand, wrist and lower forearm or upper forearm and elbow or elbow and humerus (NR)	39.00
57549	Foot, ankle, lower leg, upper leg, knee or femur (R) (CP)	43.50
57552	Foot, ankle, lower leg, upper leg, knee or femur (R) (OP)	31.50
57555	Foot, ankle, lower leg, upper leg, knee or femur (R) (NS)	31.50
57558	Foot, ankle, lower leg, upper leg, knee or femur (NR)	31.50
57561	Foot, ankle and lower leg or upper leg and knee (R) (CP)	66.00

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57564	Foot, ankle and lower leg or upper leg and knee (R) (OP)	48.00
57567	Foot, ankle and lower leg or upper leg and knee (R) (NS)	48.00
57570	Foot, ankle and lower leg or upper leg and knee (NR)	48.00”.

4.19 Heading of Subgroup 2—Radiographic Examination of Shoulder or Hip Joint and Report:
Omit “Hip Joint”, substitute “Pelvis”.

4.20 Items 57700 to 57721 (inclusive):
Omit the items, substitute:

“57701	Shoulder or scapula or both (R) (CP)	54.00
57704	Shoulder or scapula or both (R) (OP)	39.00
57707	Shoulder or scapula or both (R) (NS)	39.00
57710	Shoulder or scapula or both (NR)	39.00
57713	Clavicle (R) (CP)	43.50
57716	Clavicle (R) (OP)	31.50
57719	Clavicle (R) (NS)	31.50
57722	Clavicle (NR)	31.50
57725	Hip joint (R) (CP)	53.00
57728	Hip joint (R) (OP)	38.50
57731	Hip joint (R) (NS)	38.50
57734	Pelvic girdle (R) (CP)	53.00
57737	Pelvic girdle (R) (OP)	38.50
57740	Pelvic girdle (R) (NS)	38.50
57743	Sacro-iliac joints, not associated with item 58119, 58128, 58137 or 58146 (R) (CP)	61.00
57747	Sacro-iliac joints, not associated with item 58122, 58131, 58140 or 58149 (R) (OP)	44.00

57750	Sacro-iliac joints, not associated with item 58125, 58134, 58143 or 58152 (R) (NS)	44.00
57753	Femur, internal fixation of neck or intertrochanteric (perthrochanteric) fracture (R)	99.00
57756	Pelvimetry by plain X-ray technique (R) (CP)	90.00
57759	Pelvimetry by plain X-ray technique (R) (OP)	65.00
57762	Pelvimetry by plain X-ray technique (R) (NS)	65.00”.

4.21 Items 57900 to 57945 (inclusive):

Omit the items, substitute:

“57901	Skull or cephalometry (R) (CP)	65.00
57904	Skull or cephalometry (R) (OP)	47.00
57907	Skull or cephalometry (R) (NS)	47.00
57910	Sinuses (R) (CP)	47.50
57913	Sinuses (R) (OP)	34.50
57916	Sinuses (R) (NS)	34.50
57919	Mastoids (R) (CP)	65.00
57922	Mastoids (R) (OP)	47.00
57925	Mastoids (R) (NS)	47.00
57928	Petrous temporal bones (R) (CP)	65.00
57931	Petrous temporal bones (R) (OP)	47.00
57934	Petrous temporal bones (R) (NS)	47.00
57937	Facial bones—orbit, maxilla or malar, any or all (R) (CP)	47.50
57940	Facial bones—orbit, maxilla or malar, any or all (R) (OP)	34.50
57943	Facial bones—orbit, maxilla or malar, any or all (R) (NS)	34.50
57946	Mandible, not by orthopantomography technique (R) (CP)	47.50
57949	Mandible, not by orthopantomography technique (R) (OP)	34.50

