



# Clarifying MBS Items that are Hospital Only Services

Date of change: 1 March 2025

List of Amended items removing the 85% benefit

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## Context for revised benefits

- Under the Medicare Benefits Schedule (MBS), the government subsidises an eligible medical service based on whether the service is provided as part of an episode of hospital treatment or not. Professional services rendered as part of hospital treatment provided in a hospital/hospital equivalent setting attract a 75% benefit, while 85% benefit applies to all other services except for attendances by general practitioners including services provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner on behalf of a general practitioner.
- A number of MBS items for specialist procedural services that should only be provided in a hospital setting and billed at 75% of the schedule fee are still able to be claimed at the 85% benefit, for out of hospital services.
- Billing data shows that these hospital services are being incorrectly billed at the 85% benefit.
- For the majority of the targeted items, the application of an 85% benefit is an artefact of when 75% benefits for hospital services were introduced to the schedule. The 85% benefit was simply not removed for in-hospital services.
- Earlier this year, the Department of Health and Aged Care (the Department) conducted a review of the relevant sections of the MBS and identified 965 services where best clinical practice suggests should only be conducted in a hospital or hospital substitute environment.
- The Department consulted with 55 clinical peak bodies and specialist colleges to seek their expert advice on whether the items should only be conducted in a hospital or equivalent setting. The Department also wrote to each state or territory health department to advise of the consultation being undertaken.
- Outcomes of the consultation resulted in a list of 833 MBS items that will have the 85% benefit removed. Removal of the 85% benefit for these items was announced in the 2024-25 Budget and will take effect on 1 March 2025.
- These changes will ensure the MBS items reflect the settings in which they should be provided and will reduce incorrect billing of out-of-hospital services. It will also reduce incorrect/non-eligible Extended Medicare Safety Net payments. This will free up funds to be allocated to benefits for other eligible MBS medical services.

## Patient impacts

- For privately funded services, the intent of the legislative framework, as set out in the Health Insurance Act 1973 and the Private Health Insurance Act 2007 is for the Government to pay 75% of the MBS fee for any 'hospital treatment' (as defined in the PHI Act) and for the patient's private health insurance, if the patient has insurance and the insurance covers the medical service, to pay at least the remaining 25% of the MBS fee. If the patient does not have private health insurance, or the patient's private health insurance does not cover that service, then the patient themselves can be expected to cover the gap, if the provider chooses to charge more than the 75%.
- Correcting the 85% benefit artefact will reduce the financial incentive for public hospitals to cost-shift and double claim for public services on the MBS. This will also free up funds to be allocated to benefits for other MBS eligible medical services.
- For patients who self-fund private medical care, there will be a reduction in the benefit for the items in scope from 85% to 75%. This means that patients who self-fund MBS eligible medical services, may incur a minimum of a 10% of out-of-pocket fee.

## Restrictions

- The targeted items will have the 85% benefit removed ((H) applied to item descriptor).
- A service with the (H) in the descriptor means the service can only be claimed for a procedure performed in a declared hospital or on behalf of a hospital (e.g. hospital substitute treatment). For example, Interventional services (e.g. surgeries, interventional diagnostic services such as colonoscopies) done at hospitals are generally hospital treatment so attract 75% benefits. This includes services provided to admitted patients, or patients in the outpatient (or in a 'day-hospital') setting.

## List of Amended items

### Category 2 - Diagnostic Procedures and Investigations

#### Group D1 - Miscellaneous Diagnostic Procedures and Investigations

##### Subgroup 5 – Vascular

**11627** - Pulmonary artery pressure monitoring during open heart surgery, in a patient under 12 years of age

##### Subgroup 7 – Gastroenterology & Colorectal

**11801** - Clinical assessment of gastro-oesophageal reflux disease that involves 48-hour catheter-free wireless ambulatory

oesophageal pH monitoring, including administration of the device and associated endoscopy procedure for placement, analysis and interpretation of the data and all attendances for providing the service, if:

- (a) a catheter-based ambulatory oesophageal pH monitoring:
  - (i) has been attempted on the patient but failed due to clinical complications; or
  - (ii) is not clinically appropriate for the patient due to anatomical reasons (nasopharyngeal anatomy) preventing the use of catheter-based pH monitoring; and
- (b) the service is performed by a specialist or consultant physician with endoscopic training that is recognised by the Conjoint Committee for the Recognition of Training in Gastrointestinal Endoscopy (Anaes.)

## Category 3 - Therapeutic Procedures

### Group T1 - Miscellaneous Therapeutic Procedures

#### Subgroup 1 - Hyperbaric Oxygen Therapy

**13030** - Hyperbaric oxygen therapy performed in a comprehensive hyperbaric medicine facility, if the medical practitioner is pressurised in the hyperbaric chamber for the purpose of providing continuous life-saving emergency treatment, including any associated attendance—per hour (or part of an hour).

#### Subgroup 2 – Dialysis

**13100** - Supervision in hospital by a medical specialist of—haemodialysis, haemofiltration, haemoperfusion or peritoneal dialysis, including all professional attendances, if the total attendance time on the patient by the supervising medical specialist exceeds 45 minutes in one day.

**13103** - Supervision in hospital by a medical specialist of—haemodialysis, haemofiltration, haemoperfusion or peritoneal dialysis, including all professional attendances, if the total attendance time on the patient by the supervising medical specialist does not exceed 45 minutes in one day.

### Subgroup 3 – Assisted reproductive services

**13212** - Oocyte retrieval for the purpose of assisted reproductive technologies—only if rendered in connection with a service to which item 13200 or 13201 applies (Anaes.)

### Subgroup 4 – Paediatric and neonatal

**13300** - Umbilical or scalp vein catheterisation in a neonate with or without infusion or cannulation of a vein.

**13303** - Umbilical artery catheterisation with or without infusion.

**13306** - Blood transfusion with venesection and complete replacement of blood, including collection from donor.

**13309** - Blood transfusion with venesection and complete replacement of blood, using blood already collected.

**13318** - Central vein catheterisation by open exposure, in a patient under 12 years of age (Anaes.).

**13319** - Central vein catheterisation in a neonate via peripheral vein (Anaes.).

### Subgroup 6 – Gastroenterology

**13506** - Gastro-oesophageal balloon intubation for control of bleeding from gastric oesophageal varices.

### Subgroup 8 – Haematology

**13700** - Harvesting of homologous (including allogeneic) or autologous bone marrow for the purpose of transplantation (Anaes.).

**13703** - Transfusion of blood including collection from donor, when used for intra-operative normovolaemic haemodilution, other than a service associated with a service to which item 22052 applies.

**13706** - Transfusion of blood or bone marrow already collected.

**13750** - Therapeutic haemapheresis for the removal of plasma or cellular (or both) elements of blood, utilising continuous or intermittent flow techniques, including morphological tests for cell counts and viability studies, if performed; continuous monitoring of vital signs, fluid balance, blood volume and other parameters with continuous registered nurse attendance under the supervision of a consultant physician, other than a service associated with a service to which item 13755 applies—each day.

**13755** - Donor haemapheresis for the collection of blood products for transfusion, utilising continuous or intermittent flow techniques, including morphological tests for cell counts and viability studies; continuous monitoring of vital signs, fluid balance, blood volume and other parameters; with continuous registered nurse attendance under the supervision of a consultant physician—other than a service associated with a service to which item 13750 applies—each day.

**13761** - Extracorporeal photopheresis for the treatment of chronic graft-versus-host disease, if:

- (a) the person is:
  - (i) has received allogeneic haematopoietic stem cell transplantation; and
  - (ii) has been diagnosed with chronic graft versus host disease following the transplantation; and
  - (iii) steroid treatment is clinically unsuitable as the disease is steroid refractory or the person is steroid-dependent or steroid-intolerant; and
- (b) the person has not previously received extracorporeal photopheresis treatment; and
- (c) the service is delivered using an integrated, closed extracorporeal photopheresis system; and
- (d) the service is provided in combination with the use of methoxsalen that is listed on the Pharmaceutical Benefits Scheme; and
- (e) the service is provided by, or on behalf of, a specialist or consultant physician who:
  - (i) is practising in the speciality of haematology or oncology; and

- (ii) has experience with allogeneic bone marrow transplantation.

Applicable once per treatment session

**13762** - Extracorporeal photopheresis for the treatment of chronic graft-versus-host disease, if:

- (a) the person is:
  - (i) has received allogeneic haematopoietic stem cell transplantation; and
  - (ii) has been diagnosed with chronic graft versus host disease following the transplantation; and
  - (iii) steroid treatment is clinically unsuitable as the disease is steroid refractory or the person is steroid-dependent or steroid-intolerant; and
- (b) the person has previously received an extracorporeal photopheresis treatment cycle and had a partial or complete response in at least one organ in response to treatment; and
- (c) the person requires further extracorporeal photopheresis; and
- (d) the service is delivered using an integrated, closed extracorporeal photopheresis system; and
- (e) the service is provided in combination with the use of methoxsalen that is listed on the Pharmaceutical Benefits Scheme; and
- (f) the service is provided by, or on behalf of, a specialist or consultant physician who:
  - (i) is practising in the speciality of haematology or oncology; and
  - (ii) has experience with allogeneic bone marrow transplantation.

Applicable once per treatment session

## **Subgroup 9 – Procedures associated with intensive care and cardiopulmonary support**

**13815** - Central vein catheterisation, including under ultrasound guidance where clinically appropriate, by percutaneous or open exposure, other than a service to which item 13318 applies (Anaes.).

**13818** - Right heart balloon catheter, insertion of, including pulmonary wedge pressure and cardiac output measurement (Anaes.).

**13830** - Intracranial pressure, monitoring of, by intraventricular or subdural catheter, subarachnoid bolt or similar, by a specialist or consultant physician—each day.

**13832** - Peripheral cannulation, including under ultrasound guidance where clinically appropriate, for veno-arterial cardiopulmonary extracorporeal life support.

**13834** - Veno-arterial cardiopulmonary extracorporeal life support, management of—the first day.

**13835** - Veno-arterial cardiopulmonary extracorporeal life support, management of—each day after the first.

**13837** - Veno-venous pulmonary extracorporeal life support, management of—the first day.

**13838** - Veno-venous pulmonary extracorporeal life support, management of—each day after the first.

**13840** - Peripheral cannulation, including under ultrasound guidance where clinically appropriate, for veno-venous pulmonary extracorporeal life support.

**13848** - Counterpulsation by intra-aortic balloon-management, including associated consultations and monitoring of parameters by means of full haemodynamic assessment and management on several occasions on a day—each day.

**13851** - Ventricular assist device, management of, for a patient admitted to an intensive care unit for implantation of the device or for complications arising from implantation or management of the device—first day.

**13854** - Ventricular assist device, management of, for a patient admitted to an intensive care unit, including management of complications arising from implantation or management of the device—each day after the first day.

### **Subgroup 13 – Miscellaneous therapeutic procedures**

**14212** - Intussusception, management of fluid or gas reduction for (Anaes.).

**14224** - Electroconvulsive therapy, with or without the use of stimulus dosing techniques, including any electroencephalographic monitoring and associated consultation (Anaes.).

**14247** - Extracorporeal photopheresis for the treatment of erythrodermic stage III-IVa T4 M0 cutaneous T-cell lymphoma; if

- a. the service is provided in the initial six months of treatment; and
- b. the service is delivered using an integrated, closed extracorporeal photopheresis system; and
- c. the patient is 18 years old or over; and
- d. the patient has received prior systemic treatment for this condition and experienced either disease progression or unacceptable toxicity while on this treatment; and
- e. the service is provided in combination with the use of Pharmaceutical Benefits Scheme-subsidised methoxsalen; and
- f. the service is supervised by a specialist or consultant physician in the speciality of haematology.

Applicable once per treatment cycle

**14249** - Extracorporeal photopheresis for the continuing treatment of erythrodermic stage III-IVa T4 M0 cutaneous T-cell lymphoma; if

- a. in the preceding 6 months:
  - (i) a service to which item 14247 applies has been provided; and
  - (ii) the patient has demonstrated a response to this service; and
  - (iii) the patient requires further treatment; and



- b. the service is delivered using an integrated, closed extracorporeal photopheresis system; and
- c. the patient is 18 years old or over; and
- d. the service is provided in combination with the use of Pharmaceutical Benefits Scheme-subsidised methoxsalen; and
- e. the service is supervised by a specialist or consultant physician in the speciality of haematology.

Applicable once per treatment cycle

## Group T4 – Obstetrics

### Subgroup - Obstetrics

**16520** - Caesarean section and post-operative care for 7 days, if the patient's care has been transferred by another medical practitioner for management of the confinement and the attending medical practitioner has not provided any of the antenatal care (Anaes.).

**16528** - Caesarean section and post-operative care for 7 days, if the patient's care has been transferred by a participating midwife for management of the birth (Anaes.)

Applicable once for a pregnancy.

**16564** - Evacuation of retained products of conception (placenta, membranes or mole) as a complication of confinement, with or without curettage of the uterus, as an independent procedure (Anaes.).

**16573** - Third degree tear, involving anal sphincter muscles and rectal mucosa, repair of, as an independent procedure (Anaes.).

**16621** - Amnioinfusion, for diagnostic or therapeutic purposes in the presence of severe oligohydramnios.

**16624** - Fetal fluid filled cavity, drainage of.

**16627** - Feto-amniotic shunt, insertion of, into fetal fluid filled cavity, including neuromuscular blockade and amniocentesis.

## Group T7 - Regional or field nerve blocks

### Subgroup - Regional or field nerve blocks

**18216** - Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, including up to 1 hour of continuous attendance by the medical practitioner (Anaes.).

**18219** - Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, if continuous attendance by the medical practitioner extends beyond the first hour (Anaes.).

**18226** - Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, including up to 1 hour of continuous attendance by the medical practitioner—for a patient in labour, if the service is provided between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday.

**18227** - Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, if continuous attendance by a medical practitioner extends beyond the first hour—for a patient in labour, if the service is provided between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday.

**18282** - Carotid sinus, injection of an anaesthetic agent, as an independent percutaneous procedure.

**18284** - Cervical or thoracic sympathetic chain, injection of an anaesthetic agent (Anaes.).

**18286** - Lumbar or pelvic sympathetic chain, injection of an anaesthetic agent (Anaes.).

**18288** - Coeliac plexus or splanchnic nerves, injection of an anaesthetic agent, not in association with a service to which an item in Group T8 applies, unless the nerve block is performed using a targeted percutaneous approach (Anaes.).

**18294** - Coeliac plexus or splanchnic nerves, destruction by a neurolytic agent under image guidance (Anaes.).

**18296** - Lumbar or pelvic sympathetic chain, destruction by a neurolytic agent under image guidance (Anaes.).

## Group T8 – Surgical Operations

### Subgroup 1 - General

**30024** - Wound of soft tissue, debridement of an extensively infected post-surgical incision or Fournier's gangrene, under general anaesthesia, or regional or field nerve block, including suturing of the wound if carried out (Anaes.) (Assist.).

**30058** - Post-operative haemorrhage, control of, under general anaesthesia, as an independent procedure (Anaes.).

**30183** - Axillary hyperhidrosis, total excision of sweat gland bearing area (Anaes.).

**30229** - Muscle, excision of (extensive) (Anaes.) (Assist.).

**30235** - Muscle, ruptured, repair of (extensive), not associated with external wound (Anaes.) (Assist.).

**30259** - Sublingual gland, extirpation of (Anaes.).

**30269** - Salivary gland, repair of cutaneous fistula of (Anaes.).

**30272** - Tongue, partial excision of (Anaes.) (Assist.).

**30281** - Tongue tie, mandibular frenulum or maxillary frenulum, repair of, in a person aged 2 years and over, under general anaesthesia, other than a service associated with a service to which item 45009 applies (Anaes.).

**30286** - Branchial cyst, removal of, on a patient 10 years of age or over (Anaes.) (Assist.).

**30287** - Branchial cyst, removal of, on a patient under 10 years of age (Anaes.) (Assist.).

**30293** - Cervical oesophagostomy, or closure of cervical oesophagostomy with or without plastic repair (Anaes.) (Assist.).

**30412** - Liver biopsy by core needle, when performed in conjunction with another intra-abdominal procedure (Anaes.).

**30419** - Liver tumour, other than a hepatocellular carcinoma, destruction of one or more, by local ablation, other than a service associated with a service to which item 50950 or 50952 applies (Anaes.) (Assist.).

**30428** - Liver, lobectomy of, for trauma (Anaes.) (Assist.).

**30430** - Liver, extended lobectomy of, or central resections of segments 4, 5 and 8, for trauma (Anaes.) (Assist.).

**30431** - Liver abscess, single, open or minimally invasive abdominal drainage of, excluding aftercare (Anaes.) (Assist.).

**30440** - Cholangiogram, percutaneous transhepatic, and insertion of biliary drainage tube, using interventional imaging techniques, other than a service associated with a service to which item 30451 applies (Anaes.) (Assist.).

**30450** - Calculus of biliary tract, extraction of, using interventional imaging techniques (Anaes.) (Assist.).

**30457** - Choledochotomy, intrahepatic, involving removal of intrahepatic bile duct calculi (Anaes.) (Assist.).

**30469** - Biliary stricture, repair of, after one or more operations on the biliary tree (Anaes.) (Assist.).

**30475** - Endoscopic dilatation of stricture of upper gastrointestinal tract (including the use of imaging intensification if clinically indicated) (Anaes.).

