

SCHEDULE—continued

s d

(iii) whose income exceeds £1,500 per annum but does not exceed £2,500 per annum	15	0
(iv) whose income exceeds £1,000 per annum but does not exceed £1,500 per annum	10	0
(v) whose income exceeds £500 per annum but does not exceed £1,000 per annum	5	0
(vi) whose income does not exceed £500 per annum	2	6

Dependent children under sixteen years shall be charged at half the rates applicable to adult patients.

B.II. *Charges for Treatment, Accommodation and Maintenance :*

Charges at the following daily rates shall be paid by all other in-patients in respect of accommodation, maintenance and treatment in accordance with the following, together with such additional fees as may be payable under paragraph B.III of this Part of the Schedule :—

(a) *Basic Hospital Fees :**Any patient :*

s d

(i) whose income exceeds £5,000 per annum	200	0
(ii) whose income exceeds £2,500 per annum but does not exceed £5,000 per annum	100	0
(iii) whose income exceeds £1,500 per annum but does not exceed £2,500 per annum	80	0
(iv) whose income exceeds £1,000 per annum but does not exceed £1,500 per annum	40	0
(v) whose income exceeds £500 per annum but does not exceed £1,000 per annum	20	0
(vi) whose income does not exceed £500 per annum	5	0

Accommodation and Maintenance.—Treatment :

These charges shall be inclusive of all diagnostic procedures, including diagnostic operative procedures, but shall not include surgical operations. Patients on whom operations are performed other than diagnostic procedures, will be charged at double the basic rate for the first 14 days stay in Hospital.

(b) *Fees payable by Children under 16 years :*

Dependent children under 16 years shall be charged at half the rates applicable to an adult patient, as calculated on the rates set out in paragraph B.II of this Part of the Schedule.

(c) *Limitation and Restriction of Fees :*

The total fees charged to any patient under paragraphs B.I and B.II of this Part of the Schedule for any calendar year shall not exceed 10 per cent of the patient's annual income.

B.III. *Additional Fees :*

Fees for additional services shall be paid by patients detailed below (except those referred to under Part I, paragraph A) for the services detailed below :—

(a) *Single room Accommodation :*

Single room accommodation, that is not required for the time being for a patient on medical grounds, may be allocated to any patient, on request, on the undertaking that the patient shall pay, or payment shall be made on behalf of the patient of, a fee of £7 per day during the period of occupancy of such accommodation.

SCHEDULE—continued

(b) *Non-Standard Diet :*

Non-standard diet may be provided for patients, on request, at a charge of £1 per day, provided that this charge shall not be raised against patients whose basic hospital fees exceed £4 per day or who are occupying single room accommodation for which fees are being raised.

(c) *Medical and Surgical Appliances.*—Charges may be raised for the supply of special medical and surgical appliances.

(d) *Persons specified under Part V.*

The fees which are payable under this paragraph shall be in addition to any fees raised pursuant to paragraphs B.I and B.II of this Part of the Schedule.

PART II.—OBSTETRICS PATIENTS

A.I. *Partial Exemption from payment of Obstetrics Fees :*

(a) Any person under paragraph A or B.I of Part I of this Schedule or the wife of any such person whose annual salary exceeds £500 shall pay a block charge of £15 ; and

(b) any person aforesaid whose annual salary does not exceed £500 shall pay a block charge of £5.

A.II. *Basic Obstetrics Fees :*

All other patients shall pay block fees as stated below, together with such additional fees as may be payable under paragraph A.III of this Part of the Schedule, that is—

Any patient—

	£	s	d
(i) whose income exceeds £5,000 per annum	150	0	0
(ii) whose income exceeds £2,500 per annum but does not exceed £5,000 per annum	75	0	0
(iii) whose income exceeds £1,500 per annum but does not exceed £2,500 per annum	60	0	0
(iv) whose income exceeds £1,000 per annum but does not exceed £1,500 per annum	35	0	0
(v) whose income exceeds £500 per annum but does not exceed £1,000 per annum	15	0	0
(vi) whose income does not exceed £500 per annum	10	0	0

The block charge will cover ante-natal care, delivery and post-natal hospital care. Half the block charge shall be payable on the second ante-natal visit, the balance payable at 28th week of pregnancy.