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57952	Mandible, not by orthopantomography technique (R) (NS)	34.50
57955	Salivary calculus (R) (CP)	47.50
57958	Salivary calculus (R) (OP)	34.50
57961	Salivary calculus (R) (NS)	34.50
57964	Nose (R) (CP)	47.50
57967	Nose (R) (OP)	34.50
57970	Nose (R) (NS)	34.50
57973	Eye, 1 or both with or without foreign body localisation (R) (CP)	47.50
57976	Eye, 1 or both with or without foreign body localisation (R) (OP)	34.50
57979	Eye, 1 or both with or without foreign body localisation (R) (NS)	34.50
57982	Temporo-mandibular joints, 1 or both (R) (CP)	49.50
57985	Temporo-mandibular joints, 1 or both (R) (OP)	36.00
57988	Temporo-mandibular joints, 1 or both (R)(NS)	36.00
57991	Teeth—single area (R)(CP)	33.00
57994	Teeth—single area (R)(OP)	24.00
57997	Teeth—single area (R)(NS)	24.00
58000	Teeth—full mouth, not by orthopantomography technique (R) (CP)	78.00
58003	Teeth—full mouth, not by orthopantomography technique (R) (OP)	57.00
58006	Teeth—full mouth, not by orthopantomography technique (R) (NS)	57.00
58009	Orthopantomography (R)	47.50
58012	Palato-pharyngeal studies with screening by fluoroscopy with image intensification (R) (A)	65.00
58015	Palato-pharyngeal studies with screening by fluoroscopy with image intensification (R) (NS)	47.00

58018	Palato-pharyngeal studies without fluoroscopic screening (R) (CP)	49.50
58021	Palato-pharyngeal studies without fluoroscopic screening (R) (OP)	36.00
58024	Palato-pharyngeal studies without fluoroscopic screening (R) (NS)	36.00
58027	Larynx or pharynx (R) (CP)	43.50
58030	Larynx or pharynx (R) (OP)	31.50
58033	Larynx or pharynx (R) (NS)	31.50”.

4.22 Items 58100 to 58118:

Omit the items, substitute:

“58101	Cervical spine (R) (CP)	74.00
58104	Cervical spine (R) (OP)	54.00
58107	Cervical spine (R) (NS)	54.00
58110	Thoracic spine (R) (CP)	56.00
58113	Thoracic spine (R) (OP)	40.50
58116	Thoracic spine (R) (NS)	40.50
58119	Lumbo-sacral spine (R) (CP)	83.00
58122	Lumbo-sacral spine (R) (OP)	60.00
58125	Lumbo-sacral spine (R) (NS)	60.00
58128	Sacro-coccygeal spine (R) (CP)	46.50
58131	Sacro-coccygeal spine (R) (OP)	33.50
58134	Sacro-coccygeal spine (R) (NS)	33.50
58137	2 regions of the spine (R) (CP)	102.00
58140	2 regions of the spine (R) (OP)	75.00
58143	2 regions of the spine (R) (NS)	75.00
58146	3 or more regions of the spine (R) (CP)	138.00

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58149	3 or more regions of the spine (R) (OP)	100.00
58152	3 or more regions of the spine (R) (NS)	100.00”.

4.23 Heading of Subgroup 5—Bone Age Study and Skeletal Surveys:
Omit “Skeletal Surveys”, substitute “Report”.

4.24 Items 58300 to 58306 (inclusive):
Omit the items, substitute:

“58301	Bone age study (R) (CP)	40.00
58304	Bone age study (R) (OP)	29.00
58307	Bone age study (R) (NS)	29.00

4.25 Items 58500 to 58527 (inclusive):
Omit the items, substitute:

“58501	Chest (R) (CP)	47.50
58504	Chest (R) (OP)	34.50
58507	Chest (R) (NS)	34.50
58510	Chest (NR)	34.50
58513	Thoracic inlet or trachea (R) (CP)	40.00
58516	Thoracic inlet or trachea (R) (OP)	29.00
58519	Thoracic inlet or trachea (R) (NS)	29.00
58522	Sternum or ribs on 1 side (R) (CP)	43.50
58525	Sternum or ribs on 1 side (R) (OP)	31.50
58528	Sternum or ribs on 1 side (R) (NS)	31.50
58531	Sternum and ribs on 1 side, or ribs on both sides (R) (CP)	57.00
58534	Sternum and ribs on 1 side, or ribs on both sides (R) (OP)	41.00
58537	Sternum and ribs on 1 side, or ribs on both sides (R) (NS)	41.00
58540	Sternum and ribs on both sides (R) (CP)	69.00
58543	Sternum and ribs on both sides (R) (OP)	50.00

58546 Sternum and ribs on both sides (R) (NS) 50.00”.

4.26 Items 58700 to 58724 (inclusive):

Omit the items, substitute:

“58701	Intravenous pyelography without tomography, including preliminary plain film (R) (CP)	136.00
58704	Intravenous pyelography without tomography, including preliminary plain film (R) (OP)	99.00
58707	Intravenous pyelography without tomography, including preliminary plain film (R) (NS)	99.00
58710	Intravenous pyelography with tomography, including preliminary plain film (R) (CP)	168.00
58713	Intravenous pyelography with tomography, including preliminary plain film (R) (OP)	122.00
58716	Intravenous pyelography with tomography, including preliminary plain film (R) (NS)	122.00
58719	Antegrade or retrograde pyelography including preliminary plain film, each side (R)	99.00
58722	Cystography, by urethral catheter or percutaneous bladder puncture, not associated with micturating cystourethrography (R)	66.00
58725	Retrograde urethrography (R)	66.00
58728	Micturating cystourethrography, by urethral catheter or percutaneous bladder puncture (R)	78.00”.