**30478** - Oesophagoscopy (other than a service associated with a service to which item 41822 or 41825 applies), gastroscopy, duodenoscopy, panendoscopy or push enteroscopy, one or more such procedures, if:

(a) the procedures are performed using one or more of the following endoscopic procedures:

- (i) polypectomy;
- (ii) sclerosing or adrenalin injections;
- (iii) banding;
- (iv) endoscopic clips;
- (v) haemostatic powders;
- (vi) diathermy;
- (vii) argon plasma coagulation; and

(b) the procedures are for the treatment of one or more of the following:

- (i) upper gastrointestinal tract bleeding;
- (ii) polyps;
- (iii) removal of foreign body;
- (iv) oesophageal or gastric varices;
- (v) peptic ulcers;
- (vi) neoplasia;
- (vii) benign vascular lesions;

- (viii) strictures of the gastrointestinal tract;
- (ix) tumorous overgrowth through or over oesophageal stents;

other than a service associated with a service to which item 30473 or 30479 applies (Anaes.)

**30481** - Percutaneous gastrostomy (initial procedure):

- (a) including any associated imaging services; and
- (b) excluding the insertion of a device for the purpose of facilitating weight loss

(Anaes.)

**30484** - Endoscopic retrograde cholangiopancreatography, other than a service to which item 30664 or 30665 applies (Anaes.).

**30485** - Endoscopic sphincterotomy with or without extraction of stones from common bile duct (Anaes.).

**30488** - Small bowel intubation—as an independent procedure (Anaes.)

**30490** - Oesophageal prosthesis, insertion of, including endoscopy and dilatation (Anaes.)

**30491** - Bile duct, endoscopic stenting of (including endoscopy and dilatation) (Anaes.)

**30559** - Oesophagus, local excision for tumour of (Anaes.) (Assist.).

**30563** - Colostomy or ileostomy, refashioning of, on a patient 10 years of age or over (Anaes.) (Assist.).

**30593** - Pancreatectomy, near total or total (including duodenum), with or without splenectomy (Anaes.) (Assist.).

**30618** - Lymph nodes of neck, selective dissection of one or 2 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck, on a patient under 10 years of age (Anaes.) (Assist.).

**30631** - Hydrocele, removal of, other than a service associated with a service to which item 30641, 30642 or 30644 applies (Anaes.).

**30639** - Colostomy or ileostomy, refashioning of, on a patient under 10 years of age (Anaes.) (Assist.).

**30649** - Haemorrhage, arrest of, following circumcision requiring general anaesthesia, on a patient under 10 years of age (Anaes.).

**30663** - Haemorrhage, arrest of, following circumcision requiring general anaesthesia, on a patient 10 years of age or over (Anaes.).

**30666** - Paraphimosis or phimosis, reduction of, under general anaesthesia, with or without dorsal incision, other than a service associated with a service to which another item in this Group applies (Anaes.).

**30676** - Pilonidal sinus or cyst, or sacral sinus or cyst, definitive excision of (Anaes.).

**30679** - Pilonidal sinus, injection of sclerosant fluid under anaesthesia (Anaes.).

**30680** - Balloon enteroscopy, examination of the small bowel (oral approach), with or without biopsy, without intraprocedural therapy, for diagnosis of patients with obscure gastrointestinal bleeding if the patient:

- (a) has recurrent or persistent bleeding; and
- (b) is anaemic or has active bleeding; and
- (c) has had an upper gastrointestinal endoscopy and a colonoscopy performed that did not identify the cause of the bleeding;

not in association with another item in this Subgroup (other than item 30682 or 30686) (Anaes.)

**30682** - Balloon enteroscopy, examination of the small bowel (anal approach), with or without biopsy, without intraprocedural therapy, for diagnosis of patients with obscure gastrointestinal bleeding if the patient:

- (a) has recurrent or persistent bleeding; and
- (b) is anaemic or has active bleeding; and
- (c) has had an upper gastrointestinal endoscopy and a colonoscopy performed that did not identify the cause of the bleeding;

not in association with another item in this Subgroup (other than item 30680 or 30684) (Anaes.)

**30684** - Balloon enteroscopy, examination of the small bowel (oral approach), with or without biopsy, with one or more of the following procedures—snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation, for diagnosis and management of patients with obscure gastrointestinal bleeding if the patient:

- (a) has recurrent or persistent bleeding; and
- (b) is anaemic or has active bleeding; and
- (c) has had an upper gastrointestinal endoscopy and a colonoscopy performed that did not identify the cause of the bleeding;

not in association with another item in this Subgroup (other than item 30682 or 30686) (Anaes.).

**30686** - Balloon enteroscopy, examination of the small bowel (anal approach), with or without biopsy, with one or more of the following procedures—snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation, for diagnosis and management of patients with obscure gastrointestinal bleeding if the patient:

- (a) has recurrent or persistent bleeding; and
- (b) is anaemic or has active bleeding; and



(c) has had an upper gastrointestinal endoscopy and a colonoscopy performed that did not identify the cause of the bleeding;

not in association with another item in this Subgroup (other than item 30680 or 30684) (Anaes.)

**30687** - Endoscopy with radiofrequency ablation of mucosal metaplasia for the treatment of Barrett's Oesophagus in a single course of treatment, following diagnosis of high grade dysplasia confirmed by histological examination (Anaes.).

**30688** - Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, for the staging of one or more of oesophageal, gastric or pancreatic cancer, not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis (Anaes.).

**30690** - Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, with fine needle aspiration (including aspiration of the locoregional lymph nodes if performed, for the staging of one or more of oesophageal, gastric or pancreatic cancer), not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis (Anaes.).

**30692** - Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, for the diagnosis of one or more of pancreatic, biliary or gastric submucosal tumours, not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis (Anaes.).

**30694** - Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, with fine needle aspiration for the diagnosis of one or more of pancreatic, biliary or gastric submucosal tumours, not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis (Anaes.).

**31245** - Skin and subcutaneous tissue, extensive excision of, in the treatment of suppurative hidradenitis (excision from axilla, groin or natal cleft) or sycosis barbae or nuchae (excision from face or neck) (Anaes.).

**31400** - Malignant upper aerodigestive tract tumour (other than tumour of the lip), excision of, if:

(a) the tumour is not more than 20 mm in diameter; and

(b) histological confirmation of malignancy is obtained

(Anaes.) (Assist.)

**31406** - Malignant upper aerodigestive tract tumour more than 40 mm in diameter (excluding tumour of the lip), excision of, if histological confirmation of malignancy has been obtained (Anaes.) (Assist.)

**31423** - Lymph nodes of neck, selective dissection of one or 2 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck, on a patient 10 years of age or over, other than a service associated with a service to which item 30256 or 30275 applies on the same side (Anaes.) (Assist.).

**31500** - Breast, benign lesion up to and including 50 mm in diameter, including simple cyst, fibroadenoma or fibrocystic disease, open surgical biopsy or excision of, with or without frozen section histology (Anaes.).

**31503** - Breast, benign lesion more than 50 mm in diameter, excision of (Anaes.) (Assist.).

**31509** - Breast, malignant tumour, open surgical biopsy of, with or without frozen section histology (Anaes.).

**31557** - Breast central ducts, excision of, for benign condition (Anaes.) (Assist.).

## Subgroup 2 - Colorectal

**32075** - Sigmoidoscopic examination (with rigid sigmoidoscope), under general anaesthesia, with or without biopsy, other than a service associated with a service to which another item in this Group applies (Anaes.).

**32084** - Sigmoidoscopy or colonoscopy up to the hepatic flexure, with or without biopsy, other than a service associated with a service to which any of items 32222 to 32228 applies (Anaes.).

**32087** - Endoscopic examination of the colon up to the hepatic flexure by sigmoidoscopy or colonoscopy for the removal of one or more polyps, other than a service associated with a service to which any of items 32222 to 32228 applies (Anaes.).

**32095** - Endoscopic examination of small bowel with flexible endoscope passed by stoma, with or without biopsies (Anaes.).

**32105** - Anorectal carcinoma—per anal full thickness excision of (Anaes.) (Assist.).

**32106** - Anterolateral intraperitoneal rectal tumour, per anal excision of, using rectoscopy digital viewing system and pneumorectum, if:

(a) clinically appropriate; and

(b) removal requires dissection within the peritoneal cavity;

excluding use of a colonoscope as the operating platform and not being a service associated with a service to which item 32024, 32025 or 32232 applies (Anaes.) (Assist.).

**32123** - Anal stricture, anoplasty for (Anaes.) (Assist.).

**32150** - Operation for anal fissure, including excision, injection of Botulinum toxin or sphincterotomy, excluding dilatation (Anaes.) (Assist.).

**32156** - Anal fistula, subcutaneous, excision of (Anaes.).

**32165** - Operative treatment of anal fistula, repair by mucosal advancement flap, including ligation of inter-sphincteric fistula tract (LIFT) or other complex sphincter sparing surgery (Anaes.) (Assist.).

**32221** - Removal or revision of an artificial bowel sphincter (with or without replacement) for severe faecal incontinence in the treatment of a patient for whom conservative and other less invasive forms of treatment are contraindicated or have failed.

**32222** - Endoscopic examination of the colon to the caecum by colonoscopy, for a patient:

- (a) following a positive faecal occult blood test; or
- (b) who has symptoms consistent with pathology of the colonic mucosa; or
- (c) who has anaemia or iron deficiency; or
- (d) for whom diagnostic imaging has shown an abnormality of the colon; or
- (e) who is undergoing the first examination following surgery for colorectal cancer; or
- (f) who is undergoing pre-operative evaluation; or
- (g) for whom a repeat colonoscopy is required due to inadequate bowel preparation for the patient's previous colonoscopy; or
- (h) for the management of inflammatory bowel disease

Applicable only once on a day under a single episode of anaesthesia or other sedation (Anaes.).

**32223** - Endoscopic examination of the colon to the caecum by colonoscopy, for a patient:

- (a) who has had a colonoscopy that revealed:
  - (i) 1 to 4 adenomas, each of which was less than 10 mm in diameter, had no villous features and had no high grade dysplasia; or
  - (ii) 1 or 2 sessile serrated lesions, each of which was less than 10 mm in diameter, and without dysplasia; or
- (b) who has a moderate risk of colorectal cancer due to family history; or

(c) who has a history of colorectal cancer and has had an initial post-operative colonoscopy that did not reveal any adenomas or colorectal cancer

Applicable only once in any 5-year period (Anaes.)

**32224** - Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a moderate risk of colorectal cancer due to:

(a) a history of adenomas, including an adenoma that:

- (i) was 10 mm or greater in diameter; or
- (ii) had villous features; or
- (iii) had high grade dysplasia; or

(b) having had a previous colonoscopy that revealed:

- (i) 5 to 9 adenomas, each of which was less than 10 mm in diameter, had no villous features and had no high grade dysplasia; or
- (ii) 1 or 2 sessile serrated lesions, each of which was 10 mm or greater in diameter or had dysplasia; or
- (iii) a hyperplastic polyp that was 10 mm or greater in diameter; or
- (iv) 3 or more sessile serrated lesions, each of which was less than 10 mm in diameter and had no dysplasia; or
- (v) 1 or 2 traditional serrated adenomas, of any size

Applicable only once in any 3 year period (Anaes.)

**32225** - Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a high risk of colorectal cancer due to having had a previous colonoscopy that:

- (a) revealed 10 or more adenomas; or
- (b) included a piecemeal, or possibly incomplete, excision of a large, sessile polyp

Applicable not more than 4 times in any 12-month period (Anaes.)

**32226** - Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a high risk of colorectal cancer due to:

- (a) having either:

(i) a known or suspected familial condition, such as familial adenomatous polyposis, Lynch syndrome or serrated polyposis syndrome; or

(ii) a genetic mutation associated with hereditary colorectal cancer; or

(b) having had a previous colonoscopy that revealed:

(i) 5 or more sessile serrated lesions, each of which was less than 10 mm in diameter and had no dysplasia; or

(ii) 3 or more sessile serrated lesions, 1 or more of which was 10 mm or greater in diameter or had dysplasia; or

(iii) 3 or more traditional serrated adenomas, of any size

Applicable only once in any 12 month period (Anaes.)

**32227** - Endoscopic examination of the colon to the caecum by colonoscopy:

(a) for the treatment of bleeding, including one or more of the following:

(i) radiation proctitis;

(ii) angioectasia;

(iii) post-polypectomy bleeding; or

(b) for the treatment of colonic strictures with balloon dilatation

Applicable only once on a day under a single episode of anaesthesia or other sedation (Anaes.)

**32228** - Endoscopic examination of the colon to the caecum by colonoscopy, other than a service to which item 32222, 32223, 32224, 32225 or 32226 applies

Applicable only once (Anaes.)

**32229** - Removal of one or more polyps during colonoscopy, in association with a service to which item 32222, 32223, 32224, 32225, 32226 or 32228 applies (Anaes.).

### Subgroup 3 - Vascular

**33100** - Aneurysm of common or internal carotid artery, or both, replacement by graft of vein or synthetic material (Anaes.) (Assist.).

**33109** - Thoraco-abdominal aneurysm, replacement by graft including re-implantation of arteries (Anaes.) (Assist.).

**33116** - Infrarenal abdominal aortic aneurysm (repair), replacement by tube graft using endovascular repair procedure, excluding associated radiological services (Anaes.) (Assist.).

**33119** - Infrarenal abdominal aortic aneurysm (repair), replacement by bifurcation graft to one or both iliac arteries using endovascular repair procedure, excluding associated radiological services (Anaes.) (Assist.).

**33127** - Aneurysms of iliac arteries (common, external or internal), replacement by graft—bilateral (Anaes.) (Assist.).

**33142** - False aneurysm, repair of, in femoral artery and restoration of arterial continuity (Anaes.) (Assist.).

**33166** - Ruptured aneurysm of visceral artery, replacement by anastomosis or graft (Anaes.) (Assist.).

**33518** - Iliac endarterectomy, including closure by suture, other than a service associated with another procedure on the iliac artery (Anaes.) (Assist.).

**33800** - Embolus, removal of, from artery of neck (Anaes.) (Assist.).

**33806** - Embolectomy or thrombectomy (including the infusion of thrombolytic or other agents) from an artery or bypass graft of extremities, or embolectomy of abdominal artery via the femoral artery, item to be claimed once per extremity, regardless of the number of incisions required to access the artery or bypass graft (Anaes.) (Assist.).

**33810** - Inferior vena cava or iliac vein, closed thrombectomy by catheter via the femoral vein (Anaes.) (Assist.).

**33812** - Thrombus, removal of, from femoral or other similar large vein (Anaes.) (Assist.).

**34106** - Artery or vein (including brachial, radial, ulnar or tibial), ligation of, by elective operation, or exploration of, other than a service associated with another vascular procedure except those services to which item 32508, 32511, 32514 or 32517 applies (Anaes.) (Assist.).

**34118** - Arterio-venous fistula of the abdomen, dissection and ligation (Anaes.) (Assist.).

**34130** - Surgically created arterio-venous fistula of an extremity, closure of (Anaes.) (Assist.).

**34154** - Recurrent carotid associated tumour, resection of, with or without repair or replacement of portion of internal or common carotid arteries (Anaes.) (Assist.).

**34500** - Arteriovenous shunt, external, insertion of (Anaes.) (Assist.).

**34527** - Central vein catheterisation by open technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, including any associated percutaneous central vein catheterisation, on a patient 10 years of age or over (Anaes.).

**34528** - Central vein catheterisation by percutaneous technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, on a patient 10 years of age or over (Anaes.).



**34529** - Central vein catheterisation by open technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, including any associated percutaneous central vein catheterisation, on a patient under 10 years of age (Anaes.).

**34530** - Central venous line, or other chemotherapy device, removal of, by open surgical procedure in the operating theatre of a hospital, on a patient 10 years of age or over (Anaes.).

**34533** - Isolated limb perfusion, including cannulation of artery and vein at commencement of procedure, regional perfusion for chemotherapy, or other therapy, repair of arteriotomy and venotomy at conclusion of procedure (excluding after-care) (Anaes.) (Assist.).

**34534** - Central vein catheterisation by percutaneous technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, on a patient under 10 years of age (Anaes.).

**34538** - Central vein catheterisation by percutaneous technique, using subcutaneous tunnelled cuffed catheter or similar device, for the administration of haemodialysis or parenteral nutrition (Anaes.).

**34540** - Central venous line, or other chemotherapy device, removal of, by open surgical procedure in the operating theatre of a hospital, on a patient under 10 years of age (Anaes.).

**34800** - Inferior vena cava, plication, ligation, or application of caval clip (Anaes.) (Assist.).

**34821** - Vein transplant to restore valvular function (Anaes.) (Assist.).

**34830** - External stent, application of, to restore venous valve competency to deep vein—one stent (Anaes.) (Assist.).

**35000** - Lumbar sympathectomy (Anaes.) (Assist.).

**35300** - Transluminal balloon angioplasty of one peripheral artery or vein of one limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding after-care (Anaes.) (Assist.).

**35303** - Transluminal balloon angioplasty of aortic arch branches, aortic visceral branches, or more than one peripheral artery or vein of one limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding after-care (Anaes.) (Assist.).

**35306** - Transluminal stent insertion, one or more stents, including associated balloon dilatation for one peripheral artery or vein of one limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding after-care (Anaes.) (Assist.).

**35309** - Transluminal stent insertion, one or more stents, including associated balloon dilatation for visceral arteries or veins, or more than one peripheral artery or vein of one limb, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding after-care (Anaes.) (Assist.).

**35319** - Peripheral arterial or venous catheterisation with administration of thrombolytic or chemotherapeutic agents, by pulse spray technique, using percutaneous approach, excluding associated radiological services or preparation, and excluding after-care (other than a service associated with a service to which an item in Subgroup 11 of Group T1 or item 35317 or 35320 applies, or associated with photodynamic therapy with verteporfin) (Anaes.) (Assist.).