A.III. *Additional Fees :*

Additional fees as set out in paragraph B.III of Part I of this Schedule shall be paid by maternity patients as they may be applicable ; except that fees for non-standard diet shall be payable by all obstetric patients who are receiving that diet.

PART III.—OUT-PATIENTS

A. *Exemption from Charges :*

(i) No charges shall be paid under this Part of the Schedule for consultation and out-patient treatment by the persons detailed in paragraphs A and B.I of Part I of this Schedule.

SCHEDULE—continued

(ii) Dependent children under 16 years shall be charged at half the rates applicable to adult patients.

B. Charges shall be paid as stated below by all other general out-patients, casualty patients and patients attending the Consultant Out-Patients Clinics in respect of Consultation and Treatment:—

(i) A weekly charge of 5s in the general out-patients clinics.

(ii) A weekly charge of 5s in Casualty except that a 10s charge shall be raised in respect of emergency cases brought in at night, that is between 7.00 p.m. and 7.00 a.m. or on a Sunday or a public holiday.

(iii) Charges for consultation and treatment on first attendance shall be paid as detailed below by all other patients referred to consultant clinics (including those referred direct from other hospitals and medical practitioners), that is—

Any patient—

	s	d
(a) whose income exceeds £5,000 per annum	100	0
(b) whose income exceeds £2,500 per annum but does not exceed £5,000 per annum	60	0
(c) whose income exceeds £1,500 per annum but does not exceed £2,500 per annum	40	0
(d) whose income exceeds £1,000 per annum but does not exceed £1,500 per annum	20	0
(e) whose income exceeds £500 per annum but does not exceed £1,000 per annum	10	0
(f) whose income does not exceed £500 per annum	5	0

(iv) No additional fee shall be payable at the Consultant Clinic by a patient whose income does not exceed £500 per annum if such patient attends the general out-patient department and is referred to a Consultant Clinic within the same week.

(v) The fees stated in paragraph B (ii) of this Part of the Schedule may be deferred at the discretion of the Casualty Officer or Sister at the time of attendance of a seriously ill patient.

PART IV.—DENTAL OUT-PATIENTS

A.I *Partial Exemption from Payment of Dental Fees :*

(i) No charges shall be paid under columns 1-5 of the Annex to this Part of the Schedule for consultation and out-patient treatment by the persons detailed in paragraphs A and B.I of Part I of this Schedule.

(ii) Dependent children under 16 years shall be charged at half the rates applicable to adult patients.

B. Charges shall be paid as stated below by all other dental out-patients attending dental clinics in respect of Examination, Consultation and Treatment:—

(i) The total charge for treatment to be provided shall be notified to patients after consultation. Half of this charge shall become payable and shall be paid before commencement of treatment, the balance shall be payable on the penultimate visit before completion of the particular course of treatment.

(ii) Dental In-Patients on whom operations are performed, shall be charged at the rates applicable to general in-patients as prescribed under paragraph B.II of Part I of this Schedule.

SCHEDULE—continued

ANNEX

PART II

SCALE OF DENTAL FEES

Income Range	Out-Patients Examination including Single Extrac- tions (per Examination)	Consultant Investiga- tion (per Week)	TREATMENT FEES PAYABLE IN ADDITION TO EXAMINATION AND INVESTIGATION FEES							
			Minor Oral and Periodontal Surgery including Multiple Extractions (per Course of Treatment)	Ordinary Filling (per Filling or Simple Periodontal Treatment)	Orthodontic Treatment (per Three Months Course of Treatment)	Crowns and Gold Filling (per Filling)	Bridge or Metal Partial Denture	Plastic Partial Denture	Full Upper or Full Lower Denture	Repairs to Denture
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
A. Over £5,000	5s	200s	500s	100s	500s	200s	500s	300s	500s	100s
B. £2,501-5,000	5s	100s	250s	50s	250s	110s	300s	160s	260s	50s
C. £1,501-2,500	5s	60s	150s	30s	150s	90s	220s	100s	160s	30s
D. £1,001-1,500	5s	40s	90s	20s	90s	80s	180s	75s	110s	20s
E. £501-1,000	5s	10s	20s	7s-6d	20s	60s	110s	30s	40s	7-6d
F. £500 or under	5s	5s	5s	5s	5s	50s	100s	25s	25s	5s

