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GOVERNMENT NOTICE
GOEWERMENTSKENNISGEWING

DEPARTMENT OF LABOUR
DEPARTEMENT VAN ARBEID

No. 1447 **10 December 1999**

COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASES ACT, 1993 (ACT No. 130 OF 1993)

I, Sipho Mila Pityana, Director-General of the Department of Labour, hereby give notice that, after consultation with the Dental Association of South Africa, and acting under the powers vested in me by section 76 of the Compensation for Occupational Injuries and Diseases Act, 1993 (Act No. 130 of 1993), I prescribe the "Scale of Fees for Dental Aid" inclusive of the General Rules and General Modifiers applicable thereto, appearing in the Schedule to this notice, with effect from **1 January 2000.**

The fees appearing in the Schedule are applicable in respect of services rendered on or after 1 October 1998 and **exclude vat.**

Sipho M Pityana
Director-General: Labour

No. 1447 **10 Desember 1999**

WET OP VERGOEDING VIR BEROEPSBESERINGS EN -SIEKTES, 1993 (WET No. 130 VAN 1993)

Ek, Sipho Mila Pityana, Direkteur-Generaal van die Departement van Arbeid, maak hierby bekend dat ek, na beraadslaging met die Tandheelkundige Vereniging van Suid-Afrika en handelende kragtens die bevoegdheid my verleen by artikel 76 van die Wet op Vergoeding vir Beroepsbeserings en -siektes, 1993 (Wet No. 130 van 1993), die "Tarief vir Tandheelkundige Behandeling" met inbegrip van die Algemene Reëls en Algemene Wysigers wat daarop van toepassing is, en wat in die Bylae van hierdie kennisgewing verskyn, met ingang van **1 Januarie 2000** voorskryf.

Die tariewe wat in die Bylae voorkom, is van toepassing op dienste wat op of na 1 Januarie 2000 gelewer word en **sluit BTW uit.**

Sipho M Pityana
Direkteur-Generaal: Arbeid

GENERAL GUIDELINES / ALGEMENE RIGLYNE

FEES FOR DENTAL SERVICES / TARIEWE VIR TANDHEELKUNDIGE DIENSTE

RULES / REËLS

1. The following Rules apply to all practitioners /

Die volgende reëls is van toepassing op alle praktisyns:

001 Item 8101 refers to a Full Mouth Examination, charting and treatment planning and no further examination fees shall be chargeable until the treatment plan resulting from this consultation is completed with the exception of Item 8102. This includes the issuing of a prescription where only medication is prescribed /

Item 8101 verwys na 'n vollemondse-ondersoek, kartering en behandelingsbeplanning en geen bykomende gelde sal hefbaar wees totdat die behandelingsplan, voortspruitend uit hierdie konsultasie, voltooi is nie met die uitsondering van items 8102. Dit sluit in die uitreiking van 'n voorskrif, waar slegs medikasie voorgeskryf is.

Item 8104 refers to a consultation for a specific problem and not to a full mouth examination, charting and treatment planning. This includes the issuing of a prescription where only medication is prescribed /

Item 8104 verwys na 'n konsultasie vir 'n spesifieke probleem en nie na 'n vollemondse-ondersoek, kartering en behandelingsbeplanning nie. Dit sluit in die uitreiking van 'n voorskrif, waar slegs medikasie voorgeskryf is.

002 Except in those cases where the fee is determined "by arrangement", the fee for the rendering of a service which is not listed in this schedule shall be based on the fee in respect of a comparable service that is listed therein and Rule 002 must be indicated together with the tariff item /

Met uitsondering van dié gevalle waar die bedrag vasgestel word "volgens ooreenkoms" moet die bedrag vir die lewering van 'n diens wat nie in hierdie skedule vermeld word nie, gebaseer word op die bedrag vir 'n vergelykbare diens wat daarin vermeld word en reël 002 moet tesame met die tariefitem aangedui word.

003 In the case of a prolonged or costly dental service or procedure, the dental practitioner shall ascertain beforehand from the Commissioner whether he will accept financial responsibility in respect of such treatment /

In die geval van 'n langdurige of duur tandheelkundige diens of prosedure, moet die tandarts vooraf by die Kommissaris vasstel of hy geldige aanspreeklikheid vir sodanige behandeling sal aanvaar.

004 In exceptional cases where the tariff fee is disproportionately low in relation to the actual services rendered by a practitioner, such higher fee as may be mutually agreed upon between the dental practitioner and the Commissioner may be charged and Rule 004 must be indicated together with the tariff item /

In uitsonderlike gevalle waar die tariefgeld buite verhouding laag is in vergelyking met die dienste werklik deur 'n praktisyn gelewer, kan sodanige hoër geld gehef word as waaroor die tandarts en die Kommissaris onderling ooreenkom en reël 004 moet tesame met die tariefitem aangedui word.

005 Save in exceptional cases the service of a specialist shall be available only on the recommendation of the attending dental or medical practitioner. Referring practitioners shall indicate to the specialist that the patient is being treated under the Compensation for Occupational Injuries and Diseases Act /

Behalwe in uitsonderlike gevalle moet die dienste van 'n spesialis slegs op die aanbeveling van die tandarts of mediese praktisyn wat die geval hanteer, beskikbaar wees. Praktisyns wat gevalle verwys, moet die spesial inlig dat die pasient kragtens die Wet op Vergoeding vir Beroepsbeserings en –siektes behandel word.

007 "Normal consulting hours" are between 08:00 and 17:00 on weekdays, and between 08:00 and 13:00 on Saturdays /

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"Gewone spreekure" is tussen 08:00 en 17:00 op weeksdae en tussen 08:00 en 13:00 op Saterdae.

008 A dental practitioner shall submit his account for treatment under the Act to the employer of the employee concerned /

'n Tandarts moet sy rekening ten opsigte van behandeling kragtens die Wet aan die betrokke werknemer ser werkgewer stuur.

(M/W) 009 Dentists in general practice shall be entitled to charge two-thirds of the fees of specialists only for treatment that is not listed in the schedule for dentists in general practice and Modifier 8004 must be shown against any such item /

Tandartse in algemene praktyk is daarop geregtig om twee-derdes van die gelde van spesialiste te vra slegs vir behandeling wat nie in die skedule vir tandartse in algemene praktyk aangegee word nie en Wysiger 8004 moet teenoor sodanige item getoon word.

Benefits in respect of specialists charging treatment procedures not listed in the schedule for that specialty, shall be allocated as follows/

Voordele ten opsigte van spesialiste wat gelde hef vir behandelingsprosedures wat nie gelys is in die skedule van die betrokke spesialiteit nie, sal as volg toegeken word:

General Dental Practitioners Schedule / *Algemene Tandheelkunde Praktisyns Skedule* 100%

Other Dental Specialists Schedules / *Ander Tandheelkunde Spesialis Skedules* 2/3

010 Fees charged by dental technicians for their services (PLUS L) shall be shown on the dentist's invoice against the code 8099. Such dentist's invoice shall be accompanied by the actual invoice of the dental technician (or a copy thereof) and the invoice of the dental technician shall bear the signature of the dentist (or the person authorised by him) as proof that it has been compiled correctly. "L" comprises the fee charged by the dental technician for his services as well as the cost of gold and of teeth. For example, item 8231 is specified as follows

Die geld wat 'n tandtegnikus vra (PLUS L), moet op die tandarts se rekening aangedui word teenoor die kode 8099. Sodanige rekening van die tandarts moet vergesel wees van die werklike rekening van die tandtegnikus (of 'n afskrif daarvan), en die rekening van die tandtegnikus moet die handtekening van die tandarts (of sy gevolmagtigde) dra as bewys dat dit korrek saamgestel is. "L" bestaan uit die geld wat die tandtegnikus vir sy dienste vra, asook uit die koste van goud en van tande. Byvoorbeeld, item 8231 word soos volg gespesifiseer.

		Rc
8231	.....	X
8099 (8231)	.....	Y
Total / *Totaal*	.....	R(X+Y)

011 Modifiers may only be used where (M/W) appears against the item in the schedule /

Wysigers mag slegs gebruik word waar (W/M) teenoor die item in die skedule verskyn.