**35320** - Peripheral arterial or venous catheterisation with administration of thrombolytic or chemotherapeutic agents, by open exposure, excluding associated radiological services or preparation, and excluding after-care (other than a service associated with a service to which an item in Subgroup 11 of Group T1 or item 35317 or 35319 applies, or associated with photodynamic therapy with verteporfin) (Anaes.) (Assist.).

**35321** - Peripheral arterial or venous catheterisation to administer agents to occlude arteries, veins or arterio-venous fistulae or to arrest haemorrhage (but not for the treatment of uterine fibroids or varicose veins), percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding after-care (other than a service associated with photodynamic therapy with verteporfin) (Anaes.) (Assist.).

**35330** - Insertion of inferior vena caval filter, percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding after-care (Anaes.) (Assist.).

**35410** - Uterine artery catheterisation with percutaneous administration of occlusive agents, for the treatment of symptomatic uterine fibroids in a patient who has been referred for uterine artery embolisation by a specialist gynaecologist, excluding associated radiological services or preparation, and excluding aftercare (Anaes.) (Assist.).

**35412** - Intracranial aneurysm, ruptured or unruptured, endovascular occlusion with detachable coils, and assisted coiling (if performed), with parent artery preservation, not for use with liquid embolics only, including intra-operative imaging, but in association with pre-operative diagnostic imaging under item 60009 and one of items 60072, 60075 and 60078, including aftercare (Anaes.) (Assist.).

## Subgroup 4 - Gynaecological

**35500** - Gynaecological examination under anaesthesia, other than a service associated with a service to which another item in this Group applies (Anaes.).

**35506** - Intra-uterine device, removal of under general anaesthesia, for a retained or embedded device, not being a service associated with a service to which another item in this Group applies (other than a service described in item 35503) (Anaes.).

**35536** - Vulva, wide local excision or hemivulvectomy, one or both procedures, for suspected malignancy or vulval lesions with a high risk of malignancy (Anaes.) (Assist.).

**35612** - Cervix, residual stump, removal of, by abdominal approach for non-malignant lesions (Anaes.) (Assist.).

**35680** - Bicornuate uterus, plastic reconstruction for (Anaes.) (Assist.).

## Subgroup 5 - Urological

**36504** - Rigid cystoscopy using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with biopsy of bladder, not being a service associated with a service to which item 36505, 36507, 36508, 36812, 36830, 36836, 36840, 36845, 36848, 36854, 37203 or 37215 applies (Anaes.).

**36507** - Rigid cystoscopy using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with diathermy, resection or visual laser destruction of bladder tumour or other lesion of the bladder, not being a service to which item 36840 or 36845 applies (Anaes.).

**36508** - Rigid cystoscopy using blue light with hexaminolevulinate as an adjunct to white light, including catheterisation, with diathermy, resection or visual laser destruction of multiple tumours in more than 2 quadrants of the bladder or solitary tumour greater than 2 cm in diameter, not being a service to which item 36845 applies (Anaes.).

**36543** - Nephrolithotomy or pyelolithotomy, or both, extended, for one or more renal stones, including one or more of nephrostomy, pyelostomy, pedicle control with or without freezing, calyorrhaphy or pyeloplasty (Anaes.) (Assist.).

**36546** - Extracorporeal shock wave lithotripsy (ESWL) to urinary tract and post-treatment care for 3 days, including pre-treatment consultations, unilateral (Anaes.).

**36558** - Renal cyst or cysts, excision or unroofing of (Anaes.) (Assist.)

**36600** - Ureter, transplantation of, into isolated intestinal segment, unilateral (Anaes.) (Assist.).

**36604** - Ureteric stent, passage of through percutaneous nephrostomy tube, using interventional radiology techniques, but not including imaging (Anaes.).

**36624** - Nephrostomy, percutaneous, using interventional radiology techniques, but not including imaging (Anaes.) (Assist.).

**36633** - Nephroscopy, percutaneous, with incision of any one or more of renal pelvis, calyx or calyces or ureter and including antegrade insertion of ureteric stent, other than a service associated with a service to which item 36627, 36639 or 36645 applies (Anaes.) (Assist.).

**36663** - Both:

(a) percutaneous placement of sacral nerve lead or leads using fluoroscopic guidance, or open placement of sacral nerve lead or leads; and

(b) intra-operative test stimulation, to manage:

(i) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or

(ii) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment.

(Anaes.)

**36664** Both:

(a) percutaneous repositioning of sacral nerve lead or leads using fluoroscopic guidance, or open repositioning of sacral nerve lead or leads; and

(b) intra-operative test stimulation, to correct displacement or unsatisfactory positioning, if inserted for the management of:

- (i) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or
- (ii) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment;

other than a service to which item 36663 applies (Anaes.)

**36666** - Pulse generator, subcutaneous placement of, and placement and connection of extension wire or wires to sacral nerve electrode or electrodes, for the management of:

- (a) detrusor over-activity that has been refractory to at least 12 months conservative non-surgical treatment; or
- (b) non-obstructive urinary retention that has been refractory to at least 12 months conservative non-surgical treatment

(Anaes.)

**36803** - Ureterscopy, of one ureter, with or without any one or more of cystoscopy, ureteric meatotomy, or ureteric dilatation, other than a service associated with a service to which item 36652, 36654, 36656, 36806, 36809, 36812, 36824 or 36848 applies (Anaes.) (Assist.)

**36811** - Cystoscopy, with insertion of one or more urethral or prostatic prostheses, other than a service associated with a service to which item 37203, 37207 or 37230 applies (Anaes.).

**36818** - Cystoscopy, with ureteric catheterisation, unilateral or bilateral, guided by fluoroscopic imaging of the upper urinary tract, other than a service associated with a service to which item 36824 or 36830 applies (Anaes.).

**36821** - Cystoscopy with one or more of ureteric dilatation, insertion of ureteric stent, or brush biopsy of ureter or of renal pelvis, unilateral (Anaes.) (Assist.).

**36822** - Cystoscopy, with ureteric catheterisation, unilateral:

- (a) guided by fluoroscopic imaging of the upper urinary tract; and

(b) including one or more of ureteric dilatation, insertion of ureteric stent, or brush biopsy of ureter or of renal pelvis; other than a service associated with a service to which item 36818, 36821 or 36830 applies (Anaes.) (Assist.).

**36823** - Cystoscopy, with removal of ureteric stent and ureteric catheterisation, unilateral:

(a) guided by fluoroscopic imaging of the upper urinary tract; and

(b) including either or both of the following:

(i) ureteric dilatation;

(ii) insertion of ureteric stent of ureter or of renal pelvis;

other than a service associated with a service to which item 36818, 36821, 36830 or 36833 applies (Anaes.) (Assist.).

**36824** - Cystoscopy with ureteric catheterisation, unilateral or bilateral, other than a service associated with a service to which item 36818 applies (Anaes.).

**36827** - Cystoscopy, with controlled hydro-dilatation of the bladder, other than a service associated with a service to which item 37011 or 37245 applies (Anaes.).

**36833** - Cystoscopy with removal of ureteric stent or other foreign body in the lower urinary tract, unilateral (Anaes.).

**36836** - Cystoscopy with biopsy of bladder, other than a service associated with a service to which item 36812, 36830, 36840, 36845, 36848, 36854, 37203 or 37215 applies (Anaes.).

**36840** - Cystoscopy, with diathermy, resection or visual laser destruction of bladder tumour or other lesion of the bladder, for:

(a) a tumour or lesion in only one quadrant of the bladder; or

(b) a solitary tumour of not more than 2 cm in diameter;

other than a service associated with a service to which item 36845 applies (Anaes.).

**36845** - Cystoscopy, with diathermy, resection or visual laser destruction of:

- (a) multiple tumours in 2 or more quadrants of the bladder; or
  - (b) a solitary bladder tumour of more than 2 cm in diameter
- (Anaes.).

**36860** - Endoscopic examination of intestinal conduit or reservoir  
(Anaes.).

**37008** - Open cystostomy or cystotomy, suprapubic, other than:

- (a) a service to which item 37011 applies; or
  - (b) a service associated with a service to which item 37245 applies; or
  - (c) another open bladder procedure
- (Anaes.) (Assist.)

**37215** - Prostate, biopsy of, endoscopic, with or without cystoscopy  
(Anaes.).

**37224** - Prostate, diathermy or cauterisation, other than a service associated with a service to which item 37201, 37203, 37207, 37208 or 37215 applies (Anaes.)

**37227** - Prostate, transperineal insertion of catheters for high dose rate brachytherapy using ultrasound guidance including any associated cystoscopy, if performed at an approved site, and being a service associated with a service to which item 15331 or 15332 applies.

**37411** - Penis, repair of avulsion (Anaes.) (Assist.).

**37418** - Penis, correction of chordee with incision or excision of fibrous plaque or plaques, with or without mobilisation of one or both of the neuro-vascular bundle and urethra (Anaes.) (Assist.).



**37604** - Exploration of scrotal contents, with or without fixation and with or without biopsy, unilateral or bilateral, other than a service associated with sperm harvesting for IVF (Anaes.).

**37606** - Open surgical sperm retrieval, unilateral, including the exploration of scrotal contents, with or without biopsy, for the purposes of intracytoplasmic sperm injection, for male factor infertility, performed in a hospital, other than a service to which item 13218 or 37604 applies (Anaes.).

**37619** - Vasovasostomy or vasoepididymostomy, unilateral, other than a service associated with sperm harvesting for IVF (Anaes.) (Assist.).

**37806** - Undescended testis in inguinal canal close to deep inguinal ring or within abdominal cavity, orchidopexy for, on a patient 10 years of age or over (Anaes.) (Assist.).

**37807** - Undescended testis in inguinal canal close to deep inguinal ring or within abdominal cavity, orchidopexy for, on a patient under 10 years of age (Anaes.) (Assist.).

**37818** - Hypospadias, glanuloplasty incorporating meatal advancement, on a patient 10 years of age or over (Anaes.) (Assist.).

**37819** - Hypospadias, glanuloplasty incorporating meatal advancement, on a patient under 10 years of age (Anaes.) (Assist.).

**37830** - Hypospadias, staged repair, second stage, on a patient 10 years of age or over (Anaes.) (Assist.).

**37831** - Hypospadias, staged repair, second stage, on a patient under 10 years of age (Anaes.) (Assist.).

## Subgroup 6 – Cardio-Thoracic

**38200** - Right heart catheterisation with any one or more of the following:

- (a) fluoroscopy;
- (b) oximetry;
- (c) dye dilution curves;
- (d) cardiac output measurement by any method;
- (e) shunt detection;
- (f) exercise stress test;

other than a service associated with a service to which item 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38254 or 38368 applies (Anaes.)

**38203** - Left heart catheterisation by percutaneous arterial puncture, arteriotomy or percutaneous left ventricular puncture, with any one or more of the following:

- (a) fluoroscopy;
- (b) oximetry;
- (c) dye dilution curves;
- (d) cardiac output measurements by any method;
- (e) shunt detection;
- (f) exercise stress test;

other than a service associated with a service to which item 38200, 38206, 38244, 38247, 38248, 38249, 38251, 38252 or 38254 applies (Anaes.)

**38206** - Right heart catheterisation with left heart catheterisation via the right heart or by another procedure, with any one or more of the following:

- (a) fluoroscopy;
- (b) oximetry;
- (c) dye dilution curves;
- (d) cardiac output measurements by any method;
- (e) shunt detection;
- (f) exercise stress test;

other than a service associated with a service to which item 38200, 38203, 38244, 38247, 38248, 38249, 38251, 38252 or 38254 applies (Anaes.)

**38209** - Cardiac electrophysiological study—up to and including 3 catheter investigation of any one or more of—syncope, atrio-ventricular conduction, sinus node function or simple ventricular tachycardia studies, other than a service associated with a service to which item 38212 or 38213 applies (Anaes.)

**38212** - Cardiac electrophysiological study for:

- (a) the investigation of supraventricular tachycardia involving 4 or more catheters; or
- (b) complex tachycardia inductions; or
- (c) multiple catheter mapping; or
- (d) acute intravenous anti-arrhythmic drug testing with pre and post drug inductions; or
- (e) catheter ablation to intentionally induce complete atrioventricular block; or
- (f) intraoperative mapping;

other than a service associated with a service to which item 38209 or 38213 applies (Anaes.)

**38213** - Cardiac electrophysiological study, performed either:

- (a) during insertion of implantable defibrillator; or
- (b) for defibrillation threshold testing at a different time to implantation;

other than a service associated with a service to which item 38209 or 38212 applies (Anaes.)

**38241** - Use of a coronary pressure wire, if the service is:

- (a) performed during selective coronary angiography, percutaneous angioplasty or transluminal insertion of one or more stents; and
- (b) to measure fractional flow reserve, non-hyperaemic pressure ratios or coronary flow reserve in intermediate coronary artery or graft lesions (stenosis of 50 to 70%); and

(c) to determine whether revascularisation is appropriate, if previous functional imaging:

(i) has not been performed; or

(ii) has been performed but the results are inconclusive or do not apply to the vessel being interrogated; and

(d) performed on one or more coronary vascular territories

(Anaes.)

**38244** - Selective coronary angiography:

(a) for a patient who is eligible for the service under clause 5.10.17A; and

(b) with placement of one or more catheters and injection of opaque material into native coronary arteries; and

(c) with or without left heart catheterisation, left ventriculography or aortography; and

(d) including all associated imaging;

other than a service associated with a service to which 38200, 38203, 38206, 38247, 38248, 38249, 38251 or 38252 applies (Anaes)

**38247** - Selective coronary and graft angiography:

(a) for a patient who is eligible for the service under clause 5.10.17A; and

(b) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and

(c) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and

(d) with or without left heart catheterisation, left ventriculography or aortography; and

(e) including all associated imaging;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38248, 38249, 38251 or 38252 applies (Anaes)

**38248** - Selective coronary angiography:

- (a) for a patient who is eligible for the service under clause 5.10.17B; and
- (b) as part of the management of the patient; and
- (c) with placement of catheters and injection of opaque material into native coronary arteries; and
- (d) with or without left heart catheterisation, left ventriculography or aortography; and
- (e) including all associated imaging;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38249, 38251 or 38252 applies—applicable each 3 months (Anaes.)

**38249 - Selective coronary and graft angiography:**

- (a) for a patient who is eligible for the service under clause 5.10.17B; and
- (b) as part of the management of the patient; and
- (c) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and
- (d) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and
- (e) with or without left heart catheterisation, left ventriculography or aortography; and
- (f) including all associated imaging;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38251 or 38252 applies—applicable once each 3 months (Anaes.)

**38251 - Selective coronary angiography:**

- (a) for a symptomatic patient with valvular or other non-coronary structural heart disease; and
- (b) as part of the management of the patient for:
  - (i) pre-operative assessment for planning non-coronary cardiac surgery, including by transcatheter approaches; or

- (ii) evaluation of valvular heart disease or other non-coronary structural heart disease where clinical impression is discordant with non-invasive assessment; and
- (c) with placement of catheters and injection of opaque material into native coronary arteries; and
- (d) with or without left heart catheterisation, left ventriculography or aortography; and
- (e) including all associated imaging;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249 or 38252 applies—applicable once each 12 months (Anaes.)

**38252 - Selective coronary and graft angiography:**

- (a) for a symptomatic patient with valvular or other non-coronary structural heart disease; and
- (b) as part of the management of the patient for:
  - (i) pre-operative assessment for planning non-coronary cardiac surgery, including by transcatheter approaches; or
  - (ii) evaluation of valvular heart disease or other non-coronary structural heart disease where clinical impression is discordant with non-invasive assessment; and
- (c) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and
- (d) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and
- (e) with or without left heart catheterisation, left ventriculography or aortography; and
- (f) including all associated imaging;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249 or 38251 applies—applicable once each 12 months (Anaes.)

**38254 - Right heart catheterisation:**

(a) performed at the same time as a service to which item 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313 or 38314 applies; and

(b) including any of the following (if performed):

(i) fluoroscopy;

(ii) oximetry;

(iii) dye dilution curves;

(iv) cardiac output measurement;

(v) shunt detection;

(vi) exercise stress test

(Anaes.)

**38256** - Temporary transvenous pacemaking electrode, insertion of (Anaes.)

**38270** - Balloon valvuloplasty or isolated atrial septostomy, including cardiac catheterisations before and after balloon dilatation (Anaes.) (Assist.)

**38272** - Atrial septal defect or patent foramen closure:

(a) for congenital heart disease in a patient with documented evidence of right heart overload or paradoxical embolism; and

(b) using a septal occluder or similar device, by transcatheter approach; and

(c) including right or left heart catheterisation (or both);

other than a service associated with a service to which item 38200, 38203, 38206 or 38254 applies (Anaes.) (Assist.)

**38275** - Myocardial biopsy, by cardiac catheterisation (Anaes.).

**38287** - Ablation of arrhythmia circuit or focus or isolation procedure involving one atrial chamber (Anaes.) (Assist.).

**38293** - Ventricular arrhythmia with mapping and ablation, including all associated electrophysiological studies performed on the same day (Anaes.) (Assist.).