4.27 Items 58900 to 58936 (inclusive):

Omit the items, substitute:

“58901	Plain abdomen only (R) (CP)	47.50
58904	Plain abdomen only (R) (OP)	34.50
58907	Plain abdomen only (R) (NS)	34.50
58910	Plain abdomen only (NR)	34.50
58913	Barium or other opaque contrast examination of oesophagus or pharynx (R) (A)	67.00
58916	Barium or other opaque contrast examination of oesophagus or pharynx (R) (NS)	48.50
58919	Barium or other opaque contrast examination of oesophagus, stomach and duodenum, with or without chest fluoroscopy, with or without preliminary plain film (R) (A)	92.00
58922	Barium or other opaque contrast examination of oesophagus, stomach and duodenum, with or without chest fluoroscopy, with or without preliminary plain film (R) (NS)	67.00
58925	Barium or other opaque contrast examination of oesophagus, stomach, duodenum and small intestine to colon, with or without preliminary plain film (R) (A)	110.00
58928	Barium or other opaque contrast examination of oesophagus, stomach, duodenum and small intestine to colon, with or without preliminary plain film (R) (NS)	79.00
58931	Small bowel series (follow through examination of the small bowel) with or without preliminary plain film (R) (A)	78.00
58934	Small bowel series (follow through examination of the small bowel) with or without preliminary plain film (R) (NS)	57.00
58937	Opaque enema, with or without preliminary plain film (R) (A)	112.00
58940	Opaque enema, with or without preliminary plain film (R) (NS)	82.00
58943	Opaque enema, with air contrast, with or without preliminary plain film (R) (A)	130.00
58946	Opaque enema, with air contrast, with or without preliminary plain film (R) (NS)	94.00

58949	Oral cholecystogram, with or without preliminary plain film, without tomography (R) (A)	78.00
58952	Oral cholecystogram, with or without preliminary plain film, without tomography (R) (NS)	57.00
58955	Oral cholecystogram, with or without preliminary plain film, with tomography (R) (A)	110.00
58958	Oral cholecystogram, with or without preliminary plain film, with tomography (R) (NS)	79.00
58961	Cholegraphy, direct, endoscopic, operative or post-operative (R) (A)	76.00
58964	Cholegraphy, direct, endoscopic, operative or post-operative (R) (NS)	55.00
58967	Cholegraphy—percutaneous transhepatic (R) (A)	90.00
58970	Cholegraphy—percutaneous transhepatic (R) (NS)	65.00
58973	Cholegraphy—drip infusion or intravenous (R) (A)	148.00
58976	Cholegraphy—drip infusion or intravenous (R) (NS)	108.00”.

4.28 Heading of Subgroup 9—Radiographic Examination for Localisation of Foreign Bodies and Report:

Omit the heading.

4.29 Items 59100 and 59103:

Omit the items.

4.30 Heading of Subgroup 10—Radiographic Examination of Breasts and Report:

Omit “10”, substitute “9”.

4.31 Items 59300 to 59309:

Omit the items, substitute:

“59300	Radiographic examination of both breasts, if the patient has a clinical sign or symptom of breast disease or if an asymptomatic patient has a family history of breast cancer (R) (S) (A)	78.00
59303	Radiographic examination of 1 breast, if the patient has a clinical sign or symptom of breast disease or if an asymptomatic patient has a family history of breast cancer (R) (S) (A)	47.50

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59306	Mammary ductogram, 1 side (R) (A)	91.00
59309	Mammary ductogram, both sides (R) (A)	182.00
59312	Radiographic examination of an operative breast specimen, using dedicated mammographic or specimen equipment (R) (A)	47.50”.