8001 33 1/3% of the appropriate scheduled fee (see Note 4 - preamble to Maxillo-facial and oral surgery schedule) /

33 1/3% van die toepaslike skedule gelde (sien Nota 4 - inleiding tot die Kaak-gesigs- en mondchirurgie skedule)

8002 The appropriate scheduled fee + 50% (see Note 1 - preamble to Maxillo-facial and oral surgery schedule) /

Die toepaslike skedule gelde plus 50% (sien Nota 1 - inleiding tot die Kaak-gesigs- en mondchirurgie skedule)

8003 The appropriate scheduled fee + 10% (see Note 5 - preamble to Perio schedule)/

Die toepaslike skedule gelde plus 10% (sien Nota 5 - inleiding tot Perio skedule)

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8004 Two-thirds of appropriate scheduled fee (see Rule 009) /

Twee-derdes van die toepaslike skedule gelde (Sien Reël 009)

8005 The appropriate scheduled fee up to a maximum of **R171.20** (see Note 2 - preamble to Maxillo-facial and oral surgery schedule) /

*Die toepaslike skedule gelde tot 'n maksimum van **R171.20** (sien Nota 2 – inleiding tot die Kaak-gesigs- en mondchirurgie skedule)*

8006 50% of the appropriate scheduled fee (see Note 3 – preample to Maxillo-facial and oral surgery schedule)/

50% van die toepaslike skedule gelde (sien Nota 3 – inleiding tot die Kaak-gesigs- en mondchirurgie skedule)

8007 15% of the appropriate scheduled fee with a minimum of **R86.90** (See preamble(s) under "oral surgery" in the schedule for GPs and the schedule for specialists in Maxillo-facial and oral surgery /

*15% van die toepaslike skedule gelde met 'n minimum van **R86.90** (Sien inleiding(s) onder "mondchirurgie" in die skedule vir Aps en die skedule vir spesialiste in kaak-gesigs- en mondchirurgie)*

8008 The appropriate scheduled fee + 25% (see Note 5 – preamble to Maxillo-facial and oral surgery schedule, GPs' schedule) /

Die toepaslike skedule gelde plus 25% (sien Nota 5 – inleiding tot kaak-gesigs- en mondchirurgie, AP skedule)

8009 75% of the appropriate scheduled fee (see Note 3 under the preamble of the Maxillo-facial and oral surgery schedule /

75% van die toepaslike skedule gelde (sien Nota 3 onder die inleiding van die Kaak-gesigs- en mondchirurgie skedule)

8010 The appropriate shedule fee plus 75%/

Die toepaslike skedule gelde plus 75%.

012 In cases where treatment is not listed in the schedule for dentists in general practice or specialists then the appropriate fee listed in the medical schedules shall be charged and the relevant item in the medical schedules must be indicated /

In gevalle waar behandeling nie in die skedule vir tandartse in algemene praktyk of spesialiste gelys is nie, word die toepaslike gelde, soos gelys in die mediese skedules gehef, en die betrokke item in die mediese skedules moet aangedui word.

013 Cost of material (VAT inclusive): This item provides for a charge for material where indicated against the relative item codes by the words (See Rule 013). Material to be charged for at cost plus a handling fee not exceeding 35%, up to **R1433.80**. A maximum handling fee of 10% shall apply above a cost of **R1433.80**. A maximum handling fee of **R2 150.70** will apply /

*Koste van materiaal (BTW ingesluit): Hierdie item maak voorsiening vir die hef van gelde vir materiaal waar uitdruklik aangedui deur die woorde (Sien Reël 013). Kosprys plus 'n maksimum van 35% kan gehef word vir materiaal, waar die koste **R1433.80** of minder is. n Maksimum van 10% hanteringskoste sal van toepassing wees vir kostes bo **R1433.80**. Maksimum hanteringskoste sal **R2150.70** beloop.*

Note/*Nota*: Item 8220 (suture) is applicable to all registered persons / *Item 8220 (hegting) is toepaslik op alle geregistreerde persone*

EXPLANATIONS / VERDUIDELIKINGS

2. Additions, deletions and revisions / Toevoegings, weglatings en wysigings

A summary listing of additions, deletions and revisions applicable to this Schedule is found in Appendix A / *'n Opsomming van toevoegings, weglatings en wysigings tot die Skedule is gelys in Bylae A*

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New code numbers added to the Schedule are identified with the symbol • placed before the code number / *Nuwe kodenommers wat tot die Skedule bygevoeg is word deur die • simbool wat voor die kodenommer geplaas is geïdentifiseer*

In instances where a code has been revised, the symbol * is placed before the code number / *In gevalle waar 'n kode gewysig is, word die simbool * voor die kodenommer geplaas.*

3. Tooth identification / Tandidentifikasie

Tooth identification is compulsory for all invoices rendered. Tooth identification is only applicable to procedures identified with the letter (T) in the mouth part (MP) column. The International Standards Organisation (ISO) in collaboration with the FDI designated system for teeth and areas of the oral cavity, should be used /

Tandidentifikasie is verpligtend vir alle rekeninge wat gelewer word. Tandidentifikasie is slegs van toepassing op prosedures wat met die letter (T) in die monddeel-kolom (MD) aangedui word. Die 'International Standards Organisation' (ISO), in samewerking met die FDI, se aanwysingstelsel vir tande en areas van die mondholte moet gebruik word.

4. Abbreviations used in the Schedule / Afkortings gebruik in die Skedule

+D	Add fee for denture	+D	Voeg gelde van kunsgebit by
+L	Add laboratory fee	+L	Voeg laboratorium gelde by
GP	General practitioner	AP	Algemene praktisyn
M/W	Modifier	M/W	Wysiger
MP	Mouth part	MD	Monddeel
Na	not applicable	nvt	nie van toepassing
T	Tooth	T	Tand

5. VAT / BTW

Fees are VAT inclusive / *Tariewe sluit BTW in*

	I. GENERAL DENTAL PRACTITIONERS / ALGEMENE TANDHEELKUNDIGE PRAKTISYNS
	PREAMBLE / INLEIDING
(1)	The dental procedure codes for general dental practitioners are divided into twelve (12) categories of services. The procedures have been grouped under the category with which the procedures are most frequently identified. The categories are solely for convenience in using the Schedule and should not be interpreted as excluding certain types of Oral Care Providers from performing or reporting such procedures. These categories are similar to the *Current Dental Terminology Second Edition* (CDT-2). *Die tandheelkunde prosedurekodes vir algemene tandheelkundige praktisyns is in twaalf (12) kategorieë van dienste verdeel. Die prosedures is in die kategorie waarmee dit in die algemeen identifiseer word groepeer. Die kategorieë is uitsluitlik vir geriefsdoeleindes vir gebruik van die Skedule en moet nie geïnterpreteer word as synde sekere groepe van Mondgesondheidswerkers in die uitvoer of vermelding van sodanige prosedures te weerhou nie. Hierdie kategorieë is soortgelyk aan die 'Current Dental Terminology Second Edition' (CDT-2).*
(2) (M/W)	Procedures not described in the general practitioners' schedule should be reported by referring to the relevant specialist's schedule. Dentists in general practice shall be entitled to charge two-thirds of the fees of specialists only for treatment that is not listed in the schedule for dentists in general practice and Modifier 8004 must be shown against any such item (See Rules 009 and 011). There are no specific codes for orthodontic treatment in the current general practitioner's schedule, and the general practitioner must refer to the specialist orthodontist's schedule. *Prosedures wat nie in die algemene praktisyns se skedule beskryf word nie, moet vermeld word deur na die toepaslike spesialisskedule te verwys. Tandartse in algemene praktyk is daarop geregtig om twee-derdes van die gelde van spesialiste te vra slegs vir behandeling wat nie in die skedule vir tandartse in algemene praktyk aangegee word nie en Wysiger 8004 moet teenoor sodanige item getoon word (Sien Reëls 009, 011). Daar is geen spesifieke ortodonsie kodes in die huidige algemene praktisyn se skedule nie, en die algemene praktisyn moet na die spesialis ortodontiste skedule verwys.*
(3) (M/W)	Oral and maxillofacial surgery (Section J of the Schedule): The fee payable to a general practitioner assistant shall be calculated as 15% of the fee of the practitioner performing the operation, with the indicated minimum (see Modifier 8007). The patient must be informed beforehand that another dentist will be assisting at the operation and that a fee will be payable to the assistant. The assistant's name must appear on the invoice rendered to the patient. *Kaak-, gesig- en mondchirurgie (Seksie J van die Skedule): Die gelde aan 'n algemene praktisyn assistent betaalbaar word bereken op 15% van die gelde van die praktisyn wat die operasie uitvoer, met die aangeduide minimum (sien Wysiger 8007). Die pasiënt moet vooraf in kennis gestel word dat 'n tweede tandarts by die operasie teenwoordig sal wees en dat gelde aan die tandarts betaalbaar sal wees. Die naam van die assistent moet op die rekening wat aan die pasiënt gelewer word, verskyn.*