**38307 - Percutaneous coronary intervention:**

- (a) for a patient:
  - (i) eligible for the service under clause 5.10.17A; and
  - (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and
- (b) including selective coronary angiography and all associated imaging, catheter and contrast; and
- (c) including either or both:
  - (i) percutaneous angioplasty;
  - (ii) transluminal insertion of one or more stents; and
- (d) performed on one coronary vascular territory; and
- (e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38308 - Percutaneous coronary intervention:**

- (a) for a patient:
  - (i) eligible for the service under clause 5.10.17A; and
  - (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and
- (b) including selective coronary angiography and all associated imaging, catheter and contrast; and
- (c) including either or both:
  - (i) percutaneous angioplasty; and
  - (ii) transluminal insertion of one or more stents; and
- (d) performed on 2 coronary vascular territories; and
- (e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307,



38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38309** - Percutaneous transluminal rotational atherectomy of one or more coronary arteries, including all associated imaging, if:

(a) the target stenosis within at least one coronary artery is heavily calcified and balloon angioplasty with or without stenting is not feasible without rotational atherectomy; and

(b) the service is performed in conjunction with a service to which item 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies

Applicable only once on each occasion the service is performed (Anaes.) (Assist.)

**38310** - Percutaneous coronary intervention:

(a) for a patient:

(i) eligible for the service under clause 5.10.17A; and

(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and

(b) including selective coronary angiography and all associated imaging, catheter and contrast; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(d) performed on 3 coronary vascular territories; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38311** - Percutaneous coronary intervention:

(a) for a patient:

(i) eligible under clause 5.10.17C for the service and a service to which item 38314 applies; and

(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and

(b) including selective coronary angiography and all associated imaging, catheter and contrast; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(d) performed on one coronary vascular territory; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38313 - Percutaneous coronary intervention:**

(a) for a patient:

(i) eligible under clause 5.10.17C for the service and a service to which item 38314 applies; and

(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and

(b) including selective coronary angiography and all associated imaging, catheter and contrast; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(d) performed on 2 coronary vascular territories; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38314 - Percutaneous coronary intervention:**

(a) for a patient:

(i) eligible for the service under clause 5.10.17C; and

(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and

(b) including selective coronary angiography and all associated imaging, catheter and contrast; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(c) performed on 3 coronary vascular territories; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38316 - Percutaneous coronary intervention:**

(a) for a patient:

(i) eligible for the service under clause 5.10.17A; and

(ii) for whom selective coronary angiography has been completed in the previous 3 months; and

(b) including any associated coronary angiography; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(d) performed on one coronary vascular territory; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38317 - Percutaneous coronary intervention:**

(a) for a patient:

(i) eligible for the service under clause 5.10.17A; and

(ii) for whom selective coronary angiography has been completed in the previous 3 months; and

(b) including any associated coronary angiography; and

(c) including either or both:

- (i) percutaneous angioplasty; and
- (ii) transluminal insertion of one or more stents; and
- (d) performed on 2 coronary vascular territories; and
- (e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38319 - Percutaneous coronary intervention:**

- (a) for a patient:
  - (i) eligible for the service under clause 5.10.17A; and
  - (ii) for whom selective coronary angiography has been completed in the previous 3 months; and
- (b) including any associated coronary angiography; and
- (c) including either or both:
  - (i) percutaneous angioplasty; and
  - (ii) transluminal insertion of one or more stents; and
- (d) performed on 3 coronary vascular territories; and
- (e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38320, 38322 or 38323 applies (Anaes.) (Assist.)

**38320 - Percutaneous coronary intervention:**

- (a) for a patient:
  - (i) eligible under clause 5.10.17C for the service and a service to which item 38323 applies; and
  - (ii) for whom selective coronary angiography has been completed in the previous 3 months; and
- (b) including any associated coronary angiography; and
- (c) including either or both:
  - (i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(d) performed on one coronary vascular territory; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38322 or 38323 applies (Anaes.) (Assist.)

**38322** - Percutaneous coronary intervention:

(a) for a patient:

(i) eligible under clause 5.10.17C for the service and a service to which item 38323 applies; and

(ii) for whom selective coronary angiography has been completed in the previous 3 months; and

(b) including any associated coronary angiography; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

(d) performed on 2 coronary vascular territories; and

(e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320 or 38323 applies (Anaes.) (Assist.)

**38323** - Percutaneous coronary intervention:

(a) for a patient:

(i) eligible for the service under clause 5.10.17C; and

(ii) for whom selective coronary angiography has been completed in the previous 3 months; and

(b) including any associated coronary angiography; and

(c) including either or both:

(i) percutaneous angioplasty; and

(ii) transluminal insertion of one or more stents; and

- (d) performed on 3 coronary vascular territories; and
- (e) excluding aftercare;

other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320 or 38322 applies (Anaes.) (Assist.).,

**38362** - Intra-aortic balloon pump, percutaneous insertion of (Anaes.).

**38416** - Endoscopic ultrasound guided fine needle aspiration biopsy or biopsies (endoscopy with ultrasound imaging) to obtain one or more specimens from either or both of the following:

- (a) mediastinal masses;
- (b) locoregional nodes to stage non-small cell lung carcinoma;

other than a service associated with a service to which an item in Subgroup 1 of this Group, or item 38417 or 55054, applies (Anaes.).

**38417** - Endobronchial ultrasound guided biopsy or biopsies (bronchoscopy with ultrasound imaging, with or without associated fluoroscopic imaging) to obtain one or more specimens by:

- (a) transbronchial biopsy or biopsies of peripheral lung lesions;  
or
- (b) fine needle aspirations of one or more mediastinal masses;  
or
- (c) fine needle aspirations of locoregional nodes to stage non-small cell lung carcinoma;

other than a service associated with a service to which an item in Subgroup 1 of this Group, item 38416, 38420 or 38423, or an item in Subgroup 15 of Group I3, applies (Anaes.).

**38419** - Bronchoscopy, as an independent procedure (Anaes.).

**38420** - Bronchoscopy with one or more endobronchial biopsies or other diagnostic or therapeutic procedures (Anaes.).

**38423** - Fiberoptic bronchoscopy with one or more transbronchial lung biopsies, with or without bronchial or broncho-alveolar lavage, with or without the use of interventional imaging (Anaes.) (Assist.)

**38428** - Bronchoscopy with treatment of tracheal stricture (Anaes.).

**38829** - Intercostal drain, insertion of, with pleurodesis:

(a) not involving resection of rib; and

(b) excluding aftercare; and

(c) other than a service associated with a service to which item 38815, 38816, 38828, 38830, 38831, 38832, 38833 or 38834 applies

(Anaes.)

## Subgroup 7 - Neurosurgical

**39007** - Procedure to obtain access to intracranial space (including subdural space, ventricle or basal cistern), percutaneously or by burr-hole (Anaes.).

**39109** - Trigeminal gangliotomy by radiofrequency, balloon or glycerol, including stereotaxy (Anaes.) (Assist.).

**39121** - Percutaneous cordotomy (Anaes.) (Assist.).

**39140** - Epidural catheter, insertion of, under imaging control, with epidurogram and epidural therapeutic injection for lysis of adhesions (Anaes.).

**39307** - Reconstruction of nerve trunk using biological or synthetic nerve conduit, using microsurgical techniques, other than a service associated with a service to which item 39330 applies (Anaes.) (Assist.).

**39319** - Reconstruction of digital or cutaneous nerve using biological or synthetic nerve conduit, using microsurgical techniques, other than a service associated with a service to which item 39330 applies (Anaes.) (Assist.).

**39329** - Extensive neurolysis of radial, median or ulnar nerve trunk nerve in the forearm or arm, other than a service associated with:

(a) a service to which item 39303, 39309, 39312, 39315, 39318, 39324 or 39327 applies; or

(b) a service to which item 30023 applies that is performed at the same site

(Anaes.) (Assist.)

**39332** - Revision of carpal tunnel release, including division of transverse carpal ligament or release of median nerve, by any method, including either or both of the following (if performed):

(a) synovectomy;

(b) neurolysis;

other than a service associated with:

(c) a service to which item 46339 applies; or

(d) a service to which item 30023 applies that is performed at the same site

(Anaes.) (Assist.)

**39339** - Revision of ulnar nerve decompression at elbow (cubital tunnel) without transposition, by any method, including neurolysis (if performed), other than a service associated with a service to which item 30023 applies that is performed at the same site

(Anaes.)(Assist.).

**39342** - Ulnar nerve decompression at elbow (cubital tunnel), including any of the following (if performed):

(a) associated transposition;

(b) subcutaneous or submuscular transposition of the nerve;

(c) medial epicondylectomy;

(d) ostetomy and reconstruction of the flexor origin;

(e) neurolysis;

other than a service associated with a service to which item 30023 applies that is performed at the same site (Anaes.)(Assist.)



**39345** - Localised decompression of radial, median or ulnar nerve, or branches of, in the forearm for compressive neuropathy, including neurolysis (if performed), other than a service associated with a service to which item 30023 applies that is performed at the same site (Anaes.)(Assist.).

**39815** - Carotid-cavernous fistula, obliteration of—combined cervical and intracranial procedure (Anaes.) (Assist.).

**40018** - Lumbar cerebrospinal fluid drain, insertion of, other than a service associated with a service to which item 22053 applies (Anaes.).

**40803** - Intracranial stereotactic procedure by any method, other than:

(a) a service to which item 40801 applies; or

(b) a service associated with a service to which item 39018, 39109, 39113, 39604, 39615, 39638, 39639, 39641, 39651, 39654, 39656, 39700, 39703, 39710, 39712, 39715, 39718, 39720, 39801, 39803, 39818, 39821, 39900, 39903, 40004, 40012, 40106, 40109, 40700, 40703, 40706, 40709 or 40712 applies

(Anaes.) (Assist.)

## Subgroup 8 – Ear, Nose, and Throat

**41603** - Osseo-integration procedure—implantation of bone conduction hearing system device, in a patient:

(a) with a permanent or long term hearing loss; and

(b) unable to utilise conventional air or bone conduction hearing aid for medical or audiological reasons; and

(c) with bone conduction thresholds that accord with recognised criteria for the implantable bone conduction hearing device being inserted;

other than a service associated with a service to which item 41554, 45794 or 45797 applies (Anaes.).

**41614** - Round window surgery including repair of cochleotomy, other than a service associated with a service to which item 41617 applies (Anaes.) (Assist.).

**41615** - Oval window surgery, including repair of fistula, other than a service associated with a service to which another item in this Group applies (Anaes.) (Assist.).

**41650** - Tympanic membrane, microinspection of one or both ears under general anaesthesia, other than a service associated with a service to which another item in this Group applies (Anaes.).

**41686** - Dislocation of turbinate or turbinates, one or both sides, other than a service associated with a service to which another item in this Group applies (Anaes.).

**41746** - Paranasal sinus, radical obliteration of, including any graft harvest (Anaes.) (Assist.).

**41810** - Uvulotomy or uvulectomy (Anaes.).

**41831** - Oesophagus, endoscopic pneumatic dilatation of, for treatment of achalasia (Anaes.) (Assist.).

**41832** - Oesophagus, balloon dilatation of, using interventional imaging techniques (Anaes.).

**41876** - Larynx, external operation on, or laryngofissure, with or without cordectomy (Anaes.) (Assist.).

**41885** - Trache-oesophageal fistula, formation of, as a secondary procedure following laryngectomy, including associated endoscopic procedures (Anaes.) (Assist.).

**41886** - Trachea, removal of foreign body in (Anaes.).

## Subgroup 9 - Ophthalmology

**42504** - Glaucoma, implantation of a micro-bypass surgery stent system into the trabecular meshwork, if:

(a) conservative therapies have failed, are likely to fail, or are contraindicated; and

(b) the service is performed by a specialist with training that is recognised by the Conjoint Committee for the Recognition of Training in Micro-Bypass Glaucoma Surgery (Anaes.)

**42506** - Eye, enucleation of, with or without sphere implant (Anaes.) (Assist.)

**42512** - Globe, evisceration of (Anaes.) (Assist.).

**42551** - Eye, penetrating wound or rupture of, not involving intraocular structures—repair involving suture of cornea or sclera, or both, other than a service to which item 42632 applies (Anaes.) (Assist.).

**42563** - Intraocular foreign body, removal from anterior segment (Anaes.) (Assist.).

**42574** - Dermoid, orbital, excision of (Anaes.) (Assist.).

**42576** - Dermoid, periorbital, excision of, on a patient under 10 years of age (Anaes.).

**42596** - Lacrimal sac, excision of, or operation on (Anaes.) (Assist.).

**42599** - Lacrimal canalicular system, establishment of patency by closed operation using silicone tubes or similar, one eye (Anaes.) (Assist.).

**42602** - Lacrimal canalicular system, establishment of patency by open operation, one eye (Anaes.) (Assist.).

**42605** - Lacrimal canaliculus, immediate repair of (Anaes.) (Assist.).

**42626** - Dacryocystorhinostomy if a previous dacryocystorhinostomy has been performed (Anaes.) (Assist.).

**42665** - Sclera, transplantation of, superficial or lamellar, including collection of donor material (Anaes.) (Assist.).

**42672** - Corneal incisions, to correct corneal astigmatism of more than 1 ½ dioptres following anterior segment surgery, including appropriate measurements and calculations, performed as an independent procedure (Anaes.) (Assist.).

**42673** - Additional corneal incisions, to correct corneal astigmatism of more than 1 ½ dioptres, including appropriate measurements and calculations, performed in conjunction with other anterior segment surgery (Anaes.) (Assist.).

**42698** - Lens extraction, excluding surgery performed to correct a refractive error, other than anisometropia that exceeds 3 dioptres and develops after the removal of cataract in the first eye (Anaes.).

**42701** - Intraocular lens, insertion of, excluding surgery performed to correct a refractive error, other than anisometropia that exceeds 3 dioptres and develops after the removal of cataract in the first eye (Anaes.).

**42702** - Lens extraction and insertion of intraocular lens, excluding surgery performed to correct a refractive error, other than anisometropia that exceeds 3 dioptres and develops after the removal of cataract in the first eye (Anaes.).

**42703** - Intraocular lens or iris prosthesis, insertion of, into the posterior chamber with fixation to the iris or sclera (Anaes.) (Assist.).

**42704** - Intraocular lens, removal or repositioning of by open operation—other than a service associated with a service to which item 42701 applies (Anaes.)

**42705** - Lens extraction and insertion of intraocular lens, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye, performed in association with a trans-trabecular drainage device or devices, in a patient diagnosed with open angle glaucoma who is not adequately responsive to topical anti-glaucoma medications or who is intolerant of anti-glaucoma medication (Anaes.)

**42707** - Intraocular lens, removal of and replacement with a different lens, excluding surgery performed to correct a refractive error, other than anisometropia that exceeds 3 dioptres and develops after the removal of cataract in the first eye (Anaes.)

**42710** - Intraocular lens, removal of, and replacement with a lens inserted into the posterior chamber and fixated to the iris or sclera (Anaes.) (Assist.)

**42713** - Iris suturing, McCannell technique or similar, for fixation of intraocular lens or repair of iris defect (Anaes.) (Assist.)

**42716** - Cataract, juvenile, removal of, including subsequent needlings (Anaes.) (Assist.)

**42719** - Either or both of the following, via a limbal approach by any method:

- (a) removal of capsular or lens material;
- (b) removal of vitreous;

other than a service associated with a service to which item 42698, 42702, 42705, 42716, 42725 or 42731 applies (Anaes.) (Assist.).

**42734** - Capsulotomy, other than by laser, and other than a service associated with a service to which item 42725 or 42731 applies (Anaes.) (Assist.).

**42743** - ANTERIOR CHAMBER, IRRIGATION OF BLOOD FROM, as an independent procedure (Anaes.) (Assist.)

**42755** - Glaucoma, removal of drainage device incorporating an extraocular reservoir for, such as a Molteno device (Anaes.) (Assist.).

**42761** - Division of anterior or posterior synechiae, as an independent procedure, other than by laser (Anaes.) (Assist.).

**42764** - Iridectomy (including excision of tumour of iris) or iridotomy, as an independent procedure, other than by laser (Anaes.) (Assist.).

**42773** - Detached retina, pneumatic retinopexy for, other than a service associated with a service to which item 42776 applies (Anaes.) (Assist.).

**42854** - Ruptured medial palpebral ligament or ruptured extra-ocular muscle, repair of (Anaes.) (Assist.).

**42857** - Resuturing of wound following intraocular procedures with or without excision of prolapsed iris (Anaes.) (Assist.).

**42860** - Eyelid (upper or lower), scleral or Goretex or other non-autogenous graft to, with recession of the lid retractors (Anaes.) (Assist.).

## Subgroup 10 - Operations for Osteomyelitis

**43530** - Operation on scapula, ulna, radius, tibia, fibula, humerus or femur, by open or arthroscopic means, for septic arthritis or osteomyelitis—one approach, inclusive of the adjoining joint (Anaes.) (Assist.).

**43533** - Operation on spine or pelvic bones, by open or arthroscopic means, for septic arthritis or osteomyelitis—one approach, inclusive of the adjoining joint (Anaes.) (Assist.).

## Subgroup 11 - Paediatric

**44104** - Rectal prolapse, submucosal or perirectal injection for, under general anaesthesia, on a patient under 2 years of age (Anaes.).

**44105** - Rectal prolapse, submucosal or perirectal injection for, under general anaesthesia, on a patient 2 years of age or over (Anaes.).

**44130** - Lymphadenectomy, for atypical mycobacterial infection or other granulomatous disease (Anaes.) (Assist.).

**44136** - Ingrown toe nail, operation for, under general anaesthesia (Anaes.).

## Subgroup 12 - Amputations

**44334** - Interscapulothoracic amputation (Anaes.) (Assist.).

**44373** - Hindquarter, amputation of (Anaes.) (Assist.).

**44376** - Amputation stump, re-amputation of, to provide adequate skin and muscle cover (Anaes.) (Assist.).

## Subgroup 13 – Plastic and reconstruction surgery

**45018** - Dermis, dermofat or fascia graft (other than transfer of fat by injection):

(a) if the service is not associated with neurosurgical services for spinal disorders mentioned in any of items 51011 to 51171; and

(b) other than a service associated with a service to which item 39615, 39715, 40106 or 40109 applies

(Anaes.) (Assist.)