SCHEDULE—continued

PART V

The following categories of patients and services will attract special levies as prescribed under the Annex to this Part, that is :—

(a) Patients who expressly request for private treatment and this category includes patients who are referred from doctors outside Lagos University Teaching Hospital, or from firms, companies and other bodies in the private sector ;

(b) Any patient not exempted under any other part of this Schedule, and whose annual income exceeds £300 ;

(c) Surgical operations ;

(d) Special medical attention ;

(e) Special laboratory investigations ;

(f) Laboratory investigations requested from outside the hospital ;

(g) Special embalming and other specialised services requested of the Department of Morbid Anatomy ;

(h) Special X-Ray investigations ;

(i) Expensive drugs and also drugs not in common use.

ANNEX

(PART V)

SPECIAL LEVY

PART V—DEPARTMENT OF MEDICINE

INVESTIGATIONS

Type of Investigation	Fees Chargeable			
	Other Patients			
	£	s	d	
<i>Cardia :</i>				
Right Heart	10	10	0	Minimum £3-3s Maximum to be decided by individual consultant
Left Heart	15	15	0	
Right and Left Heart	21	0	0	
Left Ventriculogram	5	5	0	
Aortic Root Angiogram	5	5	0	
E.C.G.	3	3	0	
<i>Respiratory :</i>				
Routine Pulmonary Function Test	10	10	0	Maximum to be decided by individual consultant
Blood-gas Analysis	5	5	0	
Lung Bopsy (drill needle)	3	3	0	
Skin Test with allergens	4	4	0	
<i>Gastroenterology :</i>				
Jejunal Biopsy	5	0	0	Maximum to be decided by individual consultant
Secretin Test	10	0	0	
D-Xylose absorption (25 g. test doex)	5	0	0	
Casein Assay (serum folate)	3	0	0	
Schilling Test	3	0	0	
Folic Acid Absorption	15	0	0	

SCHEDULE—continued

SPECIAL LEVY

PART V—DEPARTMENT OF MEDICINE—continued

INVESTIGATIONS

Type of Investigation	Fees Chargeable		
	Other Patients	Ordinary Patients	
<i>Renal :</i>	£ s d		
Renal Arteriogram	5 0 0	Maximum to be decided by individual consultant	
Differential Renal Function tests	26 5 0		
Renal Scan	10 10 0		
Radio-active Renogram	10 10 0		
Blood Osmolarity	3 3 0		
Blood PH	1 1 0		
<i>Metabolic :</i>			
B.M.R.	7 7 0	Maximum to be decided by individual consultant	
Plasma Cortisols	4 4 0		
I.V. Tolbutamide	5 5 0		
G. Tolerance Test	5 5 0		
Serum PBI	7 7 0		
<i>Neurology :</i>			
E. E. G.	5 5 0	Maximum to be decided by individual consultant	

SPECIAL LEVY

DEPARTMENT OF RADIO-DIAGNOSIS

INVESTIGATIONS

Type of Investigation	Fees Chargeable		
	Other Patients	Ordinary Patients	
A. ROUTINE (SIMPLE) EXAMINATIONS :	£ s d	£	s d
(i) Chest X-Ray	5 0 0		—
(ii) Chest X-Ray with screening for special purposes, including oblique films	8 0 0		—
(iii) Chest X-Ray with duplicate film	8 0 0		—
(iv) Skeletal X-Rays—maximum three views	4 0 0		—
(v) Skull	6 0 0		—
(vi) Paranasal Sinuses	6 0 0		—
(vii) Temporal Bone, mandible, Other special skull views	6 0 0		—
(viii) Skeletal Survey	20 0 0		—
(ix) Plain Abdomen	5 0 0		—