• = New Code * = Revised Code

I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	A. DIAGNOSTIC / DIAGNOSTIES			
	Clinical oral evaluations / Kliniese evaluering van die mond			
8101	Full mouth examination, charting and treatment planning (see Rule 001) / *Vollemondse-ondersoek, kartering en behandelingsbeplanning (sien Reël 001)*	49.20		
8102	Comprehensive consultation / *Omvattende konsultasie* A comprehensive consultation shall include treatment planning at a separate appointment where a diagnosis is made with the help of study models, full-mouth x-rays and other relevant diagnostic aids. Following on such a consultation, the patient must be supplied with a comprehensive written treatment plan which must also be recorded on the patient's file and which must include the following: • Soft tissue examination • Hard tissue examination • Screening/probing of periodontal pockets • Mucogingival examination • Plaque index • Bleeding index • Occlusal Analysis • TMJ examination • Vitality screening of complete dentition *'n Omvattende konsultasie behels behandelingsbeplanning tydens 'n afsonderlike afspraak, waar 'n diagnose gemaak word met behulp van studiemodelle, vollemondse X-strale en ander toepaslike diagnostiese hulpmiddels. So 'n omvattende konsultasie sluit in dat die pasiënt voorsien word van 'n geskrewe behandelingsplan waarin al die volgende vermeld word, en ook op die pasiënt se kaart aangedui word:* • *Sagteweefselondersoek* • *Hardeweefselondersoek* • *Siftingsondersoek van periodontale sakkies* • *Mukogingivale ondersoek* • *Plaakindeks* • *Bloedingsindeks* • *Okklusale ontleding* • *TMG ondersoek* • *Vitaliteitsondersoek van alle tande*	108.00		
8104	Examination or consultation for a specific problem not requiring full mouth examination, charting and treatment planning / *Ondersoek of konsultasie vir 'n spesifieke probleem wat nie vollemondse-ondersoek, kartering en behandelingsbeplanning benodig nie*	32.70		
	Radiographs/Diagnostic imaging / Röntgenfoto's/Diagnostiese afbeelding			
8107	Intra-oral radiographs, per film / *Binnemondse röntgen-foto's, per film*	31.60		
8108	Maximum for 8107 / *Maksimum vir 8107*	237.50		
8113	Occlusal radiographs / *Okklusale röntgenfoto's*	49.20		
8115	Extra-oral radiograph, per film / *Buitemondse röntgenfoto, per film* (i.e. panoramic, cephalometric, PA/ *i.e. panoramies, kefalometries, PA)* The fee is chargeable to a maximum of two films per treatment plan / *Die tarief mag tot 'n maksimum van twee films per behandelingsplan gehef word.*	130.00		

• = New Code * = Revised Code

I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	Tests and laboratory examinations / Toetse en laboratoriumondersoeke			
8117	Study models – unmounted or mounted on a hinge articulator / *Studiemodelle ongemonteer of monteer op skarnier artikulator*	35.50	+L	
8119	Study models – mounted on a movable condyle articulator / *Studiemodelle monteer op artikulator met verstelbare kondiles*	91.20	+L	
8121	Photographs (for diagnostic, treatment or dento-legal purposes) per photograph / *Fotos (vir diagnostiese-, behandelings- of geregtelike doeleindes) per foto*	35.50		
	B. PREVENTIVE / VOORKOMEND			
	This schedule, applicable to occupational injuries and diseases, excludes preventive services / *Hierdie skedule, van toepassing op beroepbeserings en –siektes, sluit nie voorkomende dienste in nie.*			
	C. RESTORATIVE / HERSTELLEND			
	Amalgam restorations (including polishing) / Amalgaam herstellings (polering ingesluit)			
	All adhesives, liners and bases are included as part of the restoration. If pins are used, they should be reported separately / *Alle bindingsmateriale, onderlae en basislae word as deel van die herstelling ingesluit. Indien penne gebruik word, moet dit afsonderlik vermeld word.*			
	See Codes 8345, 8347 and 8348 for post and/or pin retention / *Sien Kodes 8345, 8347 en 8348 vir stif en/of penretensie*			
8341	Amalgam - one surface / *Amalgaam - een vlak*	84.50		T
8342	Amalgam - two surfaces / *Amalgaam - twee vlakke*	105.70		T
8343	Amalgam – three surfaces / *Amalgaam - drie vlakke*	126.80		T
8344	Amalgam - four or more surfaces / *Amalgaam - vier of meer vlakke*	140.90		T
	Resin restorations / Harsherstellings			
	Resin refers to a broad category of materials including but not limited to composites. May include bonded composite, light-cured composite, etc. Light-curing, acid etching and adhesives (including resin bonding agents) are included as part of the restoration. Glass ionomers, when used as restorations should be reported with these codes. If pins are used, they should be reported separately.			
	Harse verwys na 'n wye kategorie van materiaal wat komposiete insluit. Dit mag gebonde, ligverhardende komposiete, ens., insluit. Ligverharding, suur-ets en bindingsmateriale (insluitend hars bindingsagente) is deel van die herstelling. Wanneer glasionomere as herstellings gebruik word, moet hierdie kodes gebruik word. Indien penne gebruik word. Word dit afsonderlik vermeld.			
	See Codes 8345, 8347 and 8348 for post and/or pin retention / *Sien Kodes 8345, 8347 en 8348 vir stif en/of penretensie*			
	The fees are inclusive of direct pulp capping (code 8301) and rubber dam application (code 8304) / *Die tariewe sluit direkte pulpa-oorkapping (kode 8301) en die aanwending van 'n kofferdam (kode 8304) in*			
8351	Resin – one surface, anterior / *Hars - een vlak, anterior*	92.90		T
8352	Resin – two surfaces, anterior / *Hars - twee vlakke, anterior*	105.50		T

• = New Code * = Revised Code

I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8353	Resin – three surfaces, anterior / *Hars – drie vlakke, anterior*	139.50		T
8354	Resin – four or more surfaces, anterior / *Hars – vier of meer vlakke, anterior*	155.00		T
8367	Resin – one surface, posterior / *Hars - een vlak, posterior*	99.90		T
8368	Resin – two surfaces, posterior / *Hars - twee vlakke, posterior*	123.90		T
8369	Resin – three surfaces, posterior / *Hars – drie vlakke, posterior*	149.30		T
8370	Resin – four or more surfaces, posterior / *Hars – vier of meer vlakke, posterior*	158.30		T
	Inlay/Onlay restorations / Inlegsel/Oplegsel herstellings			
	METAL INLAYS / METAALINLEGSELS			
	The fee for metal inlays on anterior teeth (incisors and canines) are 'by arrangement' with the Compensation Commissioner / *Die VVMS voordele vir inlegsels op anterior tande (snytande en hoektande) is 'volgens ooreenkoms' met die Voergoedingskommissaris*			
8358	Inlay, metallic – one surface, anterior / *Inlegsel, metaal – een vlak, anterior*	na/nvt	+L	T
8359	Inlay, metallic – two surfaces, anterior / *Inlegsel, metaal – twee vlakke, anterior*	na/nvt	+L	T
8360	Inlay, metallic – three surfaces, anterior / *Inlegsel, metaal – drie vlakke, anterior*	na/nvt	+L	T
8365	Inlay, metallic – four or more surfaces, anterior / *Inlegsel, metaal – vier of meer vlakke, anterior*	na/nvt	+L	T
8361	Inlay, metallic – one surface, posterior / *Inlegsel, metaal – een vlak, posterior*	153.40	+L	T
8362	Inlay, metallic – two surfaces, posterior / *Inlegsel, metaal – twee vlakke, posterior*	224.20	+L	T•
8363	Inlay, metallic – three surfaces, posterior / *Inlegsel, metaal – drie vlakke, posterior*	452.10	+L	T
8364	Inlay, metallic – four or more surfaces, posterior / *Inlegsel, metaal – vier of meer vlakke, posterior*	452.10	+L	T
	CERAMIC AND/OR RESIN INLAYS / KERAMIEK EN/OF HARS INLEGSELS			
	Porcelain/ceramic inlays presently include either all ceramic or porcelain inlays. Composite/resin inlays must be laboratory processed /			
	Porselein/keramiek inlegsels sluit vir die huidige alle keramiek of porselein inlegsels in. Komposiet/hars inlegsels moet in 'n laboratorium verwerk word			
	NOTE: The fees exclude the application of a rubber dam (code 8304) / *NOTA: Die tariewe sluit die aanwending van 'n kofferdam (kode 8304) uit.*			
8371	Inlay, ceramic/resin – one surface / *Inlegsel, keramiek/hars – een vlak*	153.40	+L	T
8372	Inlay, ceramic/resin – two surfaces / *Inlegsel, keramiek/hars – twee vlakke*	224.20	+L	T
8373	Inlay, ceramic/resin - three surfaces / *Inlegsel, keramiek/hars – drie vlakke*	374.10	+L	T
8374	Inlay, ceramic/resin - four or more surfaces / *Inlegsel, keramiek/hars – vier of meer vlakke*	452.10	+L	T