4.32 Heading Subgroup 11—Radiographic Examination in Connection with Pregnancy and Report:
Omit the heading.

4.33 Items 59500 to 59506:
Omit the items.

4.34 Heading subgroup 12—Radiographic Examination with Opaque or Contrast Media and Report
Omit the heading, substitute:
“Subgroup 10—Radiographic Examination with Contrast Media and Report”.

4.35 Items 59700 to 59757 (inclusive):
Omit the items, substitute:

“59700	Discography—each disc (R)	69.00
59703	Dacryocystography—each side (R)	47.50
59712	Hysterosalpingography (R)	67.00
59724	Myelography, 1 region (R)	120.00
59727	Myelography, 2 regions (R)	198.00
59730	Myelography, 3 regions (R)	270.00
59733	Sialography—1 gland (R) (A)	67.00
59735	Sialography—1 gland (R)(NS)	48.50

59739	Sinuses and fistulae (R) (A)	21.50
59741	Sinuses and fistulae (R)(NS)	15.80
59751	Arthrography—1 joint (R) (A)	67.00
59753	Arthrography—1 joint (R)(NS)	49.00
59754	Lymphangiography, including initial and delayed radiography (R)	66.00

Subgroup 11—Tomography and Report

“59800	Tomography of any part, not including preliminary plain films and not associated with intravenous pyelography or oral cholecystogram (R)(CP)(A)	61.00
59803	Tomography of any part, not including preliminary plain films and not associated with intravenous pyelography or oral cholecystogram (R)(OP)(A)	44.00
59806	Tomography of any part, not including preliminary plain films and not associated with intravenous pyelography or oral cholecystogram (R)(NS)	44.00”.

4.36 Heading of Subgroup 13—Angiography and Report:

Omit the heading, substitute:

“Subgroup 12—Angiography by Film Technique and Report”.

4.37 Items 59900 to 59924:

Omit the items, substitute:

“59903	Serial angiocardiology—each series (R) (A) (AU 8)	116.00
59912	Selective coronary arteriography (R)	305.00
59915	Cerebral angiography—1 side (R)	78.00
59921	Aortography (R)	99.00
59923	Peripheral arteriography, 1 side (R)	99.00
59924	Selective arteriography or selective venography, each injection and film run (R)	99.00
59927	Venography, 1 side (R)	99.00”.

4.38 Heading of Subgroup 14—Tomography and Report:

Omit the heading.

4.39 Item 60100:

Omit the item.

4.40 Heading of Subgroup 15—Stereoscopic Examination and Report:

Omit the heading, substitute:

“Subgroup 13—Angiography by Digital Subtraction Technique (DSA) and Report (including Preparation for Non-Selective Contrast Injection)”.

4.41 Item 60300:

Omit the item, substitute:

“60200	Digital subtraction angiography examination of head and neck with or without arch aortography, 1 to 3 data acquisition runs (R)	490.00
60203	Digital subtraction angiography examination of head and neck with or without arch aortography, 4 to 6 data acquisition runs (R)	720.00
60206	Digital subtraction angiography examination of head and neck with or without arch aortography, 7 to 9 data acquisition runs (R)	1,025.00
60209	Digital subtraction angiography examination of head and neck with or without arch aortography, 10 or more data acquisition runs (R)	1,200.00
60212	Digital subtraction angiography examination of thorax, 1 to 3 data acquisition runs (R)	490.00
60215	Digital subtraction angiography examination of thorax, 4 to 6 data acquisition runs (R)	720.00
60218	Digital subtraction angiography examination of thorax, 7 to 9 data acquisition runs (R)	1,025.00
60221	Digital subtraction angiography examination of thorax, 10 or more data acquisition runs (R)	1,200.00
60224	Digital subtraction angiography examination of abdomen, 1 to 3 data acquisition runs (R)	490.00
60227	Digital subtraction angiography examination of abdomen, 4 to 6 data acquisition runs (R)	720.00
60230	Digital subtraction angiography examination of abdomen, 7 to 9 data acquisition runs (R)	1,025.00
60233	Digital subtraction angiography examination of abdomen, 10 or more data acquisition runs (R)	1,200.00