SCHEDULE—continued

SPECIAL LEVY

DEPARTMENT OF RADIO-DIAGNOSIS—continued

INVESTIGATIONS

Type of Investigation						Fees Chargeable		
						Other Patients	Ordinary Patients	
B. SPECIAL EXAMINATIONS :						£	s	d
(i)	Barium Swallow	..	..	..	..	10	0	0
(ii)	Barium Meal	..	..	..	..	15	0	0
(iii)	Barium Enema	..	..	..	..	15	0	0
(iv)	Gastrografen	..	..	..	..	20	0	0
(v)	Oral Cholecystography	..	..	..	..	10	0	0
(vi)	Intravenous Cholecystography/ Cholangiography	..	..	..	..	15	0	0
(vii)	I.V.P.	..	..	..	..	15	0	0
(viii)	Retrograde Pyelogram	..	..	..	..	15	0	0
(ix)	Cystogram	..	..	..	..	15	0	0
(x)	Bronchogram	..	..	..	..	15	0	0
(xi)	Tomography, single/plain : maximum, eight films	..	..	..	..	15	0	0
(xii)	Sinogram	..	..	..	..	10	0	0
(xiii)	Angio-Aortogram	..	..	..	..	20	0	0
(xiv)	Venogram	..	..	..	..	15	0	0
(xv)	Splenoportogram	..	..	..	..	15	0	0
(xvi)	Hysterosalpingogram	..	..	..	..	15	0	0
(xvii)	Myelogram	..	..	..	..	20	0	0
(xviii)	Encephalogram	..	..	..	..	15	0	0
(xix)	Fistulogram	..	..	..	..	10	0	0

Consultation Fees : (Private Patients Only) .. £10-0s-0d.

SPECIAL LEVY

DEPARTMENT OF MORBID ANATOMY

INVESTIGATIONS

Type of Investigation						Fees Chargeable	
						Other Patients	Ordinary Patients
A. Routine Investigation						Maximum £3-3s-0d	Nil
(i)	Routine Histological and cytological examinations, etc.					Maximum £10-10s-0d	

SCHEDULE—continued

SPECIAL LEVY

DEPARTMENT OF MORBID ANATOMY—continued

INVESTIGATIONS

<i>Type of Investigation</i>	<i>Fees Chargeable</i>	
	<i>Other Patients</i>	<i>Ordinary Patients</i>
B. Special Investigation		
(i) Chromosomal and Cytological examinations in the diagnosis of malformations, sex-patterns, etc.	Minimum £15-15s-0d Maximum to be decided by consultant	
C. Embalment	Minimum £10-10s-0d Maximum to be decided by consultant	£10-10s-0d Maximum to be decided by consultant

SPECIAL LEVY

DEPARTMENT OF CHEMICAL PATHOLOGY

(including Haematology)

INVESTIGATIONS

<i>Type of Investigation</i>	<i>Fees Chargeable</i>	
	<i>Other Patients</i>	<i>Ordinary Patients</i>
A. Routine Investigation	Maximum £3-3s-0d	Nil
(i) Routine Haemogram and cell counts	Maximum £10-10s-0d	
(ii) Routine Urine analysis, etc.		
B. Special Investigation	Minimum £15-15s-0d	Nil
(i) Biopsy of bone marrow, etc.	Maximum to be decided by consultant	
(ii) Serum enzyme essays, etc.		

SCHEDULE—*continued*
SPECIAL LEVY
 DEPARTMENT OF MICROBIOLOGY
INVESTIGATIONS

<i>Type of Investigation</i>	<i>Fees Chargeable</i>	
	<i>Other Patients</i>	<i>Ordinary Patients</i>
A. Routine Investigation	Maximum £3-3s-0d	Nil
(i) Microscopy and cultural examination of faeces for pathogeus	Maximum £10-10s-0d	
(ii) Serological Tests for Diagnosis of syphilitic lesions		
B. Special Investigation, e.g.		
(i) Investigation of non-specific urethritis	Minimum £15-15s-0d	Nil
(ii) Virus Isolation and identification	Maximum to be decided by consultant.	