I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
(M/W)	NOTES / *NOTAS* 1. In some of the above cases (e.g. Direct hybrid inlays) +L may not necessarily apply *In sommige bogenoemde gevalle (bv. direkte gemengde hars inlegsels) mag +L nie noodwendig van toepassing wees nie.* 2. In cases where the direct hybrid inlays are used and +L does not apply, Modifier 8008 may be used *In gevalle waar die direkte gemengde hars inlegsels gebruik word en +L nie van toepassing is nie, mag Wysiger 8008 gebruik word.* 3. See the General Practitioner's Guideline to the correct use of treatment codes for computer generated inlays. *Sien die Algemene Praktisyn se Riglyne vir die korrekte gebruik van behandelingskodes in sake rekenaar gegenereerde inlegsels*			
	Crowns – single restorations / Krone – enkel herstellings The fees/benefits include the cost of temporary and/or intermediate crowns. See code 8193 (osseo integrated abutment restoration) in the 'fixed prosthodontic' category for crowns on osseo-integrated implants *Die gelde/voordele sluit die koste van voorlopige en/of tussentydse krone in. Sien kode 8193 (been-geïntegreerde ankertand herstelling) in kategorie 'vaste prostodonsie' vir krone op been-geïntegreerde implantate.*			
8401	Cast full crown / *Gegote volle kroon*	536.90	+L	T
8403	Cast three-quarter crown / *Gegote driekwartkroon*	536.90	+L	T
8405	Acrylic jacket crown / *Akrieldopkroon*	Com Fee	+L	T
8407	Acrylic veneered crown / *Akrielgefineerde kroon*	573.20	+L	T
8409	Porcelain jacket crown / *Porseleindopkroon*	573.20	+L	T
8411	Porcelain veneered crown/ *Porseleingefineerde kroon*	573.20	+L	T
	Other restorative services / Ander herstellende dienste			
8133	Re-cementing of inlays, crowns or bridges - per abutment / *Hersementering van inlegsels, krone of brûe- per ankertand* In some cases where item 8133 is used +L may not apply *In sommige gevalle waar item 8133 gebruik word mag +L nie van toepassing wees nie.*	49.20	+L	T
8135	Removal of inlays and crowns (per unit) and bridges (per abutment) or sectioning of a bridge, part of which is to be retained as a crown following the failure of a bridge / *erwydering van inlegsels en krone (per eenheid) en brûe (per ankertand) of seksie van 'n brug, waarvan 'n deel behou moet word as 'n kroon as gevolg van die mislukking van 'n brug*	96.70	+L	T
8137	Temporary crown placed as an emergency procedure / *Tydelike kroon, geplaas as 'n noodprosedure* Not applicable to temporary crowns placed during routine crown and bridge preparations i.e. where the impression for the final crown is taken at the same visit / *Nie van toepassing op tydelike krone wat tydens roetine kroon- en brugwerk geplaas word nie, maw. waar die afdruk vir die finale kroon tydens dieselfde besoek geneem word nie*	165.30	+L	T
8330	Removal of fractured post or instrument and/or bypassing fractured endodontic instrument / *Verwydering van gefraktuurde stif of instrument en/of omleiding om 'n gefraktuurde endodontiese instrument* NOTE: The fee excludes the application of a rubber dam (code 8304) / *NOTA: Die tarief sluit die aanwending van 'n kofferdam (kode 8304) uit.*	64.60		T
8345	Preformed post retention, per post / *Vooraf-vervaardigde stifversterking, per stif*	71.50		T

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I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8347	Pin retention for restoration, first pin / *Penversterking vir herstelling, eerste pen*	49.20		T
8348	Pin retention for restoration, each additional pin / *Penversterking vir herstelling, elke bykomende pen* A maximum of two additional pins may be charged / *'n Maksimum van twee bykomende penne mag gehef word*	42.50		T
8355	Composite veneers (Direct) / *Harsfinere (Direkte)*	156.80		T
8357	Preformed metal crown / *Voorafgevormde metaalkroon*	104.10		T
8366	Pin retention as part of cast restoration, irrespective of number of pins / *Penretensie as deel van gegote herstelling, ongeag aantal penne*	76.00		T
8376	Prefabricated post and core in addition to crown / *Vooraf vervaardigde stif en kern bykomend tot kroon* The core is built around a prefabricated post(s) / *Die kern word rondom 'n voorafvervaardigde stif (stiwwe) opgebou*	253.60		T
8391	Cast post and core – single / *Gegote stif en kern – enkel*	115.20	+L	T
8393	Cast post and core – double / *Gegote stif en kern – tweeledig*	184.30	+L	T
8395	Cast post and core – triple / *Gegote stif en kern – drieledig*	265.80	+L	T
8396	Cast coping / *Gegote vingerhoed*	75.50	+L	T
8397	Cast core with pins / *Gegote kern met penne* This service is usually provided on grossly brokendown vital teeth, and may not be charged when a post has been inserted in the tooth in question / *Hierdie prosedure word gewoonlik toegepas op erg vernietigde vitale tande, en mag nie gehef word wanneer 'n stif in die betrokke tand geplaas is nie.*	184.30	+L	T
8398	Core build-up, including any pins / Opbou van kern, alle penne ingesluit Refers to building up of anatomical crown when restorative crown will be placed, irrespective of the number of pins used / *Verwys na die opbou van anatomiese kroon wanneer 'n herstellende kroon geplaas gaan word, met of sonder die gebruik van penne*	184.30		T
8413	Facing replacement / *Vervanging van gesigstuk*	112.60	+L	T
8414	Additional fee for provision of crown within an existing clasp or rest / *Bykomende gelde vir voorsiening van 'n kroon binne 'n bestaande klammer of rus*	35.30	+L	T
	D. ENDODONTICS / ENDODONSIE			
	Preamble / Inleiding: 1. The National Medical and Dental Council has ruled that, with the exception of diagnostic intra-oral radiographs, fees/benefits for only three further intra-oral radiographs may be charged for each completed root canal therapy on a single-canal tooth; or a further five intra-oral radiographs for each completed root canal therapy on a multi-canal tooth / *Die Tandheelkundige Raad het beslis dat, met uitsondering van diagnostiese binnemondse röntgenfoto's, gelde/voordele vir slegs drie verdere binnemondse röntgenfoto's gevra mag word vir elke voltooide wortelkanaalterapie op 'n enkelkanaal tand en 'n verdere vyf röntgenfoto's vir elke voltooide wortelkanaalterapie op 'n veelkanaaltand.*			

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I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	2. The fee for the application of a rubber dam (See code 8304 in the category "Adjunctive General Services") may only be charged concurrent with the following procedures / *Die VVMS tarief vir die aanwending van 'n kofferdam (Sien kode 8304 in die kategorie "Bygevoegde Algemene Dienste") mag slegs tesame met die volgende prosedures gehef word:* • Emergency root canal treatment (code 8132) / *Noodbehandeling van wortelkanaal (kode 8132);* • Apexification of a root canal (code 8305) / Apeksifikasie van *wortelkanaal (kode 8305);* • Pulpotomy (code 8307) / *Pulpotomie (kode 8307);* • Complete root canal therapy (codes 8328, 8329 and 8332 to 8340)/ *Voltooide wortelkanaalbehandeling (kodes 8328, 8329 en 8332 tot 8340);* • Removal or bypass of a fractured post or instrument (code 8330)/ *Verwydering of omleiding van 'n gefraktuurde stif of instrument (kode 8330);* • Bleaching of non vital teeth (codes 8325 and 8327) and / *Bleiking van nie-vitale tande (kodes 8325 en 8327)* en • Ceramic and or resin inlays (codes 8371 to 8374) / *Keramiek en of hars inlegsels (kodes 8371 tot 8374)* 3. An emergency root canal treatment (code 8132) may not be charged concurrent with any other endodontic procedures performed at the same visit (code 8304 excluded). Once 8132 has been charged for a tooth, no single visit endodontic treatment procedures (codes 8329, 8338, 8339 and 8340) may be performed on the same tooth at any subsequent visit / *'n Nood wortelkanaalbehandeling (kode 8132) mag nie tesame met enige ander endodontiese prosedures tydens dieselfde besoek gehef word nie (kode 8304 uitgesluit). Nadat kode 8132 vir 'n tand gehef is, mag daar geen endodontiese behandelings-prosedures wat tydens 'n enkel besoek voltooi word (kodes 8329, 8338, 8339 en 8340) in daaropvolgende besoeke op dieselfde tand uitgevoer word nie.* 4. After endodontic preparatory visits (codes 8332, 8333 and 8334) have been charged, endodontic treatment completed at a single visit (codes 8329, 8338, 8339 and 8340) may not be levied. / *Nadat endodontiese voorbereidingsbesoeke (kodes 8332, 8333 en 8334) toegepas is, mag daar nie vir endodontiese behandeling wat tydens 'n enkel besoek voltooi word (kodes 8329, 8338, 8339 en 8340) gehef word nie*			
	Pulp capping / Pulpa-oorkapping			
8301	Direct pulp capping / *Direkte pulpa oorkapping*	Com Fee		T
8303	Indirect pulp capping / *Indirekte pulpa-oorkapping* The permanent filling is not completed at the same visit / *Die permanente herstelling word nie gedurende dieselfde besoek voltooi nie*	63.80		T
	Pulpotomy / Pulpotomie			
8307	Amputation of pulp (pulpotomy) / *Amputasie van pulpa (pulpotomie)*	38.50		T