**45033** - Vascular anomaly, large or involving deeper tissue including facial muscle, excision and suture of (Anaes.) (Assist.).

**45212** - Pedicled flap repair (forehead, cross arm, cross leg, abdominal or similar), subsequent stage of a multistage procedure (Anaes.) (Assist.).

**45227** - Indirect flap or tubed pedicle, formation of (Anaes.) (Assist.).

**45233** - Indirect flap or tubed pedicle, preparation of intermediate or final site and attachment to the site (Anaes.) (Assist.).

**45518** - Scar, other than on face or neck, more than 7 cm in length, revision of, if:

(a) the service is:

(i) undertaken in the operating theatre of a hospital; or

(ii) performed by a specialist in the practice of the specialist's specialty; and

(b) the service is not performed in conjunction with the insertion of breast implants for cosmetic purposes; and

(c) the incision made for revision of the scar is not used as an approach for another procedure (including a non-rebatable procedure); and

(d) sufficient photographic evidence demonstrating the clinical need for the service is included in patient notes

(Anaes.)

**45545** - Nipple or areola or both, reconstruction of, by any surgical technique (Anaes.) (Assist.)

**45548** - Breast prosthesis, removal of, as an independent procedure (Anaes.).

**45572** - Intra-operative tissue expansion using a prosthetic tissue expander, performed under general anaesthetic or intravenous sedation during an operation, if combined with a service to which another item in Group T8 applies (including expansion injections), not to be used for breast tissue expansion (Anaes.).



**45575** - Facial nerve paralysis, free fascia graft for (Anaes.) (Assist.).

**45581** - Facial nerve paralysis, excision of tissue for (Anaes.).

**45632** - Rhinoplasty, partial, involving correction of one or both lateral cartilages, one or both alar cartilages or one or both lateral cartilages and alar cartilages, if:

(a) the indication for surgery is:

(i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or

(ii) significant acquired, congenital or developmental deformity; and

(b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes

(Anaes.)

**45635** - Rhinoplasty, partial, involving correction of bony vault only, if:

(a) the indication for surgery is:

(i) airway obstruction and the patient has a self-reported NOSE Scale score of greater than 45; or

(ii) significant acquired, congenital or developmental deformity; and

(b) photographic and/or NOSE Scale evidence demonstrating the clinical need for this service is documented in the patient notes

(Anaes.)

**45646** - Choanal atresia, correction by open operation with bone removal (Anaes.) (Assist.).

**45674** - Lip or eyelid reconstruction, second stage of a two-stage flap reconstruction, division of the pedicle and inset of flap and closure of the donor (Anaes.).

**45692** - Cleft lip, partial revision, including minor flap revision alignment and adjustment, including revision of minor whistle deformity if performed (Anaes.).

**45704** - Cleft lip reconstruction using full thickness flap (Abbe or similar), second stage (Anaes.).

**45809** - Tumour or deep cyst (other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5 mm separation between the cyst lining and tooth structure or if a tumour or cyst has been proven by positive histopathology), in the oral and maxillofacial region, removal of, requiring wide excision, other than a service to which another item in this Subgroup applies (Anaes.) (Assist.).

**45811** - Tumour, in the oral and maxillofacial region, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, without skin or mucosal graft (Anaes.) (Assist.).

**45813** - Tumour, in the oral and maxillofacial region, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, with skin or mucosal graft (Anaes.) (Assist.).

**45827** - Mylohyoid ridge, reduction of (Anaes.) (Assist.).

**45849** - Maxillary sinus, allograft, bone graft or both, to floor of maxillary sinus following elevation of mucosal lining (sinus lift procedure), unilateral (Anaes.) (Assist.).

**45871** - Temporomandibular joint, open surgical exploration of, with meniscus, capsular and condylar head surgery, with or without microsurgical techniques (Anaes.) (Assist.).

**45873** - Temporomandibular joint, surgery of, involving procedures to which item 45871 applies and also involving the use of tissue flaps, or cartilage graft, or allograft implants, with or without microsurgical techniques (Anaes.) (Assist.).

**45888** - Removal of a deep foreign body using interventional imaging techniques.

**46113** - Excised burn wound closure, or closure of skin defect secondary to burns contracture release, if the defect area is not more than 1% of total body surface and if the service:

(a) is performed at the same time as the procedure for the primary burn wound excision or contracture release; and

(b) involves:

(i) autologous skin grafting for definitive closure; or

(ii) allogenic skin grafting, or biosynthetic skin substitutes, to temporize the excised wound

(Anaes.) (Assist.)

## Subgroup 14 – Hand Surgery

**46335** - Synovectomy of digital extensor tendons of hand, distal to wrist, for diagnosed inflammatory arthritis, including any of the following (if performed):

(a) reconstruction of extensor retinaculum;

(b) removal of tendon nodules;

(c) tenolysis;

(d) tenoplasty;

other than a service associated with:

(e) a service to which item 39330 applies; or

(f) a service to which item 30023 applies that is performed at the same site

Applicable once per hand per occasion on which the service is performed (Anaes.) (Assist.)

**46364** - Digital sympathectomy of hand, using microsurgical techniques, other than a service associated with:

(a) a service to which item 46363 applies; or

(b) a service to which item 30023 applies that is performed at the same site

—one digit or palmer arch (or both) or radial or ulnar artery (or both)  
(Anaes.)(Assist.)

**46401** - Operative treatment of non-union of phalanx or metacarpal of hand, including internal fixation (if performed) (Anaes.) (Assist.)

**46414** - Insertion of artificial tendon prosthesis in preparation for grafting of tendon of hand or wrist, including tenolysis (if performed), other than a service associated with a service to which item 30023 applies that is performed at the same site (Anaes.) (Assist.).

**46434** - Delayed repair of flexor tendon of hand or wrist, including tenolysis (if performed), other than a service associated with a service to which item 30023 applies that is performed at the same site (Anaes.) (Assist.).

**46493** - Resection of boss of metacarpal base of hand, including either or both of the following (if performed):

- (a) excision of ganglion;
- (b) synovectomy

(Anaes.) (Assist.)

**46502** - Excision of recurrent ganglion of dorsal wrist joint of hand, including any of the following (if performed):

- (a) arthrotomy;
- (b) capsular or ligament repair (or both);
- (c) synovectomy

(Anaes.) (Assist.)

**46503** - Excision of recurrent ganglion of volar wrist joint of hand, including any of the following (if performed):

- (a) arthrotomy;
- (b) capsular or ligament repair (or both);
- (c) synovectomy;

other than a service associated with a service to which item 30107 applies (Anaes.) (Assist.)

**46504** - Neurovascular island flap, heterodigital, for pulp re-innervation and soft tissue cover (Anaes.) (Assist.)

## Subgroup 15 - Orthopaedic

**47007** - Repair of acromioclavicular or sternoclavicular joint dislocation (acute or chronic), by open, mini-open or arthroscopic technique, including either or both of the following (if performed):

(a) ligament augmentation;

(b) tendon transfers

(Anaes.) (Assist.).

**47009** - Treatment of dislocation of shoulder, requiring general anaesthesia, other than a service to which item 47012 applies (Anaes.).

**47027** - Treatment of dislocation of distal or proximal radioulnar joint, by open reduction, including either or both of the following (if performed):

(a) styloid fracture;

(b) triangular fibrocartilage complex repair;

other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of treating fracture or dislocation in the same region (Anaes.) (Assist.)

**47033** - Treatment of dislocation of carpus, carpus on radius and ulna or carpometacarpal joint, by open reduction, including ligament repair (if performed) (Anaes.) (Assist.).

**47049** - Treatment of dislocation of prosthetic hip, by open reduction (Anaes.) (Assist.).

**47053** - Treatment of dislocation of native hip, by open reduction, with internal fixation (if performed) (Anaes.) (Assist.).

**47054** - Treatment of dislocation of knee, by closed reduction, including application of external fixator (if performed) (Anaes.) (Assist.).

**47060** - Treatment of dislocation of patella, by open reduction (Anaes.) (Assist.).

**47351** - Treatment of fracture of carpus (excluding scaphoid), by open reduction, with internal fixation (Anaes.) (Assist.).

**47357** - Treatment of fracture of carpal scaphoid, by reduction, with fixation by any means (Anaes.) (Assist.).

**47402** - Treatment of fracture of olecranon, with excision of olecranon fragment and reimplantation of tendon (Anaes.) (Assist.).

**47414** - Treatment of fracture of tuberosity of humerus, by open reduction (Anaes.).

**47435** - Humerus, proximal, treatment of fracture of, and associated dislocation of shoulder, by closed reduction (Anaes.) (Assist.).

**47465** - Clavicle, treatment of fracture of, by open reduction (Anaes.) (Assist.).

**47468** - Scapula, neck or glenoid region of, treatment of fracture of, by open reduction (Anaes.) (Assist.).

**47477** - Pelvic ring, treatment of fracture of, with disruption of pelvic ring or acetabulum.

**47495** - Treatment of fracture of acetabulum and associated dislocation of hip, including the application and management of traction (if performed), excluding aftercare (Anaes.) (Assist.).

**47537** - Femur, condylar region of, treatment of fracture of, requiring internal fixation of one or more osteochondral fragments, other than

a service associated with a service to which item 47534 applies (Anaes.) (Assist.).

**47540** - Hip spica or shoulder spica, application of, as an independent procedure (Anaes.).

**47546** - Tibia, plateau of, treatment of medial or lateral fracture of, by closed reduction (Anaes.).

**47552** - Tibia, plateau of, treatment of both medial and lateral fractures of, other than a service to which item 47555 or 47558 applies (Anaes.) (Assist.).

**47559** - Treatment of medial or lateral (or both) fracture of plateau of tibia, with application of a bridging external fixator to the plateau (Anaes.) (Assist.).

**47568** - Closed reduction of proximal tibia, distal tibia or shaft of tibia, with or without treatment of fibular fracture (Anaes.) (Assist.).

**47570** - Tibia, shaft of, treatment of fracture of, by open reduction, with or without treatment of fibular fracture (Anaes.) (Assist.).

**47612** - Treatment of intra-articular fracture of hindfoot, by closed reduction, with or without dislocation—one foot (Anaes.) (Assist.).

**47615** - Treatment of fracture of hindfoot, by open reduction, with or without dislocation, including any of the following (if performed):

- (a) arthrotomy;
- (b) capsule repair;
- (c) removal of loose fragments or intervening soft tissue;
- (d) washout of joint;

—one hindfoot bone (Anaes.) (Assist.).

**47621** - Treatment of intra-articular fracture of midfoot, by closed reduction, with or without dislocation—one foot (Anaes.) (Assist.).

**47630** - Treatment of fracture of cuneiform, by open reduction, with or without dislocation, including any of the following (if performed):

- (a) arthrotomy;
- (b) capsule or ligament repair;
- (c) removal of loose fragments or intervening soft tissue;
- (d) washout of joint;

—one bone (Anaes.) (Assist.)

**47639** - Treatment of fracture of metatarsal, by open reduction, including removal of loose fragments or intervening soft tissue (if performed)—one metatarsal of one foot (Anaes.) (Assist.).

**47666** - Treatment of fracture or dislocation of phalanx of great toe, by open reduction, including any of the following (if performed):

- (a) arthrotomy;
- (b) capsule repair;
- (c) removal of loose fragments;
- (d) removal of intervening soft tissue;
- (e) washout of joint;

—one great toe (Anaes.)

**47678** - Treatment of fracture or dislocation of phalanx of toe, by open reduction, including any of the following (if performed):

- (a) arthrotomy;
- (b) capsule repair;
- (c) removal of loose fragments;
- (d) removal of intervening soft tissue;
- (e) washout of joint;

—2 or more toes (other than great toe) of one foot (Anaes.)

**47762** - Zygomatic arch, treatment of fracture of, requiring surgical reduction by a temporal, intra-oral or other approach, other than a service associated with a service to which another item in this Group applies (Anaes.).



**47790** - Tendon, large, lengthening of, as an independent procedure (Anaes.) (Assist.).

**47791** - Tenosynovectomy, not being a service associated with a service to which another item in this Group applies (Anaes.) (Assist.).

**47903** - Epicondylitis, open operation for (Anaes.).

**47953** - Repair of distal biceps brachii tendon, by any method, performed as an independent procedure (Anaes.) (Assist.).

**48900** - Shoulder, excision of coraco-acromial ligament or removal of calcium deposit from cuff or both (Anaes.) (Assist.).

**49106** - Elbow, arthrodesis of, with synovectomy if performed (Anaes.) (Assist.).

**49124** - Excision of olecranon bursa, including bony prominence, other than a service associated with a service to which another item in this Schedule applies if the service described in the other item is for the purpose of an arthroscopic procedure of the elbow (Anaes.) (Assist.).

**49213** - Sauve-Kapandji procedure of distal radioulnar joint, including any of the following (if performed):

- (a) radioulnar fusion;
- (b) osteotomy;
- (c) soft tissue reconstruction

(Anaes.) (Assist.).

**49586** - Synovectomy of knee, by arthroscopic means, for neoplasia or inflammatory arthropathy, other than a service to which another item of this Schedule applies if the service described in the other item is for the purpose of treating uncomplicated osteoarthritis (Anaes.) (Assist.).

**49590** - Excision of ganglion, cyst or bursa of knee, by open or arthroscopic means, performed as an independent procedure, other than a service associated with a service to which another item in this Group applies (Anaes.) (Assist.).

**49803** - Secondary repair of flexor or extensor tendon of foot, including either or both of the following (if performed):

(a) synovial biopsy;

(b) synovectomy;

—one toe (Anaes.) (Assist)

**49809** - Open tenotomy or lengthening of foot, by open incision, with or without tenoplasty, including either or both of the following (if performed):

(a) synovial biopsy;

(b) synovectomy;

—one toe (Anaes.) (Assist)

**50203** - Intralesional or marginal excision of bone or soft tissue tumour (Anaes.) (Assist.).

**50224** - Wide excision of malignant or aggressive bone or soft tissue tumour (or both) of pelvis, sacrum or spine, with reconstruction of bone defect, or one or more joints, by any technique (Anaes.) (Assist.).

**50354** - Resection and fixation of congenital pseudarthrosis of tibia (Anaes.) (Assist.).

**50411** - Lower limb deficiency, treatment of congenital deficiency of the femur by resection of the distal femur and proximal tibia followed by knee fusion (Anaes.) (Assist.)

**50414** - Lower limb deficiency, treatment of congenital deficiency of the femur by resection of the distal femur and proximal tibia followed by knee fusion and rotationplasty (Anaes.) (Assist.)

**50417** - Lower limb deficiency, treatment of congenital deficiency of the tibia by reconstruction of the knee, involving transfer of fibula or tibia, and repair of quadriceps mechanism (Anaes.) (Assist.)

**50423** - Tibia, fibula or both, congenital deficiency of, transfer of the fibula to tibia, with internal fixation (Anaes.) (Assist.).

**50544** - Radius, with open growth plate, treatment of fracture of head or neck of, by closed reduction of (Anaes.).

**50576** - Treatment of fracture of femur, by closed reduction or traction, including application of hip spica (if performed), for a patient with open growth plate (Anaes.) (Assist.).

## Subgroup 16 – Tissue Ablation

**50950** - Unresectable primary malignant tumour of the liver, destruction of, by percutaneous ablation (including any associated imaging services), other than a service associated with a service to which item 30419 or 50952 applies (Anaes.).

**50952** - Unresectable primary malignant tumour of the liver, destruction of, by open or laparoscopic ablation (including any associated imaging services), if a multi-disciplinary team has assessed that percutaneous ablation cannot be performed or is not practical because of one or more of the following clinical circumstances:

- (a) percutaneous access cannot be achieved;
- (b) vital organs or tissues are at risk of damage from the percutaneous ablation procedure;
- (c) resection of one part of the liver is possible, however there is at least one primary liver tumour in an unresectable portion of the liver that is suitable for ablation;

other than a service associated with a service to which item 30419 or 50950 applies (Anaes.)

## Subgroup 17 – Spinal Surgery

**51110** - Spine, treatment of fracture, dislocation or fracture dislocation, with immobilisation by calipers or halo, not including application of skull tongs or calipers as part of operative positioning (Anaes.).