CONSULTATION : (For Private Patients only)

Minimum—£3-3s-0d.

Maximum—No limit.

SPECIAL LEVY
 DEPARTMENT OF SURGERY
 (Gastroenterology Unit)
INVESTIGATIONS

<i>Type of Investigation</i>	<i>Fees Chargeable</i>	
	<i>Other Patients</i>	<i>Ordinary Patients</i>
A. Special Investigations		
<i>Gastric Secretion Tests</i>	<i>Minimum</i>	<i>Maximum</i>
1. Maximal Acid Output		
(a) Augmented Histamine test (AHT)	5 guineas	2 guineas
(b) Histamine Infusion technique (HIT)	5 guineas	2 guineas
2. Gastric pepsin estimation	7 guineas	2 guineas
3. Uropepsin estimation	7 guineas	2 guineas
4. Hollander's (Insulin) test	7 guineas	2 guineas
5. Medical Vagotomy	5 guineas	5 guineas

SCHEDULE—*continued*

SPECIAL LEVY

DEPARTMENT OF SURGERY—*continued*

(Gastroenterology Unit)

INVESTIGATIONS

<i>Type of Investigation</i>	<i>Fees Chargeable</i>	
	<i>Other Patients</i>	<i>Ordinary Patients</i>
B. 1. Splenoportography and portal venous pressure manometry	£20	5 guineas
2. Hepatogram	£15	5 guineas
C. 1. Gastrosocopy	£20	5 guineas
2. Gastric biopsy	£25	5 guineas
3. Gastrophotography	£40	5 guineas
	Maximum to be decided by consultant in each case.	

PART VI—GENERAL

General :

1. Where applicable, fees payable under this Schedule shall be assessed on the basis of the income of each patient ; a married woman shall be charged at the rate applicable to her husband or according to her own income, whichever is higher. Assessment of fees payable by children will be made on the income of either of the parents or guardians, whichever is higher.

2. All fees raised under this Schedule shall be paid to the Hospital and shall be shown in the Annual Financial Accounts.

3. Except where otherwise provided in this Schedule, payment of fees is required to be made as follows :—

(a) In-Patients :

(i) Patients admitted from the waiting lists are required to pay a deposit equal to the assessed charge for a 7 day stay in Hospital. Subsequent accounts to be raised weekly in advance. If the final total account does not exceed the amount of the deposit, the balance shall be refunded to the patient.

(ii) Patients admitted as emergencies shall not be required to pay a deposit prior to admission, but payment shall be made at the earliest opportunity. Subsequent accounts shall be raised as prescribed for other in-patients.

(b) Consultant Out-Patients :

Consultant Out-Patients are required to pay the initial fee at the time of first attendance ; subsequent payments are required to be made on the first attendance after the expiry of the current fees.

(c) Casualty and General Out-Patients :

Casualty and General Out-Patient fees are payable at the time of attendance.

SCHEDULE—*continued*PART VI—GENERAL—*continued*

4. Any other services not provided for under this Schedule and which are rendered to a patient either on request or otherwise, shall be paid for by the patient and in accordance with the principles laid down in this Schedule.

MADE and sealed with the Common Seal of the Lagos University Teaching Hospital Management Board this 23rd day of June 1971.



S. I. AKENZUA,
Chairman

E. O. OTITOJU,
*House Governor and Secretary to the
Management Board*

APPROVED pursuant to section 5 (2) of the Lagos University Teaching Hospital Act 1961 this 2nd day of July 1971.

DR. J. O. J. OKEZIE,
Federal Commissioner for Health

EXPLANATORY NOTE

(This note does not form part of the above Regulations but is intended to explain their purport)

The Regulations set out the fees to be paid by patients who attend for treatment and consultation at the Lagos University Teaching Hospital. They also provide for fees to be charged according to the income of each patient and for exemptions to be made in appropriate cases.

The Regulations replace those published as L.N. 75 of 1965.