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I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	No other endodontic procedure may, in respect of the same tooth, be charged concurrent to code 8307 and a completed root canal therapy should not be envisaged (code 8304 excluded) / *Geen ander endodontiese prosedure mag tesame met kode 8307 gehef word nie en 'n volledige wortelkanaalbehandeling behoort nie beoog te word nie (kode 8304 uitgesluit)*			
	Endodontic therapy (including treatment plan, clinical procedures and follow-up care) / Endodontiese behandeling (behandelingsbeplanning, kliniese prosedures en nasorg ingesluit)			
	PREPARATORY VISITS (OBTURATION NOT DONE AT SAME VISIT)/ VOORBEREIDINGSBESOEKE (VULLING NIE TYDENS DIESELFDE BESOEK GEDOEN NIE)			
8332	Single-canal tooth, per visit / *Enkelkanaal tand, per besoek* A maximum of four visits per tooth may be charged / *'n Maksimum van vier besoeke mag per tand gehef word*	49.20		T
8333	Multi-canal tooth, per visit / *Meerkanaal tand, per besoek* A maximum of four visits per tooth may be charged / *'n Maksimum van vier besoeke mag per tand gehef word*	68.40		T
	OBTURATION OF ROOT CANALS AT A SUBSEQUENT VISIT / VULLING VAN WORTELKANALE TYDENS 'N DAAROPVOLGENDE BESOEK			
8335	First canal - anteriors and premolars / *Eerste kanaal -anteriors en premolare*	224.30		T
8328	Each additional canal - anteriors and premolars / *Elke bykomende kanaal - anteriors en premolare*	86.30		T
8336	First canal - molars / *Eerste kanaal - molare*	308.10		T
8337	Each additional canal - molars / *Elke bykomende kanaal - molare*	91.20		T
	PREPARATION AND OBTURATION OF ROOT CANALS COMPLETED AT A SINGLE VISIT / VOORBEREIDING EN VULLING VAN WORTELKANALE GEDURENDE EEN BESOEK VOLTOOI			
8338	First canal - anteriors and premolars / *Eerste kanaal -anteriors en premolare*	342.00		T
8329	Each additional canal - anteriors and premolars / *Elke bykomende kanaal - anteriors en premolare*	108.60		T
8339	First canal - molars / *Eerste kanaal - molare*	469.80		T
8340	Each additional canal - molars / *Elke bykomende kanaal - molare*	114.60		T
	Endodontic retreatment / Endodontiese herbehandeling			
8334	Re-preparation of previously obturated canal, per canal / *Hervoorbereiding van kanaal wat voorheen gevul was*	72.80		T
	Apexification/recalcification procedures / Apeksifikasie/herkalsifikasie prosedures			
8305	Apexification of root canal, per visit / *Apeksifikasie van wortelkanaal, per besoek* No other endodontic procedures may, in respect of the same tooth, be charged concurrent to code 8305 at the same visit (code 8304 excluded) / *Geen ander endodontiese prosedure mag tesame met kode 8305 tydens dieselfde besoek ten opsigte van dieselfde tand gehef word nie (kode 8304 uitgesluit)*	61.80		T

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Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	Apicoectomy/Periradicular services / Apisektomie/Periradikulêre dienste			
8229	Apicoectomy including retrograde filling where necessary – incisors and canines / *Apisektomie insluitend retrograde herstelling waar nodig - snytande en oogtande*	244.80		T
	Other endodontic procedures / Ander endodontiese prosedures			
8132	Emergency root canal treatment / *Noodbehandeling van wortelkanaal* (See notes 2 and 3 in the preamble above / *Sien notas 2 en 3 in die inleiding hierbo*)	79.40		T
8136	Access through a prosthetic crown or inlay to facilitate root canal treatment/ *Toegang deur 'n prostetiese kroon of inlegsel om wortelkanaalbehandeling te vergemaklik*	38.30		T
8325	Bleaching of non-vital teeth, per tooth as a separate procedure / *Bleiking van nie-vitale tande, per tand as 'n afsonderlike prosedure*	110.90		T
8327	Each additional visit for bleaching of non-vital tooth as a separate procedure / *Elke bykomende besoek vir bleiking van nie-vitale tande as 'n afsonderlike prosedure* A maximum of two additional visits may be charged / *'n Maksimum van twee bykomende besoeke mag gehef word*	52.80		T
	E. PERIODONTICS / PERIODONSIE This schedule, applicable to occupational injuries and diseases, do not include periodontic services / *Hierdie skedule, van toepassing op beroepsbeserings en –siektes, sluit nie periodontiese dienste in nie.*			
	F. PROSTHODONTICS (REMOVABLE) / PROSTODONSIE (VERPLAASBAAR)			
	Complete dentures (including routine post-delivery care) / Volledige kunsgebitte (roetine nasorg ingesluit)			
8231	Full upper and lower dentures inclusive of soft bases or metal bases, where applicable / *Vol bo- en onderkunsgebit, insluitend sagtebasisse of metaal-basisse, waar van toepassing*	783.00	+L	
8232	Full upper or lower dentures inclusive of soft base or metal base, where applicable / *Vol bo-of onderkunsgebit, insluitend sagte basis of metaalbasis, waar van toepassing*	482.60	+L	
	Partial dentures (including routine post-delivery care) / Gedeeltelike kunsgebitte (roetine nasorg ingesluit)			
8233	Partial denture, one tooth / *Gedeeltelike kunsgebit met een tand*	224.20	+L	
8234	Partial denture, two teeth / *Gedeeltelike kunsgebit met twee tande*	224.20	+L	
8235	Partial denture, three teeth / *Gedeeltelike kunsgebit met drie tande*	335.10	+L	
8236	Partial denture, four teeth / *Gedeeltelike kunsgebit met vier tande*	360.70	+L	
8237	Partial denture, five teeth / *Gedeeltelike kunsgebit met vyf tande*	335.10	+L	
8238	Partial denture, six teeth / *Gedeeltelike kunsgebit met ses tande*	446.60	+L	
8239	Partial denture, seven teeth / *Gedeeltelike kunsgebit met sewe tande*	446.60	+L	

I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8240	Partial denture, eight teeth / *Gedeeltelike kunsgebit met agt tande*	446.60	+L	
8241	Partial denture, nine or more teeth / *Gedeeltelike kunsgebit met nege of meer tande*	446.60	+L	
8281	Metal (e.g. chrome cobalt, gold, etc.) base to partial denture, per denture / *Metaal (bv. chroomkobalt of goud) basis vir gedeeltelike kunsgebit, per gebit* The procedure refers to the metal framework only, and includes all clasps, rests and bars (i.e., 8251, 8253, 8255 and 8257). See codes 8233 to 8241 for the resin denture base required concurrent to 8281 / *Die prosedure verwys alleenlik na die metaalraam, en sluit alle klammers, ruste en stange (i.e. 8251, 8253, 8255 en 8257) in. Sien kodes 8233 to 8241 vir akriel kunsgebit basis wat tesame met 8281 benodig word*	596.30	+L	
	Adjustments to dentures / Verstellings aan kunsgebitte			
8275	Adjustment of denture / *Verstelling van kunsgebit* (After six months or for patient of another practitioner / *Na ses maande of vir 'n pasiënt van 'n ander tandarts)*	33.80	+L	
	Repairs to complete or partial dentures / Reparasie aan vol- of gedeeltelike kunsgebitte			
8269	Repair of denture or other intra-oral appliance / *Herstel van kunsgebit of ander binnemondse toestel*	64.30	+L	
•	A dentist may not charge professional fees for the repair of dentures if the patient was not personally examined; laboratory fees, however, may be recovered / *'n Tandarts mag nie professionele gelde vir die herstel van kunsgebitte hef indien die pasiënt nie persoonlik ondersoek was nie; laboratoriumfooie mag egter gevorder word.*			
8270	Add clasp to existing partial denture / *Byvoeging van 'n klammer tot bestaande gedeeltelike gebit* (One or more clasps/ Een of meer klammers)	42.50	+L	
•	Code 8270 is in addition to code 8269 / *Kode 8270 is bykomend tot kode 8269.*			
8271	Add tooth to existing partial denture / *Byvoeging van 'n tand tot bestaande gedeeltelike gebit* (One or more teeth / Een of meer tande)	42.50	+L	
•	Code 8271 is in addition to code 8269 / *Kode 8271 is bykomend tot kode 8269.*			
8273	Additional fee/benefit where one or more impressions are required for 8269, 8270 and 8271 / *Bykomende gelde/voordeel waar een of meer afdrukke nodig is vir kodes 8269, 8270 en 8271*	33.80	+L	
	Denture rebase procedures / Herbaseringprosedures vir kunsgebitte			
8261	Re-model of denture / *Hermodelering van kunsgebit*	302.70	+L	
	Denture reline procedures / Opvullingprosedures vir kunsgebitte			
8259	Reline of denture (laboratory) / *Opvulling van kunsgebit (laboratorium)*	184.30	+L	
8263	Reline of denture in selfcuring acrylic (intra-oral) / *Opvulling van kunsgebit met selfverhardende akriel (intra-oraal)*	115.20		
8267	Soft base re-line per denture (heat cured) / *Sagte basis opvulling, per kunsgebit (met hitte verhard)* Code 8267 may not be charged concurrent with codes 8231 to 8241 / *Kode 8267 mag nie gelyktydig met kodes* 8231 tot 8241 *gehef word nie.*	265.80	+L	