**51115** - Halo-femoral traction, as an independent procedure (Anaes.).

## Group T9 – Assistance at operations

### Subgroup - Assistance at operations

**51306** - Assistance at a birth involving Caesarean section.

**51309** - Assistance at a series or combination of operations that include “(Assist.)” and assistance at a birth involving Caesarean section

**51312** - Assistance at any interventional obstetric procedure covered by items 16606, 16609, 16612, 16615 and 16627

**51315** - Assistance at cataract and intraocular lens surgery covered by item 42698, 42701, 42702, 42704, 42705 or 42707, when performed in association with services covered by item 42551 to 42569, 42653, 42656, 42725, 42746, 42749, 42752, 42776 or 42779

**51318** - Assistance at cataract and intraocular lens surgery, if patient has:

- (a) total loss of vision, including no potential for central vision, in the fellow eye; or
- (b) one of the following in the fellow eye:
  - (i) vitreous loss;
  - (ii) rupture of posterior capsule;
  - (iii) loss of nuclear material into the vitreous;

- (iv) intraocular haemorrhage;
- (v) intraocular infection (endophthalmitis);
- (vi) cystoid macular oedema;
- (vii) corneal decompensation;
- (viii) retinal detachment; or

(c) pseudo exfoliation, subluxed lens, iridodonesis, phacodonesis, retinal detachment, corneal scarring, pre-existing uveitis, bound down miosed pupil, nanophthalmos, spherophakia, Marfan's syndrome, homocysteinuria or previous blunt trauma causing intraocular damage

## **Group T10 - Relative Value Guide For Anaesthesia - Medicare Benefits Are Only Payable For Anaesthesia Performed In Association With An Eligible Service.**

### **Subgroup 1 - Head**

**20102** - Initiation of the management of anaesthesia for plastic repair of cleft lip.

**20104** - Initiation of the management of anaesthesia for electroconvulsive therapy.

**20142** - Initiation of the management of anaesthesia for lens surgery

**20143** - Initiation of the management of anaesthesia for retinal surgery

**20144** - Initiation of the management of anaesthesia for corneal transplant

**20145** - Initiation of the management of anaesthesia for vitrectomy

**20147** - Initiation of the management of anaesthesia for squint repair.

**20162** - Initiation of the management of anaesthesia for intranasal surgery for malignancy or for intranasal ablation.

**20172** - Initiation of the management of anaesthesia for repair of cleft palate.

**20174** - Initiation of the management of anaesthesia for excision of retropharyngeal tumour

**20176** - Initiation of the management of anaesthesia for radical intraoral surgery

**20190** - Initiation of the management of anaesthesia for procedures on facial bones, other than a service to which another item in this Subgroup applies

**20192** - Initiation of the management of anaesthesia for extensive surgery on facial bones (including prognathism and extensive facial bone reconstruction)

**20210** - Initiation of the management of anaesthesia for intracranial procedures, other than a service to which another item in this Subgroup applies

**20212** - Initiation of the management of anaesthesia for subdural taps

**20214** - Initiation of the management of anaesthesia for burr holes of the cranium

**20216** - Initiation of the management of anaesthesia for intracranial vascular procedures, including those for aneurysms or arterio-venous abnormalities

**20220** - Initiation of the management of anaesthesia for spinal fluid shunt procedures

**20222** - Initiation of the management of anaesthesia for ablation of an intracranial nerve

**20225** - Initiation of the management of anaesthesia for all cranial bone procedures

**20230** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the head or face

## Subgroup 2 - Neck

**20320** - Initiation of the management of anaesthesia for procedures on oesophagus, thyroid, larynx, trachea, lymphatic system, muscles, nerves or other deep tissues of the neck, other than a service to which another item in this Subgroup applies.

**20321** - Initiation of the management of anaesthesia for laryngectomy, hemi laryngectomy, laryngopharyngectomy or pharyngectomy.

**20330** - Initiation of the management of anaesthesia for laser surgery to the airway (excluding nose and mouth).

**20350** - Initiation of the management of anaesthesia for procedures on major vessels of neck, other than a service to which another item in this Subgroup applies.

**20352** - Initiation of the management of anaesthesia for simple ligation of major vessels of neck.

**20355** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the neck.

## Subgroup 3 - Thorax

**20401** - Initiation of the management of anaesthesia for procedures on the breast, other than a service to which another item in this Subgroup applies.

**20402** - Initiation of the management of anaesthesia for reconstructive procedures on breast, including implant reconstruction and exchange.

**20403** - Initiation of the management of anaesthesia for axillary dissection or sentinel node biopsy.

**20404** - Initiation of the management of anaesthesia for mastectomy

**20405** - Initiation of the management of anaesthesia for reconstructive procedures on the breast using myocutaneous flaps.

**20406** - Initiation of the management of anaesthesia for radical or modified radical procedures on breast with internal mammary node dissection.

**20410** - Initiation of the management of anaesthesia for electrical conversion of arrhythmias.

**20450** - Initiation of the management of anaesthesia for procedures on clavicle, scapula or sternum, other than a service to which another item in this Subgroup applies.

**20452** - Initiation of the management of anaesthesia for radical surgery on clavicle, scapula or sternum.

**20470** - Initiation of the management of anaesthesia for partial rib resection, other than a service to which another item in this Subgroup applies.

**20472** - Initiation of the management of anaesthesia for thoracoplasty.

**20474** - Initiation of the management of anaesthesia for radical procedures on chest wall.



## Subgroup 4 - Intrathoracic

**20500** - Initiation of the management of anaesthesia for open procedures on the oesophagus.

**20522** - Initiation of the management of anaesthesia for needle biopsy of pleura.

**20524** - Initiation of the management of anaesthesia for pneumocentesis.

**20526** - Initiation of the management of anaesthesia for thoracoscopy.

**20528** - Initiation of the management of anaesthesia for mediastinoscopy.

**20540** - Initiation of the management of anaesthesia for thoracotomy procedures involving lungs, pleura, diaphragm, or mediastinum, other than a service to which another item in this Subgroup applies.

**20542** - Initiation of the management of anaesthesia for pulmonary decortication.

**20546** - Initiation of the management of anaesthesia for pulmonary resection with thoracoplasty.

**20548** - Initiation of the management of anaesthesia for intrathoracic repair of trauma to trachea and bronchi.

**20560** - Initiation of the management of anaesthesia for:

(a) open procedures on the heart, pericardium or great vessels of the chest; or

(b) percutaneous insertion of a valvular prosthesis

## Subgroup 5 – Spinal and spinal cord

**20600** - Initiation of the management of anaesthesia for procedures on cervical spine or spinal cord, or both, other than a service to which another item in this Subgroup applies.

**20604** - Initiation of the management of anaesthesia for posterior cervical laminectomy with the patient in the sitting position.

**20620** - Initiation of the management of anaesthesia for procedures on thoracic spine or spinal cord, or both, other than a service to which another item in this Subgroup applies.

**20622** - Initiation of the management of anaesthesia for thoracolumbar sympathectomy.

**20632** - Initiation of the management of anaesthesia for lumbar sympathectomy.

**20634** - Initiation of the management of anaesthesia for chemonucleolysis.

**20670** - Initiation of the management of anaesthesia for extensive spine or spinal cord procedures, or both.

**20680** - Initiation of the management of anaesthesia for manipulation of spine when performed in the operating theatre of a hospital.

**20690** - Initiation of the management of anaesthesia for percutaneous spinal procedures, other than a service to which another item in this Subgroup applies.

## Subgroup 6 – Upper abdomen

**20704** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the anterior or posterior upper abdomen.

**20706** - Initiation of the management of anaesthesia for laparoscopic procedures in the upper abdomen, including laparoscopic cholecystectomy, other than a service to which another item in this Subgroup applies.

**20740** - Initiation of the management of anaesthesia for upper gastrointestinal endoscopic procedures.

**20745** - Initiation of the management of anaesthesia for any of the following:

- (a) upper gastrointestinal endoscopic procedures in association with acute gastrointestinal haemorrhage;
- (b) endoscopic retrograde cholangiopancreatography;
- (c) upper gastrointestinal endoscopic ultrasound;
- (d) percutaneous endoscopic gastrostomy;
- (e) upper gastrointestinal endoscopic mucosal resection of tumour

**20752** - Initiation of the management of anaesthesia for repair of incisional hernia or wound dehiscence, or both.

**20754** - Initiation of the management of anaesthesia for procedures on an omphalocele.

**20756** - Initiation of the management of anaesthesia for transabdominal repair of diaphragmatic hernia.

**20770** - Initiation of the management of anaesthesia for procedures on major upper abdominal blood vessels.

**20790** - Initiation of the management of anaesthesia for procedures within the peritoneal cavity in the upper abdomen, including any of the following:

- (a) open cholecystectomy;
- (b) gastrectomy;

- (c) laparoscopic assisted nephrectomy;
- (d) bowel shunts

**20791** - Initiation of the management of anaesthesia for bariatric surgery in a patient with clinically severe obesity

**20792** - Initiation of the management of anaesthesia for partial hepatectomy (excluding liver biopsy).

**20793** - Initiation of the management of anaesthesia for extended or trisegmental hepatectomy.

**20794** - Initiation of the management of anaesthesia for pancreatectomy, partial or total

**20798** - Initiation of the management of anaesthesia for neuro endocrine tumour removal in the upper abdomen

## Subgroup 7 – Lower abdomen

**20806** - Initiation of the management of anaesthesia for laparoscopic procedures in the lower abdomen.

**20810** - Initiation of the management of anaesthesia for lower intestinal endoscopic procedures.

**20830** - Initiation of the management of anaesthesia for hernia repairs in lower abdomen, other than a service to which another item in this Subgroup applies.

**20840** - Initiation of the management of anaesthesia for all open procedures within the peritoneal cavity in the lower abdomen, including appendicectomy, other than a service to which another item in this Subgroup applies.

**20841** - Initiation of the management of anaesthesia for bowel resection, including laparoscopic bowel resection, other than a service to which another item in this Subgroup applies.

**20844** - Initiation of the management of anaesthesia for abdominoperineal resection, including pull through procedures, ultra low anterior resection and formation of bowel reservoir

**20845** - Initiation of the management of anaesthesia for radical prostatectomy.

**20846** - Initiation of the management of anaesthesia for radical hysterectomy.

**20847** - Initiation of the management of anaesthesia for ovarian malignancy.

**20848** - Initiation of the management of anaesthesia for pelvic exenteration.

**20850** - Initiation of the management of anaesthesia for caesarean section.

**20855** - Initiation of the management of anaesthesia for caesarean hysterectomy or hysterectomy within 24 hours of birth.

**20860** - Initiation of the management of anaesthesia for extraperitoneal procedures in lower abdomen, including those on the urinary tract, other than a service to which another item in this Subgroup applies.

**20862** - Initiation of the management of anaesthesia for renal procedures, including upper one-third of ureter.

**20863** - Initiation of the management of anaesthesia for nephrectomy

**20864** - Initiation of the management of anaesthesia for total cystectomy.

**20866** - Initiation of the management of anaesthesia for adrenalectomy.

**20867** - Initiation of the management of anaesthesia for neuro endocrine tumour removal in the lower abdomen.

**20868** - Initiation of the management of anaesthesia for renal transplantation (donor or recipient).

**20880** - Initiation of the management of anaesthesia for procedures on major lower abdominal vessels, other than a service to which another item in this Subgroup applies.

**20882** - Initiation of the management of anaesthesia for inferior vena cava ligation.

**20884** - Initiation of the management of anaesthesia for percutaneous umbrella insertion.

## Subgroup 8 – Perineum

**20902** - Initiation of the management of anaesthesia for anorectal procedures (including surgical haemorrhoidectomy, but not banding of haemorrhoids).

**20904** - Initiation of the management of anaesthesia for radical perineal procedures, including radical perineal prostatectomy or radical vulvectomy.

**20905** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the perineum.

**20906** - Initiation of the management of anaesthesia for vulvectomy.

**20911** - Initiation of the management of anaesthesia for endoscopic ureteroscopic surgery including laser procedures.

**20912** - Initiation of the management of anaesthesia for transurethral resection of bladder tumour or tumours.

**20914** - Initiation of the management of anaesthesia for transurethral resection of prostate.

**20916** - Initiation of the management of anaesthesia for bleeding post-transurethral resection.

**20924** - Initiation of the management of anaesthesia for procedures on undescended testis, unilateral or bilateral.

**20926** - Initiation of the management of anaesthesia for radical orchidectomy, inguinal approach.

**20928** - Initiation of the management of anaesthesia for radical orchidectomy, abdominal approach.

**20930** - Initiation of the management of anaesthesia for orchiopexy, unilateral or bilateral.

**20932** - Initiation of the management of anaesthesia for complete amputation of penis.

**20934** - Initiation of the management of anaesthesia for complete amputation of penis with bilateral inguinal lymphadenectomy.

**20936** - Initiation of the management of anaesthesia for complete amputation of penis with bilateral inguinal and iliac lymphadenectomy.

**20938** - Initiation of the management of anaesthesia for insertion of penile prosthesis.

**20942** - Initiation of the management of anaesthesia for vaginal procedures (including repair operations and urinary incontinence procedures).

**20944** - Initiation of the management of anaesthesia for vaginal hysterectomy.

**20954** - Initiation of the management of anaesthesia for correction of inverted uterus.

**20956** - Initiation of the management of anaesthesia for evacuation of retained products of conception, as a complication of confinement.

**20960** - Initiation of the management of anaesthesia for vaginal procedures in the management of post-partum haemorrhage, if the blood loss is greater than 500 ml.

### **Subgroup 9 – Pelvis (except hip)**

**21116** - Initiation of the management of anaesthesia for percutaneous bone marrow harvesting from the pelvis.

**21120** - Initiation of the management of anaesthesia for procedures on the bony pelvis.

**21130** - Initiation of the management of anaesthesia for body cast application or revision, when performed in the operating theatre of a hospital.

**21140** - Initiation of the management of anaesthesia for interpelviabdominal (hindquarter) amputation.

**21150** - Initiation of the management of anaesthesia for radical procedures for tumour of the pelvis, except hindquarter amputation.



**21155** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the anterior or posterior pelvis.

**21160** - Initiation of the management of anaesthesia for closed procedures involving symphysis pubis or sacroiliac joint, when performed in the operating theatre of a hospital

**21170** - Initiation of the management of anaesthesia for open procedures involving symphysis pubis or sacroiliac joint

### **Subgroup 10 – Upper leg (except knee)**

**21200** - Initiation of the management of anaesthesia for closed procedures involving hip joint, when performed in the operating theatre of a hospital.

**21202** - Initiation of the management of anaesthesia for arthroscopic procedures of the hip joint.

**21210** - Initiation of the management of anaesthesia for open procedures involving hip joint, other than a service to which another item in this Subgroup applies.

**21212** - Initiation of the management of anaesthesia for hip disarticulation.

**21214** - Initiation of the management of anaesthesia for primary total hip replacement.

**21215** - Initiation of management of anaesthesia for revision total hip replacement.

**21216** - Initiation of the management of anaesthesia for bilateral total hip replacement.

**21220** - Initiation of the management of anaesthesia for closed procedures involving upper two-thirds of femur, when performed in the operating theatre of a hospital.

**21230** - Initiation of the management of anaesthesia for open procedures involving upper two-thirds of femur, other than a service to which another item in this Subgroup applies.

**21232** - Initiation of the management of anaesthesia for above knee amputation.

**21234** - Initiation of the management of anaesthesia for radical resection of the upper two-thirds of femur.

**21270** - Initiation of the management of anaesthesia for procedures involving arteries of upper leg, including bypass graft, other than a service to which another item in this Subgroup applies.

**21272** - Initiation of the management of anaesthesia for femoral artery ligation.

**21274** - Initiation of the management of anaesthesia for femoral artery embolectomy.

**21275** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the upper leg.

**21280** - Initiation of the management of anaesthesia for microsurgical reimplantation of upper leg.

## **Subgroup 11 – Knee and popliteal area**

**21340** - Initiation of the management of anaesthesia for closed procedures on lower one-third of femur, when performed in the operating theatre of a hospital.

**21360** - Initiation of the management of anaesthesia for open procedures on lower one-third of femur.

**21380** - Initiation of the management of anaesthesia for closed procedures on knee joint when performed in the operating theatre of a hospital.

**21382** - Initiation of the management of anaesthesia for arthroscopic procedures of knee joint.

**21390** - Initiation of the management of anaesthesia for closed procedures on upper ends of tibia, fibula or patella, or any of them, when performed in the operating theatre of a hospital.

**21392** - Initiation of the management of anaesthesia for open procedures on upper ends of tibia, fibula or patella, or any of them.

**21400** - Initiation of the management of anaesthesia for open procedures on knee joint, other than a service to which another item in this Subgroup applies.

**21402** - Initiation of the management of anaesthesia for knee replacement.

**21403** - Initiation of the management of anaesthesia for bilateral knee replacement.

**21404** - Initiation of the management of anaesthesia for disarticulation of knee.

**21420** - Initiation of the management of anaesthesia for cast application, removal or repair, involving knee joint, undertaken in a hospital.

**21430** - Initiation of the management of anaesthesia for procedures on veins of knee or popliteal area, other than a service to which another item in this Subgroup applies.

**21432** - Initiation of the management of anaesthesia for repair of arteriovenous fistula of knee or popliteal area.

**21440** - Initiation of the management of anaesthesia for procedures on arteries of knee or popliteal area, other than a service to which another item in this Subgroup applies.

**21445** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the knee or popliteal area.

## **Subgroup 12 – Lower leg (below knee)**

**21464** - Initiation of the management of anaesthesia for arthroscopic procedure of ankle joint.

**21472** - Initiation of the management of anaesthesia for repair of Achilles tendon.

**21474** - Initiation of the management of anaesthesia for gastrocnemius recession.

**21480** - Initiation of the management of anaesthesia for open procedures on bones of lower leg, ankle or foot, including amputation, other than a service to which another item in this Subgroup applies.

**21482** - Initiation of the management of anaesthesia for radical resection of bone involving lower leg, ankle or foot.

**21484** - Initiation of the management of anaesthesia for osteotomy or osteoplasty of tibia or fibula.

**21486** - Initiation of the management of anaesthesia for total ankle replacement.

**21490** - Initiation of the management of anaesthesia for lower leg cast application, removal or repair, undertaken in a hospital.

**21500** - Initiation of the management of anaesthesia for procedures on arteries of lower leg, including bypass graft, other than a service to which another item in this Subgroup applies.