60236	Digital subtraction angiography examination of upper limb or limbs, 1 to 3 data acquisition runs (R)	490.00
60239	Digital subtraction angiography examination of upper limb or limbs, 4 to 6 data acquisition runs (R)	720.00
60242	Digital subtraction angiography examination of upper limb or limbs, 7 to 9 data acquisition runs (R)	1,025.00
60245	Digital subtraction angiography examination of upper limb or limbs, 10 or more data acquisition runs (R)	1,200.00
60248	Digital subtraction angiography examination of lower limb or limbs, 1 to 3 data acquisition runs (R)	490.00
60251	Digital subtraction angiography examination of lower limb or limbs, 4 to 6 data acquisition runs (R)	720.00
60254	Digital subtraction angiography examination of lower limb or limbs, 7 to 9 data acquisition runs (R)	1,025.00
60257	Digital subtraction angiography examination of lower limb or limbs, 10 or more data acquisition runs (R)	1,200.00
60260	Digital subtraction angiography examination of aorta and lower limb or limbs, 1 to 3 data acquisition runs (R)	490.00
60263	Digital subtraction angiography examination of aorta and lower limb or limbs, 4 to 6 data acquisition runs (R)	720.00
60266	Digital subtraction angiography examination of aorta and lower limb or limbs, 7 to 9 data acquisition runs (R)	1,025.00
60269	Digital subtraction angiography examination of aorta and lower limb, or limbs, 10 or more data acquisition runs	1,200.00
60272	Selective arteriography or selective venography by digital subtraction angiography technique, 1 vessel (NR) (AU 6)	42.00
60275	Selective arteriography or selective venography by digital subtraction angiography technique, 2 vessels (NR) (AU 6)	84.00
60278	Selective arteriography or selective venography by digital subtraction angiography technique, 3 or more vessels (NR) (AU 6)	126.00".

4.42 Heading of Subgroup 16—Fluoroscopic Examination and Report:
Omit the heading, substitute:

“Subgroup 14—Fluoroscopic Examination with Image Intensification and Report”.

4.43 Items 60500 and 60503:

Omit the items, substitute:

“60500	Fluoroscopy, with general anaesthesia (R) (A) (AU 7)	43.50
60502	Fluoroscopy, with general anaesthesia (R) (NS) (AU 7)	31.50
60503	Fluoroscopy, without general anaesthesia (R) (A)	30.00
60506	Fluoroscopy, without general anaesthesia (R) (NS)	21.50
60509	Fluoroscopy, using a mobile image intensifier, for a surgical procedure lasting less than 1 hour (R)	64.00
60512	Fluoroscopy, using a mobile image intensifier, for a surgical procedure lasting more than 1 hour (R)	99.00”.

4.44 Heading of Subgroup 17—Examination not Otherwise Covered and Report

Omit “17”, substitute “15”.

4.45 Item 60700:

Omit the item, substitute:

“60700	Radiographic examination of any part and report not covered by another item in this Group (R)	5.00
60703	Radiographic examination of any part and report not covered by another item in this Group (NR)	5.00”.

4.46 Heading Subgroup 18—Preparation for Radiological Procedure
Omit “18”, substitute “16”.

4.47 Items 60900 to 60981 (inclusive):
Omit the items, substitute:

“60903	Cerebral angiography by film technique, each side (NR)	124.00
60908	Peripheral arteriography or venography by film technique, each side (NR) (AU 6)	51.00
60911	Selective arteriography or selective venography by film technique, 1 vessel (NR) (AU 6)	42.00
60923	Aortography by film technique (NR) (AU 8)	69.00
60926	Dacryocystography—1 side (NR)	38.50
60930	Percutaneous injection of opaque contrast into renal cyst (including aspiration) or renal pelvis for antegrade pyelography (NR)	59.00
60932	Cholegraphy (NR)	35.50
60936	Arthrography excluding arthrography of the vertebral apophyseal and costovertebral joints, each joint (NR)	47.00
60942	Retrograde or percutaneous micturating cystourethrography or cystography or urethrography (NR)	66.00
60945	Hysterosalpingography (NR) (AU 6)	59.00
60948	Discography—1 disc (NR) (AU 5)	38.50
60957	Myelography (NR) (AU 11)	132.00
60963	Cisternal puncture (NR)	76.00
60966	Sinus or fistula (NR)	20.00
60969	Sialography, each gland (NR)	53.00
60972	Lymphangiography—each side (NR)	116.00
60981	Percutaneous transhepatic cholangiogram (NR) (AU 11)	116.00
60984	Mammary ductogram—1 side (NR)	20.00”.

4.48 Heading of Group I4—Magnetic resonance imaging:

Omit the heading.

4.49 Item 61200:

Omit the item.

NOTES

1. Notified in the *Commonwealth of Australia Gazette* on 14 April 1992.
2. Statutory Rules 1991 No. 352.