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Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	Other removable prosthetic services / Ander verplaasbare prostetiese dienste			
8243	Soft base to new denture / *Sagte basis vir nuwe gebit*	Com Fee	+L	
8255	Stainless steel clasp or rest per clasp or rest / *Klammer of rus van vlekvryestaal, per klammer of rus*	46.40	+L	
8257	Lingual bar or palatal bar / *Linguale stang of palatale stang* Code 8257 may not be charged concurrent to codes 8269 (repair of denture) or 8281 (metal framework) / *Kodes 8257 mag nie tesame met kodes 8269 (herstel van gebit) of 8281 (metaalraamwerk) gehef word nie.*	56.00	+L	
8265	Tissue conditioner and soft self-cure interim re-line, per denture / *Weefselopknapper en sagte selfverhardende interim opvulling, per kunsgebit*	76.50		
	G. MAXILLOFACIAL PROSTHETICS / GESIGSPROSTESES This schedule, applicable to occupational injuries and diseases, excludes maxillofacial prosthetic services / *Hierdie skedule, van toepassing op beroepsbeserings en –siektes, sluit nie gesigsprosteses in nie.*			
	H. IMPLANT SERVICES / INPLANTAAT DIENSTE Report surgical implant procedures using codes in this section; prosthetic devices should be reported using existing fixed or removable prosthetic codes / *Vermeld chirurgiese prosedures deur van kodes in hierdie afdeling gebruik te maak; prostetiese toestelle word vermeld deur van bestaande vaste- of verplaasbare prostetiek kodes gebruik te maak.*			
	Endosteal implants / Endosteale inplantate Endosteal dental implants are placed into the alveolar and/or basal bone of the mandible or maxilla and transecting only one cortical plate / *Endosteale tandheelkundige inplantate word in die alveolêre en/of basale been van die mandibula of maksilla geplaas en strek slegs deur een kortikale beenplaat.*			
8194	Placement of a single osseo-integrated implant per jaw / *Plasing van een osseo-integrerende inplantaat per kaak*	488.50		T
8195	Placement of a second osseo-integrated implant in the same jaw / *Plasing van 'n tweede osseo-integrerende inplantaat in dieselfde kaak*	365.50		T
8196	Placement of a third and subsequent osseo-integrated implant in the same jaw per implant / *Plasing van 'n derde en daaropvolgende osseo-integrerende inplantaat in dieselfde kaak, per inplantaat*	244.00		T
8197	Cost of implants / Koste van inplantaat	Reël 013		
8198	Exposure of a single osseo-integrated implant and placement of a transmucosal element / *Blootlegging van een osseo-integrerende inplantaat en plasing van 'n transmukosale element*	181.00		T
8199	Exposure of a second osseo-integrated implant and placement of a transmucosal element in the same jaw / *Blootlegging van 'n tweede osseo-integrerende inplantaat en plasing van 'n transmukosale element in dieselfde kaak*	135.80		T
8200	Exposure of a third and subsequent osseo-integrated implant in the same jaw, per implant / *Blootlegging van 'n derde en daaropvolgende osseo-integrerende inplantaat in dieselfde kaak, per inplantaat*	90.60		T

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Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	Eposteal implants / Eposteale inplantate Eposteal (subperiosteal) dental implants receive its primary bone support by means of resting on the alveolar bone / *Eposteale (subperiosteale) tandheelkundige inplantate rus op die alveolêre been vir primêre ondersteuning.* See the specialist maxillo-facial and oral surgeons schedule / *Sien die spesialis kaak-, gesigs- en mondchirurg skedule* **Transosteal implants / Transosteale inplantate** Transosteal dental implants penetrates both cortical plates and passes through the full thickness of the alveolar bone / *Transosteale tandheelkundife inplantate penetreer beide die kortikale beenplate en strek deur die volledige dikte van die alveolêre been.* See the specialist maxillo-facial and oral surgeons schedule / *Sien die spesialis kaak-, gesigs- en mondchirurg skedule*			
	I. PROSTHODONTICS, FIXED / PROSTODONSIE, VAS The words 'bridge' and 'bridgework' have been replaced by the statement 'fixed partial denture' / *Die woorde 'brug' en 'brugwerk' is deur die stelling 'vaste gedeeltelike gebit' vervang* Each abutment and each pontic constitutes a unit in a fixed partial denture / *Elke anker en foptand vorm 'n eenheid in 'n vaste gedeeltelike kunsgebit.* **Fixed partial denture pontics / Vaste gedeeltelike kunsgebit foptande**			
8420	Sanitary pontic / *Sanitêre foptand*	279.90	+L	T
8422	Posterior pontic / *Posterior foptand*	374.10	+L	T
8424	Anterior pontic (including premolars) / *Anterior foptand (sluit premolare in)*	468.30	+L	T
	Fixed partial denture retainers – inlays/onlays / Ankers vir vaste gedeeltelike gebitte – inlegsels/oplegsels See inlay/onlay restorations for inlay/onlay retainers / *Sien inlegsel/oorlegsel herstellings vir inlegsels/oorlegsels as ankers*			
8356	Bridge per abutment - only applicable to Maryland type bridges / *Brug anker, per anker - slegs van toepassing op Maryland tipe brûe* Only applicable to Maryland type bridges. Report per abutment. Report pontics seperately (see codes 8420, 8422 and 8424) / *Slegs op Maryland tipe brûe van toepassing Rapporteer per anker. Rapporteer foptande afsonderlik (sien kodes 8420, 8422 en 8424)*	207.60	+L	T
	Fixed partial denture retainers – crowns / Ankers vir vaste gedeeltelike gebitte – krone See crowns, single restorations for crown retainers / *Sien krone, enkel herstelling vir krone as ankers*			
8193	Osseo-integrated abutment restoration, per abutment / *Been-geïntegreerde ankertand herstelling, per ankertand* See the DASA's 'General Practioner's Guidelines to the correct use of treatment codes' for the application(s) of this code / *Sien die TVSA se "Algemene Praktisyn se Riglyne vir die korrekte gebruik van behandelingskodes' vir die aanwending(s) van die kode.*	759.50	+L	T

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I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	J. ORAL AND MAXILLOFACIAL SURGERY / KAAK-, GESIG- EN MONDCHIRURGIE			
	See the specialist maxillo-facial and oral surgeons schedule for surgical services not listed in this schedule / *Sien die spesialis kaak-, gesigs- en mondchirurg skedule vir chirurgiese dienste wat nie in die skedule voorkom nie.*			
	Extractions / Ekstraksies			
8201	Single tooth / *Enkel tand* Code 8201 is charged for the first extraction in a quadrant / *Kode 8201 word vir die eerste ekstraksie in 'n kwadrant gehef.*	49.20		T
8202	Each additional tooth in the same quadrant / Elke bykomende tand in dieselfde kwadrant Code 8202 is charged for each additional extraction in the same quadran / *Kode 8202 word vir elke bykomende ekstraksie in dieselfde kwadrant gehef.*	69.00		T
	Surgical extractions (includes routine postoperative care) / Chirurgiese ekstraksies (roetine nabehandelingsorg ingesluit)			
8209	Surgical removal of a tooth, i.e. raising of mucoperiosteal flap, removal of bone and suturing / *Chirurgiese verwydering van 'n tand, d.w.s. maak van mukoperiosteale flap, verwydering van been en hegting*	151.20		T
8210	Removal of unerupted or impacted tooth – first tooth / *Verwydering van ongeërupteerde of beklemde tand – eerste tand*	354.00		T
8211	Removal of unerupted or impacted tooth – second tooth / *Verwydering van ongeërupteerde of beklemde tand – tweede tand*	190.00		T
8212	Removal of unerupted or impacted tooth – each additional tooth / *Verwydering van ongeërupteerde of beklemde tand – elke bykomende tand*	108.10		T
8213	Surgical removal of residual roots of first tooth / *Chirurgiese verwydering van wortelreste van eerste tand*	218.20		T
8214	Surgical removal of residual roots of each subsequent tooth / *Chirurgiese verwydering van wortelreste van elke daaropvolgende tand*	154.60		T
	Other surgical procedures / Ander chirurgiese prosedures			
8188	Biopsy - intra-oral / *Biopsie – binnemonds* This item does not include the cost of the essential pathological evaluations / *Hierdie item sluit nie die koste van die noodsaaklike patologiese evaluasies in nie.*	119.10		
	Repair of traumatic wounds / Herstel van traumatiese wonde			
8192	Appositioning (i.e., suturing) of soft tissue injuries / *Hegting van sagte weefselbeserings*	244.80		
	K. ORTHODONTICS / ORTODONSIE			
	This schedule, applicable to occupational injuries and diseases, excludes orthodontic services / *Hierdie skedule, van toepassing op beroepbeserings en –siektes, sluit nie ortodontiese dienste in nie.*			