**21502** - Initiation of the management of anaesthesia for embolectomy of the lower leg.

**21522** - Initiation of the management of anaesthesia for venous thrombectomy of the lower leg.

**21530** - Initiation of the management of anaesthesia for microsurgical reimplantation of lower leg, ankle or foot.

**21532** - Initiation of the management of anaesthesia for microsurgical reimplantation of toe.

**21535** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the lower leg.

### **Subgroup 13 – Shoulder and axilla**

**21620** - Initiation of the management of anaesthesia for closed procedures on humeral head and neck, sternoclavicular joint, acromioclavicular joint or shoulder joint, when performed in the operating theatre of a hospital.

**21622** - Initiation of the management of anaesthesia for arthroscopic procedures of shoulder joint.

**21630** - Initiation of the management of anaesthesia for open procedures on humeral head and neck, sternoclavicular joint, acromioclavicular joint or shoulder joint, other than a service to which another item in this Subgroup applies.

**21632** - Initiation of the management of anaesthesia for radical resection involving humeral head and neck, sternoclavicular joint, acromioclavicular joint or shoulder joint.

**21634** - Initiation of the management of anaesthesia for shoulder disarticulation.

**21636** - Initiation of the management of anaesthesia for interthoracoscaphular (forequarter) amputation.

**21638** - Initiation of the management of anaesthesia for total shoulder replacement.

**21650** - Initiation of the management of anaesthesia for procedures on arteries of shoulder or axilla, other than a service to which another item in this Subgroup applies.

**21652** - Initiation of the management of anaesthesia for procedures for axillary-brachial aneurysm.

**21654** - Initiation of the management of anaesthesia for bypass graft of arteries of shoulder or axilla.

**21656** - Initiation of the management of anaesthesia for axillary-femoral bypass graft.

**21670** - Initiation of the management of anaesthesia for procedures on veins of shoulder or axilla.

**21680** - Initiation of the management of anaesthesia for shoulder cast application, removal or repair, other than a service to which another item in this Subgroup applies, when undertaken in a hospital.

**21682** - Initiation of the management of anaesthesia for shoulder spica application, when undertaken in a hospital.

**21685** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the shoulder or axilla.

## Subgroup 14 – Upper arm and elbow

**21712** - Initiation of the management of anaesthesia for open tenotomy of the upper arm or elbow.

**21714** - Initiation of the management of anaesthesia for tenoplasty of the upper arm or elbow.

**21716** - Initiation of the management of anaesthesia for tenodesis for rupture of long tendon of biceps.

**21730** - Initiation of the management of anaesthesia for closed procedures on the upper arm or elbow, when performed in the operating theatre of a hospital.

**21732** - Initiation of the management of anaesthesia for arthroscopic procedures of elbow joint.

**21756** - Initiation of the management of anaesthesia for radical procedures on the upper arm or elbow.

**21760** - Initiation of the management of anaesthesia for total elbow replacement.

**21772** - Initiation of the management of anaesthesia for embolectomy of arteries of the upper arm.

**21785** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the upper arm or elbow.

**21790** - Initiation of the management of anaesthesia for microsurgical reimplantation of upper arm.

## Subgroup 15 – Forearm wrist and hand

**21820** - Initiation of the management of anaesthesia for closed procedures on the radius, ulna, wrist, or hand bones, when performed in the operating theatre of a hospital.

**21830** - Initiation of the management of anaesthesia for open procedures on the radius, ulna, wrist, or hand bones, other than a service to which another item in this Subgroup applies.

**21832** - Initiation of the management of anaesthesia for total wrist replacement.

**21834** - Initiation of the management of anaesthesia for arthroscopic procedures of the wrist joint.

**21840** - Initiation of the management of anaesthesia for procedures on the arteries of forearm, wrist or hand, other than a service to which another item in this Subgroup applies.

**21842** - Initiation of the management of anaesthesia for embolectomy of artery of forearm, wrist or hand.

**21860** - Initiation of the management of anaesthesia for forearm, wrist, or hand cast application, removal or repair, when undertaken in a hospital.

**21865** - Initiation of the management of anaesthesia for microvascular free tissue flap surgery involving the forearm, wrist or hand.

**21870** - Initiation of the management of anaesthesia for microsurgical reimplantation of forearm, wrist or hand.

**21872** - Initiation of the management of anaesthesia for microsurgical reimplantation of a finger.



## Subgroup 16 - Anaesthesia for burns

**21879** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves more than 3% but less than 10% of total body surface.

**21880** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 10% or more but less than 20% of total body surface.

**21881** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 20% or more but less than 30% of total body surface.

**21882** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 30% or more but less than 40% of total body surface.

**21883** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 40% or more but less than 50% of total body surface.

**21884** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 50% or more but less than 60% of total body surface.

**21885** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 60% or more but less than 70% of total body surface.

**21886** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 70% or more but less than 80% of total body surface.

**21887** - Initiation of the management of anaesthesia for excision or debridement of burns, with or without skin grafting, if the area of burn involves 80% or more of total body surface.

## Subgroup 17 - Anaesthesia for radiological or other diagnostic or therapeutic procedures

**21910** - Initiation of the management of anaesthesia for injection procedure for myelography—posterior fossa.

**21915** - Initiation of the management of anaesthesia for peripheral arteriogram.

**21916** - Initiation of the management of anaesthesia for arteriograms—cerebral, carotid or vertebral.

**21925** - Initiation of the management of anaesthesia for retrograde cystography, retrograde urethrography or retrograde cystourethrography.

**21930** - Initiation of the management of anaesthesia for bronchography.

**21936** - Initiation of the management of anaesthesia for heart—2 dimensional real time transoesophageal examination.

**21941** - Initiation of the management of anaesthesia for cardiac catheterisation (including coronary arteriography, ventriculography, cardiac mapping or insertion of automatic defibrillator or transvenous pacemaker).

**21942** - Initiation of the management of anaesthesia for cardiac electrophysiological procedures including radio frequency ablation.

**21943** - Initiation of the management of anaesthesia for central vein catheterisation or insertion of right heart balloon catheter (via jugular, subclavian or femoral vein) by percutaneous or open exposure.

**21952** - Initiation of the management of anaesthesia for diagnostic muscle biopsy to assess for malignant hyperpyrexia.

## Subgroup 19 - Therapeutic and diagnostic services performed in connection with the management of anaesthesia.

**22002** - Administration of homologous blood or bone marrow already collected, when performed in association with the management of anaesthesia.

**22007** - Endotracheal intubation with flexible fiberoptic scope associated with difficult airway, when performed in association with the management of anaesthesia

**22008** - Double lumen endobronchial tube or bronchial blocker, insertion of, when performed in association with the management of anaesthesia

**22012** - Monitoring that:

(a) is of one of the following types of blood pressure:

- (i) central venous blood pressure;
  - (ii) pulmonary arterial blood pressure;
  - (iii) systemic arterial blood pressure;
  - (iv) cardiac intracavity blood pressure; and
- (b) is conducted by indwelling catheter; and

(c) is performed in association with the administration of anaesthesia for a procedure and not as a service to which item 13876 applies; and

(d) is performed, on a day, on a patient who:

- (i) is categorised as having a high risk of complications; or
- (ii) during the procedure develops either complications or a high risk of complications; and

(e) has not previously been performed in those circumstances on the day on the patient for that type of blood pressure

**22014** - Monitoring that:

(a) is of one of the following types of blood pressure:

- (i) central venous blood pressure;

- (ii) pulmonary arterial blood pressure;
  - (iii) systemic arterial blood pressure;
  - (iv) cardiac intracavity blood pressure; and
- (b) is conducted by indwelling catheter; and
- (c) is performed in association with the administration of anaesthesia for a procedure (the current procedure) and not as a service to which item 13876 applies; and
- (d) is performed, on a day, on a patient:
- (i) who is categorised as having a high risk of complications or develops during the current procedure either complications or a high risk of complications; and
  - (ii) for whom monitoring of that type of blood pressure to which item 22012 applies has already been performed on the day in association with the administration of anaesthesia for another discrete procedure; and
- (e) has not previously been performed in association with the current procedure for that type of blood pressure

**22015** - Right heart balloon catheter, insertion of, including pulmonary wedge pressure and cardiac output measurement, when performed in association with the management of anaesthesia

**22020** - Central vein catheterisation by percutaneous or open exposure, other than a service to which item 13318 applies, when performed in association with the management of anaesthesia.

**22025** - Intra-arterial cannulation when performed in association with the management of anaesthesia for a procedure for a patient who:

- (a) is categorised as having a high risk of complications; or
- (b) develops a high risk of complications during the procedure

**22031** - Intrathecal or epidural injection (initial) of a therapeutic substance, with or without insertion of a catheter, in association with anaesthesia and surgery, for post-operative pain management, other than a service associated with a service to which item 22036 applies

**22036** - Intrathecal or epidural injection (subsequent) of a therapeutic substance, using an in-situ catheter, in association with anaesthesia and surgery, for post-operative pain, other than a service associated with a service to which item 22031 applies.

**22041** - Introduction of a plexus or nerve block proximal to the lower leg or forearm, perioperatively performed in the induction room, theatre or recovery room, for post-operative pain management.

**22051** - Intra-operative transoesophageal echocardiography—monitoring in real time the structure and function of the heart chambers, valves and surrounding structures, including assessment of blood flow, with appropriate permanent recording during procedures on the heart, pericardium or great vessels of the chest, other than a service associated with a service to which item 55130, 55135 or 21936 applies.

**22055** - Perfusion of limb or organ using heart-lung machine or equivalent, other than a service associated with anaesthesia to which an item in Subgroup 21 applies.

**22060** - Whole body perfusion, cardiac bypass, if the heart-lung machine or equivalent is continuously operated by a medical perfusionist, other than a service associated with anaesthesia to which an item in Subgroup 21 applies.

**22065** - Induced controlled hypothermia—total body, that is:

- (a) a service to which item 22060 applies; and
- (b) not a service associated with anaesthesia, to which an item in Subgroup 21 applies

**22075** - Deep hypothermic circulatory arrest, with core temperature less than 22°C, including management of retrograde cerebral perfusion (if performed), other than a service associated with anaesthesia to which an item in Subgroup 21 applies.

## Subgroup 21 - Anaesthesia, perfusion, and assistance at anaesthesia (time component)

**23010** - Anaesthesia, perfusion, or assistance, if the service time is not more than 15 minutes.

## Subgroup 22 - Anaesthesia, perfusion, and assistance at anaesthesia (modifying components—physical status)

**25000** - Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient has severe systemic disease (equivalent to ASA physical status indicator 3).

**25005** - Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient has severe systemic disease which is a constant threat to life (equivalent to ASA physical status indicator 4).

**25010** - Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient is not expected to survive for 24 hours, with or without the associated operation (equivalent to ASA physical status indicator 5).

## Subgroup 23—Anaesthesia, perfusion, and assistance at anaesthesia (modifying components—other)

**25013** - Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient is aged under 4 years.

**25014** - Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient is aged 75 years or more.

**25020** - Anaesthesia, perfusion or assistance in the management of anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part—other than a service associated with a service to which item 25025, 25030 or 25050 applies.

## Subgroup 24—Anaesthesia and assistance at anaesthesia (after hours emergency modifier)

**25025** - Anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday.

**25030** - Assistance in the management of anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday.

## Subgroup 25—Perfusion (after hours emergency modifier)

**25050** - Perfusion, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday.

## Subgroup 26—Assistance at anaesthesia

**25200** - Assistance in the management of anaesthesia requiring continuous anaesthesia on a patient in imminent danger of death requiring continuous life saving emergency treatment, to the exclusion of attendance on all other patients

**25205** - Assistance in the management of elective anaesthesia, if:

- (a) the patient has complex airway problems; or
- (b) the patient is a neonate; or
- (c) the patient is a paediatric patient and is receiving one or more of the following services:
  - (i) invasive monitoring, either intravascular or transoesophageal;
  - (ii) organ transplantation;
  - (iii) craniofacial surgery;
  - (iv) major tumour resection;

- (v) separation of conjoint twins; or
- (d) there is anticipated to be massive blood loss (greater than 50% of blood volume) during the procedure; or
- (e) the patient is critically ill, with multiple organ failure; or
- (f) the service time of the management of anaesthesia exceeds 6 hours and the assistance is provided to the exclusion of attendance on all other patients.

## Category 4 - Oral and maxillofacial services

### Group O2 – Assistance at operation

#### Assistance at operations

**51800** - Assistance by an approved dental practitioner in the practice of oral and maxillofacial surgery at any operation mentioned in an item that includes “(Assist.)” for which the fee does not exceed \$636.05 or at a series or combination of operations mentioned in an item in Groups O3 to O9 that include “(Assist.)” for which the aggregate fee does not exceed \$636.05.

### Group O3 – General surgery

#### General surgery

**51902** - Wounds of the oral and maxillofacial region, dressing of, under general anaesthesia, with or without removal of sutures, other than a service associated with a service to which another item in Groups O3 to O9 applies (Anaes.).

**52048** - Tumour or deep cyst (other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5 mm separation between the cyst lining and tooth structure or if a tumour or cyst has been proven by positive histopathology), removal of, requiring wide excision, other than a service to which another item in Groups O3 to O9 applies (Anaes.) (Assist.).

**52051** - Tumour, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, without skin or mucosal graft (Anaes.) (Assist.).



**52054** - Tumour, removal of, from soft tissue (including muscle, fascia and connective tissue), extensive excision of, with skin or mucosal graft (Anaes.) (Assist.).

**52057** - Large haematoma, large abscess, carbuncle, cellulitis or similar lesion in the oral and maxillofacial region, incision with drainage of (excluding after-care) (Anaes.).

**52061** - Muscle, in the oral and maxillofacial region, ruptured, repair of (limited), not associated with external wound (Anaes.).

**52062** - Muscle, in the oral and maxillofacial region, ruptured, repair of (extensive), not associated with external wound (Anaes.) (Assist.).

**52066** - Submandibular gland, extirpation of (Anaes.) (Assist.).

**52069** - Sublingual gland, extirpation of (Anaes.).

**52078** - Tongue, partial excision of (Anaes.) (Assist.).

**52092** - Operation on skull for osteomyelitis (Anaes.) (Assist.).

**52094** - Operation on any combination of adjoining bones in the oral and maxillofacial region, being bones referred to in item 52092 (Anaes.) (Assist.).

**52095** - Bone growth stimulator in the oral and maxillofacial region, insertion of (Anaes.) (Assist.).

**52098** - External fixation in the oral and maxillofacial region, removal of, in conjunction with operations involving internal fixation or bone grafting or both (Anaes.).

**52102** - Buried wire, pin or screw, one or more, which were inserted for internal fixation purposes into maxilla or mandible or zygoma, removal of, requiring anaesthesia, incision, dissection and suturing, if undertaken in the operating theatre of a hospital, per bone (Anaes.).

**52105** - Plate, one or more of, and associated screw and wire which were inserted for internal fixation purposes into maxilla or mandible or zygoma, removal of, requiring anaesthesia, incision, dissection and suturing, per bone, other than a service associated with a service to which item 52099 or 52102 applies (Anaes.) (Assist.).

**52114** - Mandible or maxilla, segmental resection of, for tumours or cysts (Anaes.) (Assist.).

**52117** - Mandible, including lower border, or maxilla, sub-total resection of (Anaes.) (Assist.).

**52120** - Mandible, hemimandiblectomy of, including condylectomy, if performed (Anaes.) (Assist.).

**52122** - Mandible, hemi-mandibular reconstruction of, or maxilla reconstruction of, with bone graft, plate, tray or alloplast, other than a service associated with a service to which item 52123 applies (Anaes.) (Assist.).

**52123** - Mandible, total resection of both sides, including condylectomies if performed (Anaes.) (Assist.).

**52126** - Maxilla, total resection of (Anaes.) (Assist.).

**52129** - Maxilla, total resection of both maxillae (Anaes.) (Assist.).

**52130** - Bone graft in the oral and maxillofacial region, other than a service to which another item in Groups O3 to O9 applies (Anaes.) (Assist.).

**52131** - Bone graft with internal fixation, in the oral and maxillofacial region, other than a service to which another item in the range 51900 to 52186, or the range 52303 to 53460, applies (Anaes.) (Assist.)

**52138** - Maxillary artery, ligation of (Anaes.) (Assist.)

**52141** - Facial, mandibular or lingual artery or vein or artery and vein, ligation of, other than a service to which item 52138 applies (Anaes.) (Assist.)

**52144** - Foreign body, deep, removal of using interventional imaging techniques (Anaes.) (Assist.)

**52147** - Duct of major salivary gland, transposition of (Anaes.) (Assist.)

**52148** - Parotid duct, repair of, using micro-surgical techniques (Anaes.) (Assist.)

**52158** - Submandibular ducts, relocation of, for surgical control of drooling (Anaes.) (Assist.)

**52182** - Bone or malignant deep soft tissue tumour in the oral and maxillofacial region, lesional or marginal excision of (Anaes.) (Assist.)

**52184** - Bone tumour in the oral and maxillofacial region, lesional or marginal excision of, combined with any one of liquid nitrogen freezing, autograft, allograft or cementation (Anaes.) (Assist.)

**52186** - Bone tumour in the oral and maxillofacial region, lesional or marginal excision of, combined with any 2 or more of liquid nitrogen freezing, autograft, allograft or cementation (Anaes.) (Assist.).

## Group O4 - Plastic and reconstructive surgery

### Plastic and reconstructive surgery

**52303** - Single-stage local flap, if indicated, repair to one defect, with buccal pad of fat (Anaes.) (Assist.).

**52306** - Single-stage local flap, if indicated, repair to one defect, using temporalis muscle (Anaes.) (Assist.).

**52318** - Bone graft, harvesting of, via separate incision, being a service associated with a service to which another item in Groups O3 to O9 applies—Autogenous, small quantity (Anaes.).