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I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	L. ADJUNCTIVE GENERAL SERVICES / BYGEVOEGDE ALGEMENE DIENSTE			
	Unclassified treatment / Ongeklassifiseerde behandeling			
8131	Emergency treatment where no other treatment item is applicable or applied for treatment of the same tooth / *Noodbehandeling waarop geen ander tarief item van toepassing is, of toegepas word ten opsigte van dieselfde tand nie*	49.20		T
8221	Local treatment of post-extraction haemorrhage – initial visit / *Lokale behandeling van post-ekstraksie bloeding – aanvanklike besoek* (Excluding treatment of bleeding in the case of blood dyscrasias, e.g. haemophilia / *Sluit die behandeling van bloeding in die geval van bloedsiektes bv. hemofilie uit)*	34.50		
8223	Local treatment of post-extraction haemorrhage – each additional visit / *Lokale behandeling van post-ekstraksie bloeding – elke bykomende besoek*	22.10		
8225	Treatment of septic socket – initial visit / *Behandeling van septiese tandkas – aanvanklike besoek*	34.50		
8227	Treatment of septic socket – each additional visit / *Behandeling van septiese tandkas – elke bykomende besoek*	22.10		
	Anaesthesia / Verdowing			
8141	Inhalation sedation or electronic analgesia - first quarter-hour or part-thereof / *Inhaleringskalmering of elektroniese pyndoder - eerste kwartier of gedeelte daarvan*	34.50		
8143	Inhalation sedation or electronic analgesia – each additional quarter-hour or part thereof / *Inhaleringskalmering of elektroniese pyndoder – elke bykomende kwartier of gedeelte daarvan* No additional fee/benefit to be charged for gases used in the case of items 8141 and 8143 / *Geen addisionele gelde/voordeel mag gehef word ten opsigte van gasse gebruik in die geval van items 8141 en 8143 nie*	18.70		
8144	Intravenous sedation / *Intraveneuse sedasie*	22.90		
8145	Local anaesthetic, per visit / *Plaaslike verdowing, per besoek*	8.00		
8499	The relevant MASA/RAMS services shall apply to general anaesthetics for dental procedures / *Die toepaslike MVSA/VVMS dienste is op algemene narkose vir tandheelkundige prosedures van toepassing.*			
	Professional visits / Professionele besoeke			
8129	Additional fee/benefit for emergency treatment rendered outside normal working hours (including emergency treatment carried out at hospital) Not applicable where a practice offers an extended hours service as the norm / *Bykomende gelde/voordeel vir noodgevalle, waar die behandeling buite die normale spreekure uitgevoer is (insluitende noodbehandeling wat by 'n hospitaal uitgevoer is) Nie van toepassing waar 'n praktyk uitgebreide diensure as die reel aanbied nie*	119.10		

I	GENERAL DENTAL PRACTITIONERS ALGEMENE TANDHEELKUNDIGE PRAKTISYNS			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8140	Fee for treatment at a venue other than the surgery, inclusive of hospital visits, treatment under general anaesthetic, home visits; per visit / *Gelde vir behandeling by 'n plek anders as die spreekkamer, met inbegrip van hospitaalbesoeke, behandeling onder algemene narkose, tuisbesoeke; per besoek* Code 8140 may be applied concurrent with codes 8101 or 8104, but in accordance with rule 001 / *Kode 8140 kan gelyktydig met kodes 8101 of 8104 toegepas word, maar ooreenkomstig reël 001*	75.90		
	Drugs, medicaments and materials / Geneesmiddels, medikamente en materiale			
8183	Intra-muscular or sub-cutaneous injection therapy, per injection / *Intramuskulêre of subkutane inpuitingsterapie, per inspuiting* (Not applicable to local anaesthetic / *Nie van toepassing op plaaslike verdowing nie)*	21.00		
8220	Use of suture provided by practitioner / *Gebruik van hegting wat deur praktisyn verskaf is*	Reël 013		
	Miscellaneous services / Diverse dienste			
8109	Infection control, per dentist, per hygienist, per dental assistant, per visit / *Infeksiebeheer, per tandarts, per mondhigienis, per assistent, per besoek* Code 8109 includes the provision by the dentist of new rubber gloves, masks, etc. for each patient / *Kode 8109 sluit die verskaffing, deur die tandarts, van nuwe rubberhandskoene, maskers ens. in*	6.10		
8110	Provision of heat or vapour sterilized and wrapped instrumentation at the consulting rooms / *Verskaffing van hitte- of vogtige hitte gesteriliseerde en verpakte instrumentasie by die spreekkamer* (Applicable mostly to surgical procedures involving incisions and suturing / *Meestal van toepassing op chirurgiese prosedures wat insnydings en hegting behels)*	17.50		
8304	Rubber dam, per arch / *Kofferdam per tandboog* (See the guidelines for the application of a rubberdam in the preamble to the category "Endodontics" / *Sien die riglyne vir die aanwending van 'n kofferdam in die inleiding tot die kategorie "Endodonsie")*	37.60		

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II. SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE

II SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE

(M) See Rule 009/ (W) Sien Reël 009

Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	A. DIAGNOSTIC PROCEDURES / DIAGNOSTIESE PROSEDURES			
8501	Consultation / *Konsultasie*	91.20		
8107	Intra-oral radiographs, per film / *Binnemondse röntgen-foto's, per film*	31.60		
8108	Maximum for 8107 / *Maksimum vir 8107*	254.20		
8113	Occlusal radiographs / *Okklusale röntgenfoto's*	49.20		
8115	Extra-oral radiograph, per film / *Buitemondse röntgenfoto, per film* (i.e. Panoramic, cephalometric, PA / *i.e. Panoramies, kefalometries. PA)* The fee is chargeable to a maximum of two films per treatment plan / *Die tarief mag tot 'n maksimum van twee films per behandelingsplan gehef word.*	130.30		
8117	Study models - unmounted / *Studiemodelle - ongemon-teer*	35.50	+L	
8119	Study models - mounted on adjustable articulator / *Studiemodelle - op verstelbare artikulator gemonteer*	91.20	+L	
8121	Diagnostic photographs, per photograph / *Diagnostiese fotos, per foto*	35.50		
8503	Occlusal analysis on adjustable articulator / *Okklusale analise op verstelbare artikulator*	186.70		
8505	Pantographic recording / *Pantograafregistrasies*	272.20		
8506	Detailed clinical examination, records, radiographic interpretation, diagnosis, treatment planning and case presentation / Gedetailleerde kliniese ondersoek, rekords, radiografiese interpretasie, diagnose, behandelings-beplanning en uiteensetting van geval. Note: Code 8506 is a separate procedure from 8507 and is applicable to craniomandibular disorders, implant placement or orthognatic surgery where extensive restorative procedures will be required / Kode 8506 is 'n afsonderlike prosedure van kode 8507 en is van toepassing op kraniomandibulêre steurnisse, plasing van implantate en ortognatiese-chirurgie waar uitgebreide herstellende prosedures benodig word.	302.70		
8507	Examination, diagnosis and treatment planning / *Ondersoek, diagnose en behandelingsbeplanning*	186.70		
8508	Electrognathographic recording / *Elektrognatografiese opname*	291.70		
8509	Electrognathographic recording with computer analysis / *Elektrognatografiese opname met rekenaaranalise.*	485.50		
	B. PREVENTIVE PROCEDURES / VOORKOMENDE PROSEDURES This schedule, applicable to occupational injuries and diseases, excludes preventive services / *Hierdie skedule, van toepassing op beroepbeserings en –siektes, sluit nie voorkomende dienste in nie.*			
	C. TREATMENT PROCEDURES / BEHANDELINGSPROSEDURES			