**52319** - Bone graft, harvesting of, via separate incision, being a service associated with a service to which another item in Groups O3 to O9 applies—Autogenous, large quantity (Anaes.).

**52321** - Foreign implant (non-biological), insertion of, for contour reconstruction of pathological deformity, other than a service associated with a service to which item 52624 applies (Anaes.) (Assist.).

**52324** - Direct flap repair, using tongue, first stage (Anaes.) (Assist.).

**52327** - Direct flap repair, using tongue, second stage (Anaes.).

**52330** - Palatal defect (oro-nasal fistula), plastic closure of, including services to which item 52300, 52303, 52306 or 52324 applies (Anaes.) (Assist.).

**52333** - Cleft palate, primary repair (Anaes.) (Assist.).

**52336** - Cleft palate, secondary repair, closure of fistula using local flaps (Anaes.) (Assist.).

**52337** - Alveolar cleft (congenital) unilateral, grafting of, including plastic closure of associated oro-nasal fistulae and ridge augmentation (Anaes.) (Assist.).

**52339** - Cleft palate, secondary repair, lengthening procedure (Anaes.) (Assist.).

**52378** - Genioplasty including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.).

**52379** - Face, contour reconstruction of one region, using autogenous bone or cartilage graft (Anaes.) (Assist.).

**52380** - Midfacial osteotomies—Le Fort II, Modified Le Fort III (Nasomalar), Modified Le Fort III (Malar-Maxillary), Le Fort III involving 3 or more osteotomies of the midface including transposition of nerves and vessels and bone grafts taken from the same site (Anaes.) (Assist.).

**52382** - Midfacial osteotomies—Le Fort II, Modified Le Fort III (Nasomalar), Modified Le Fort III (Malar-Maxillary), Le Fort III involving 3 or more osteotomies of the midface including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination (Anaes.) (Assist.).

**52420** - Mandible, fixation by intermaxillary wiring, excluding wiring for obesity

**52424** - Dermis, dermofat or fascia graft (excluding transfer of fat by injection) in the oral and maxillofacial region (Anaes.) (Assist.).

**52430** - Microvascular repair of the oral and maxillofacial region using microsurgical techniques, with restoration of continuity of artery or vein of distal extremity or digit (Anaes.) (Assist.).

**52440** - Cleft lip, unilateral—primary repair, one stage, without anterior palate repair (Anaes.) (Assist.).

**52442** - Cleft lip, unilateral—primary repair, one stage, with anterior palate repair (Anaes.) (Assist.).

**52444** - Cleft lip, bilateral—primary repair, one stage, without anterior palate repair (Anaes.) (Assist.).

**52446** - Cleft lip, bilateral—primary repair, one stage, with anterior palate repair (Anaes.) (Assist.).

**52450** - Cleft lip, partial revision, including minor flap revision alignment and adjustment, including revision of minor whistle deformity if performed (Anaes.).

**52452** - Cleft lip, total revision, including major flap revision, muscle reconstruction and revision of major whistle deformity (Anaes.) (Assist.).

**52456** - Cleft lip reconstruction using full thickness flap (Abbe or similar), first stage (Anaes.) (Assist.).

**52458** - Cleft lip reconstruction using full thickness flap (Abbe or similar), second stage (Anaes.).

**52460** - Velo-pharyngeal incompetence, pharyngeal flap for, or pharyngoplasty for (Anaes.).

**52480** - Composite graft (chondro-cutaneous or chondro-mucosal) to nose, ear or eyelid (Anaes.) (Assist.).

**52482** - Macrocheilia or macroglossia, operation for (Anaes.) (Assist.).

**52484** - Macrostomia, operation for (Anaes.) (Assist.).

## Group O5 - Preprosthetic

### Preprosthetic

**52603** - Mylohyoid ridge, reduction of (Anaes.) (Assist.).

**52612** - Papillary hyperplasia of the palate, removal of—5 to 20 lesions (Anaes.) (Assist.).

**52615** - Papillary hyperplasia of the palate, removal of—more than 20 lesions (Anaes.) (Assist.).

**52626** - Alveolar ridge augmentation—unilateral, insertion of tissue expanding device into maxillary or mandibular alveolar ridge region for (Anaes.) (Assist.).

## Group O6 - Neurosurgical

### Neurosurgical

**52800** - Neurolysis by open operation, without transposition, other than a service associated with a service to which item 52803 applies (Anaes.) (Assist.).

**52803** - Nerve trunk, internal (interfascicular), neurolysis of, using microsurgical techniques (Anaes.) (Assist.).

**52809** - Neurectomy, neurotomy or removal of tumour from deep peripheral nerve (Anaes.) (Assist.).

**52812** - Nerve trunk, primary repair of, using microsurgical techniques (Anaes.) (Assist.).

**52815** - Nerve trunk, secondary repair of, using microsurgical techniques (Anaes.) (Assist.).

**52818** - Nerve, transposition of (Anaes.) (Assist.).

**52821** - Nerve graft to nerve trunk (cable graft) including harvesting of nerve graft using microsurgical techniques (Anaes.) (Assist.).

**52828** - Cutaneous nerve, primary repair of, using microsurgical techniques (Anaes.) (Assist.).

**52830** - Cutaneous nerve, secondary repair of, using microsurgical techniques (Anaes.) (Assist.).

## Group O7 – Ear, nose and throat

### Ear, nose, and throat

**53003** - Maxillary antrum, proof puncture and lavage of, under general anaesthesia, other than a service associated with a service to which another item in Groups O3 to O9 applies (Anaes.).

**53006** - Antrostomy (radical) (Anaes.) (Assist.).

**53015** - Oro-antral fistula, plastic closure of (Anaes.) (Assist.).

**53016** - Nasal septum, septoplasty, submucous resection or closure of septal perforation (Anaes.) (Assist.).

**53017** - Nasal septum, reconstruction of (Anaes.) (Assist.).

**53019** - Maxillary sinus, bone graft to floor of maxillary sinus following elevation of mucosal lining (sinus lift procedure), unilateral (Anaes.) (Assist.).

**53056** - Examination of nasal cavity or post-nasal space, or nasal cavity and post-nasal space, under general anaesthesia, other than a service associated with a service to which another item in this Group applies (Anaes.).

**53060** - Cauterisation (other than by chemical means) or cauterisation by chemical means when performed under general anaesthesia or diathermy of septum or turbinates for obstruction or



haemorrhage secondary to surgery (or trauma)—one or more of these procedures (including any consultation on the same occasion) other than a service associated with another operation on the nose (Anaes.).

**53068** - Turbinectomy or turbinectomies, partial or total, unilateral (Anaes.).

**53070** - Turbinates, submucous resection of, unilateral (Anaes.).

## Group O8 - Temporomandibular joint

### Temporomandibular joint

**53203** - Mandible, treatment of a dislocation of, requiring open reduction (Anaes.)

**53209** - Glenoid fossa, zygomatic arch and temporal bone, reconstruction of (Obwegeser technique) (Anaes.) (Assist.).

**53212** - Absent condyle and ascending ramus in hemifacial microsomia, construction of, not including harvesting of graft material (Anaes.) (Assist.).

**53215** - Temporomandibular joint, arthroscopy of, with or without biopsy, other than a service associated with another arthroscopic procedure of that joint (Anaes.) (Assist.).

**53218** - Temporomandibular joint, arthroscopy of, removal of loose bodies, debridement, or treatment of adhesions—one or more of such procedures (Anaes.) (Assist.).

**53220** - Temporomandibular joint, arthrotomy of, other than a service to which another item in this Group applies (Anaes.) (Assist.).

**53221** - Temporomandibular joint, open surgical exploration of, with or without microsurgical techniques (Anaes.) (Assist.).

**53224** - Temporomandibular joint, open surgical exploration of, with condylectomy or condylotomy, with or without microsurgical techniques (Anaes.) (Assist.).

**53225** - Arthrocentesis, irrigation of temporomandibular joint after insertion of 2 cannuli into the appropriate joint space (Anaes.) (Assist.)

**53226** - Temporomandibular joint, synovectomy of, other than a service to which another item in this Group applies (Anaes.) (Assist.).

**53227** - Temporomandibular joint, open surgical exploration of, with or without meniscus or capsular surgery, including meniscectomy when performed, with or without microsurgical techniques (Anaes.) (Assist.)

**53230** - Temporomandibular joint, open surgical exploration of, with meniscus, capsular and condylar head surgery, with or without microsurgical techniques (Anaes.) (Assist.).

**53233** - Temporomandibular joint, surgery of, involving procedures to which item 53224, 53226, 53227 or 53230 applies and also involving the use of tissue flaps, or cartilage graft, or allograft implants, with or without microsurgical techniques (Anaes.) (Assist.)

**53236** - Temporomandibular joint, stabilisation of, involving one or more of: repair of capsule, repair of ligament or internal fixation, other than a service to which another item in this Group applies (Anaes.) (Assist.)

**53239** - Temporomandibular joint, arthrodesis of, other than a service to which another item in this Group applies (Anaes.) (Assist.)

**53242** - Temporomandibular joint or joints, application of external fixator to, other than for treatment of fractures (Anaes.) (Assist.)

## Group O9 – Treatment of fractures

### Treatment of fractures

**53406** - Maxilla, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation (Anaes.) (Assist.).

**53409** - Mandible, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation (Anaes.) (Assist.).

**53411** - Zygomatic bone, treatment of fracture of, requiring surgical reduction, by temporal, intra-oral or other approach (Anaes.).

**53412** - Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation at one site (Anaes.) (Assist.).

**53413** - Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 2 sites (Anaes.) (Assist.).

**53414** - Zygomatic bone, treatment of, requiring surgical reduction and involving internal or external fixation or both at 3 sites (Anaes.) (Assist.).

**53415** - Maxilla, treatment of fracture of, requiring open reduction (Anaes.) (Assist.).

**53416** - Mandible, treatment of fracture of, requiring open reduction (Anaes.) (Assist.).

**53418** - Maxilla, treatment of fracture of, requiring open reduction and internal fixation not involving a plate (Anaes.) (Assist.).

**53419** - Mandible, treatment of fracture of, requiring open reduction and internal fixation not involving a plate (Anaes.) (Assist.).

**53422** - Maxilla, treatment of fracture of, requiring open reduction and internal fixation involving a plate (Anaes.) (Assist.).

**53423** - Mandible, treatment of fracture of, requiring open reduction and internal fixation involving a plate (Anaes.) (Assist.).

**53424** - Maxilla, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction not involving a plate (Anaes.) (Assist.).

**53425** - Mandible, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction not involving a plate (Anaes.) (Assist.).

**53427** - Maxilla, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction involving the use of a plate (Anaes.) (Assist.).

**53429** - Mandible, treatment of a complicated fracture of, involving viscera, blood vessels or nerves, requiring open reduction involving the use of a plate (Anaes.) (Assist.).

**53453** - Orbital cavity, reconstruction of a wall or floor with or without foreign implant (Anaes.) (Assist.).

**53455** - Orbital cavity, bone or cartilage graft to orbital wall or floor including reduction of prolapsed or entrapped orbital contents (Anaes.) (Assist.).

**53460** - Nasal bones, treatment of fractures of, by open reduction involving osteotomies (Anaes.) (Assist.).

# Category 5 – Diagnostic imaging services

## Group I1 – Ultrasound

### Subgroup 2 - Cardiac

**55118** - Heart, two-dimensional or three-dimensional real time transoesophageal examination of, from at least 2 levels, and in more than one plane at each level, if:

(a) the service includes:

(i) real time colour flow mapping and, if indicated, pulsed wave Doppler examination; and

(ii) recordings on digital media; and

(b) the service is not an intra-operative service; and

(c) not being a service associated with a service to which an item in Subgroup 3 applies.

(R) (Anaes.)

**55130** - Intraoperative two-dimensional or three-dimensional real time transoesophageal echocardiography, if the service:

(a) includes Doppler techniques with colour flow mapping and recordings on digital media; and

(b) is performed during cardiac surgery; and

(c) incorporates sequential assessment of cardiac function before and after the surgical procedure; and

(d) is not associated with a service to which item 55135, or an item in Subgroup 3, applies (R)

(Anaes.)

**55135** - Intraoperative two-dimensional or three-dimensional real time transoesophageal echocardiography, if the service:

(a) is provided on the same day as a service to which item 38477, 38484, 38499, 38516 or 38517 applies; and

(b) includes Doppler techniques with colour flow mapping and recordings on digital media; and

(c) is performed during cardiac valve surgery (replacement or repair); and

(d) incorporates sequential assessment of cardiac function and valve competence before and after the surgical procedure; and

(e) is not associated with a service to which item 22054, 55130, or an item in Subgroup 3, applies (R)

(Anaes.)

## Group I3 - Diagnostic Radiology

### Subgroup 13 - Angiography

**59970** - Angiography or digital subtraction angiography, or both, with fluoroscopy and image acquisition, using a mobile image intensifier, including any preliminary plain films, preparation and contrast injection—one or more regions (R) (Anaes.).

**60000** - Digital subtraction angiography, examination of head and neck with or without arch aortography—1 to 3 data acquisition runs (R) (Anaes.)

**60003** - Digital subtraction angiography, examination of head and neck with or without arch aortography—4 to 6 data acquisition runs (R) (Anaes.)

**60006** - Digital subtraction angiography, examination of head and neck with or without arch aortography—7 to 9 data acquisition runs (R) (Anaes.)

**60009** - Digital subtraction angiography, examination of head and neck with or without arch aortography—10 or more data acquisition runs (R) (Anaes.)

**60012** - Digital subtraction angiography, examination of thorax—1 to 3 data acquisition runs (R) (Anaes.)

**60015** - Digital subtraction angiography, examination of thorax—4 to 6 data acquisition runs (R) (Anaes.)

**60018** - Digital subtraction angiography, examination of thorax—7 to 9 data acquisition runs (R) (Anaes.)

**60021** - Digital subtraction angiography, examination of thorax—10 or more data acquisition runs (R) (Anaes.)

**60024** - Digital subtraction angiography, examination of abdomen—1 to 3 data acquisition runs (R) (Anaes.)

**60027** - Digital subtraction angiography, examination of abdomen—4 to 6 data acquisition runs (R) (Anaes.)

**60030** - Digital subtraction angiography, examination of abdomen—7 to 9 data acquisition runs (R) (Anaes.)

**60033** - Digital subtraction angiography, examination of abdomen—10 or more data acquisition runs (R) (Anaes.)

**60036** - Digital subtraction angiography, examination of upper limb or limbs—1 to 3 data acquisition runs (R) (Anaes.)

**60039** - Digital subtraction angiography, examination of upper limb or limbs—4 to 6 data acquisition runs (R) (Anaes.)

**60042** - Digital subtraction angiography, examination of upper limb or limbs—7 to 9 data acquisition runs (R) (Anaes.)

**60045** - Digital subtraction angiography, examination of upper limb or limbs—10 or more data acquisition runs (R) (Anaes.)

**60048** - Digital subtraction angiography, examination of lower limb or limbs—1 to 3 data acquisition runs (R) (Anaes.)

**60051** - Digital subtraction angiography, examination of lower limb or limbs—4 to 6 data acquisition runs (R) (Anaes.)

**60054** - Digital subtraction angiography, examination of lower limb or limbs—7 to 9 data acquisition runs (R) (Anaes.)

**60057** - Digital subtraction angiography, examination of lower limb or limbs—10 or more data acquisition runs (R) (Anaes.)

**60060** - Digital subtraction angiography, examination of aorta and lower limb or limbs—1 to 3 data acquisition runs (R) (Anaes.)

**60063** - Digital subtraction angiography, examination of aorta and lower limb or limbs—4 to 6 data acquisition runs (R) (Anaes.)

**60066** - Digital subtraction angiography, examination of aorta and lower limb or limbs—7 to 9 data acquisition runs (R) (Anaes.)

**60069** - Digital subtraction angiography, examination of aorta and lower limb or limbs—10 or more data acquisition runs (R) (Anaes.)

**60072** - Selective arteriography or selective venography by digital subtraction angiography technique—one vessel (NR) (Anaes.)

**60075** - Selective arteriography or selective venography by digital subtraction angiography technique—2 vessels (NR) (Anaes.)

**60078** - Selective arteriography or selective venography by digital subtraction angiography technique—3 or more vessels (NR) (Anaes.)

## Subgroup 15—Fluoroscopic examination

**60500** - Fluoroscopy, with general anaesthesia (not being a service associated with a radiographic examination) (R) (Anaes.).

**60506** - Fluoroscopy using a mobile image intensifier, in conjunction with a surgical procedure lasting less than 1 hour, not being a service associated with a service to which another item in this Group applies. (R)



**60509** - Fluoroscopy using a mobile image intensifier, in conjunction with a surgical procedure lasting 1 hour or more, not being a service associated with a service to which another item in this Group applies. (R)

### **Subgroup 17 – Interventional techniques**

**61109** - Fluoroscopy in an angiography suite with image intensification, in conjunction with a surgical procedure using interventional techniques, not being a service associated with a service to which another item in this Group applies (R).

## **Group I5 – Magnetic Resonance Imaging**

### **Subgroup 22—Modifying items**

**63499** - MRI service to which item 63501, 63502, 63504 or 63505 applies, if the service is performed on a person under anaesthetic in the presence of a medical practitioner who is qualified to perform an anaesthetic.

## **Category 7 - Cleft and Craniofacial Services**

### **Group C1 - Cleft and Craniofacial Services**

#### **Cleft and Craniofacial services**

**75203** - Removal of tooth or tooth fragment under general anaesthesia.