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II	SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	Emergency treatment / Noodbehandeling			
8511	Emergency treatment for relief of pain (where no other tariff item is applicable) / *Noodbehandeling vir pyn-verligting (waarop geen ander tariefitem van toepassing is nie)*	112.60		
8513	Emergency crown / *Noodkroon* (Not applicable to temporary crowns placed during routine crown and bridge preparations/ *Nie van toepassing op die plasing van tydelike krone gedurende roetine kroon en brug voorbereidings nie)*	184.30	+L	T
8515	Recementing of inlay, crown or bridge, per abutment / *Hersementering van inlegsels, kroon of brug, per ankertand*	71.50		T
8517	Re-implantation of an avulsed tooth, including fixation as required / *Herinplantering van 'n uitgestampte tand, insluitende verankering soos benodig*	190.80	+L	T
	Provisional treatment / Tydelike behandeling			
8521	Provisional splinting – extracoronal wire, per sextant / *Tydelike spalking – ekstrakoronale draad, per sekstant.*	153.40		
8523	Provisional splinting – extracoronal wire plus resin, per sextant / *Tydelike spalking - ekstrakoronale draad plus hars, per sekstant*	224.20		
8527	Provisional splinting – intercoronal wire or pins or cast bar, plus amalgam or resin, per dental unit included in the splint / *Tydelike spalking - interkoronale draad of penne of gegote stang plus amalgaam of hars, per tandeenheid in die spalk ingesluit*	71.50	+L	
8529	Provisional crown, which is not placed during routine crown preparation / *Voorlopige kroon wat nie gedurende roetine kroonvoorbereiding geplaas word nie*	184.30	+L	T
8530	Preformed metal crown / *Voorafvervaardigde metaalkroon*	156.40		T
	Occlusal adjustment / Okklussale verstelling			
8551	Major occlusal adjustment / *Volledige okklussale verstelling* This procedure can not be carried out without study models mounted on an adjustable articulator / *Hierdie prosedure mag nie uitgevoer word sonder studiemodelle op verstelbare artikulator gemonteer nie.*	524.40		
8553	Minor occlusal adjustment / *Geringe okklusale verstelling*	165.30		
	Ceramic and/or resin bonded inlays and veneers / Keramiek en/of harsgebonde inlegsels en finere : In some of the procedures below (e.g. Direct hybrid inlays) +L may not apply / *In sommige van die ondergenoemde prosedures (bv. Direkte gemengde hars inlegsels) mag +L nie van toepassing wees nie.*			
8554	Bonded veneers / *Gebonde finere*	537.60	+L	T
8555	One surface / *Een vlak*	693.10	+L	T
8556	Two surfaces / *Twee vlakke*	1000.60	+L	T
8557	Three surfaces / *Drie vlakke*	1612.50	+L	T
8558	Four or more surfaces / *Vier of meer vlakke*	1612.50	+L	T
	Gold restorations / Goudherstellings			

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II	SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8571	One surface / *Een vlak*	332.80	+L	T
8572	Two surfaces / *Twee vlakke*	481.20	+L	T
8573	Three surfaces / *Drie vlakke*	744.80	+L	T
8574	Four or more surfaces / *Vier of meer vlakke*	744.80	+L	T
8577	Pin retention / *Penretensie*	111.20		T
	Posts and copings / Stiwwe en vingerhoede			
8581	Single post / *Enkelstif*	184.60	+L	T
8582	Double post / *Tweeledige stif*	265.80	+L	T
8583	Triple post / *Drieledige stif*	332.80	+L	T
8587	Copings / *Vingerhoede*	153.40	+L	T
8589	Cast core with pins / *Gegote kern met penne*	262.50	+L	T
	Preformed posts and cores / Voorafvervaardigde stif en kern			
8591	Core build-up, including any pins / Opbou van kern, alle penne ingesluit Refers to building up of anatomical crown when restorative crown will be placed, whether or not pins are used / Verwys na die opbou van anatomiese kroon wanneer 'n herstellende kroon geplaas gaan word, met of sonder die gebruik van penne	184.30		T
8593	Prefabricated post and core in addition to crown / *Vooraf vervaardigde stif en kern bykomend tot kroon* Core is built around a prefabricated post(s). Die kern word rondom 'n voorafvervaardigde pen(ne) opgebou	341.80		T
	Implants / Inplantate			
8592	Osseo-integrated abutment restoration, per abutment / *Been-geïntegreerde ankertand herstelling, per ankertand*	1138.40	+L	T *
8600	Cost of implant components / *Koste van inplantaat komponente*	Reël 013		
9190	Exposure of a single osseo-integrated implant and placement of a transmucosal element / *Blootlegging van een osseo-integreerde inplantaat en plasing van 'n transmukosale element*	270.50		
9191	Exposure of a second osseo-integrated implant and placement of a transmucosal element in the same jaw / *Blootlegging van 'n tweede osseo-integreerde inplantaat en plasing van 'n transmukosale element in dieselfde kaak*	202.90		
9192	Exposure of a third and subsequent osseo-integrated implant in the same jaw, per implant / *Blootlegging van 'n derde en daaropvolgende osseo-integreerde inplantaat in dieselfde kaak, per inplantaat.*	135.10		
	Connectors / Verbinders			
8597	Locks and milled rests / *Slotte en gemasjineerde ruste*	75.50	+L	T
8599	Precision attachments / *Slothegtings*	184.30	+L	T
	Crowns / Krone			
8601	Cast three-quarter crown / *Gegote driekwartkroon*	744.80	+L	T
8603	Cast gold crown / *Gegote goue kroon*	744.80	+L	T
8605	Acrylic veneered gold crown / *Akrielgefineerde goue kroon*	829.00	+L	T

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II	SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8607	Porcelain jacket crown / *Porseleindopkroon*	744.80	+L	T
8609	Porcelain veneered metal crown / *Porseleingefineerde metaalkroon*	930.00	+L	T
	Bridges / Brugwerk			
	(Retainers as above / *Ankers soos bo)*			
8611	Sanitary pontic / *Sanitêre foptand*	561.90	+L	T
8613	Posterior pontic / *Posterior foptand*	692.50	+L	T
8615	Anterior pontic / *Anterior foptand*	744.80	+L	T
	Resin bonded retainers / Harsgebonde ankers			
8617	Per abutment / *Per ankertand*	229.40	+L	T
	Per pontic (see 8611, 8613, 8615) / *Per foptand (sien 8611, 8613, 8615)*			
	Conservative treatment for temporomandibular joint dysfunction / Konserwatiewe behandeling vir temporomandibulêre-gewrig disfunksie			
8625	Bite plate for TMJ dysfunction / *Bytplaat vir TMG-disfunksie*	283.90	+L	
8621	First visit for treatment of TMJ dysfunction / *Eerste besoek vir behandeling van TMG-disfunksie*	64.80		
8623	Follow-up visit for TMJ dysfunction / *Opvolgbesoek vir TMG-disfunksie*	48.30		
	The number of visits and charge therefore depends on the relation between the practitioner and the patient, and the problems involved in the case / *Die aantal besoeke en koste daaraan verbonde is afhanklik van die ooreenkoms tussen die pasiënt en die tandarts sowel as die aard en omvang van die geval.*			
	Endodontic procedures / Endodontiese prosedures			
	ROOT CANAL THERAPY / WORTELKANAALBEHANDELING			
	Procedure codes 8631, 8633 and 8644 include all X-rays and repeat visits / *Prosedure kodes 8631, 8633 ans 8644 sluit in alle X-straalfoto's en bykomende besoeke.*			
8631	Root canal therapy, first canal / *Wortelkanaalterapie, eerste kanaal*	651.80		T
8633	Each additional canal / *Elke bykomende kanaal*	162.90		T
8634	Endodontic procedure on primary tooth / *Wortelkanaal-terapie op primêre tand*	111.90		
8636	Re-preparation of previously obturated canal, per canal / *Hervoorbereiding van kanaal wat voorheen geobtureer was*	108.80		T
	OTHER ENDODONTIC PROCEDURE / ANDER ENDODONTIESE PROSEDURES			
8635	Apexification of root canal, per visit / *Apeksifikasie van wortelkanaal, per besoek*	108.90		T
8637	Hemisection of a tooth, resection of a root or tunnel preparation (as an isolated procedure) / *Hemiseksie van 'n tand, wortelreseksie of tonnelvoorbereiding (as 'n geïsoleerde prosedure)*	304.00		T
9015	Apicectomy including retrograde root filling where necessary - anterior teeth / *Apisektomie insluitend retrograde herstelling waar nodig - anterior tand*	360.70		T

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II	SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
9016	Apicectomy including retrograde root filling where necessary - posterior teeth / *Apisektomie insluitend retrograde wortel herstelling waar nodig - posterior tand*	538.90		T
8640	Removal of fractured post or instrument from root canal / *Verwydering van fraktuurde stif of instrument vanuit die wortelkanaal*	190.80		T
	Prosthetics (Removable) / Prostetika (Verplaasbaar)			
8641	Complete upper and lower dentures without primary complications / *Volle kunsgebit - bo en onder sonder primêre komplikasies*	1861.70	+L	
8643	Complete upper and lower dentures without major complications / *Volle kunsgebit - bo en onder sonder groot komplikasies*	2416.30	+L	
8645	Complete upper and lower dentures with major complications / *Volle kunsgebit - bo en onder met groot komplikasies*	2971.90	+L	
8647	Complete upper or lower denture without primary complications / *Volle kunsgebit - bo of onder sonder primêre komplikasies*	1302.40	+L	
8649	Complete upper or lower denture without major complications / *Volle kunsgebit bo of onder sonder groot komplikasies*	1488.00	+L	
8651	Complete upper or lower denture with major complications / *Volle kunsgebit - bo of onder met groot komplikasies*	1673.40	+L	
8661	Diagnostic dentures (inclusive of tissue conditioning treatment) / *Diagnostiese kunsgebitte (met inbegrip van weefselopknapbehandeling)*	1488.00	+L	
8662	Remounting and occlusal adjustment of dentures / *Hermontering en okklusale verstelling van kunsgebitte*	214.30	+L	
8663	Chrome cobalt base or gold base for full denture (extra charge) / *Chroom-kobalt of goudbasis vir volle kunsgebit (ekstra koste)*	448.00	+L	
8664	Remount of crown or bridge for extensive prosthetics / *Hermontering van kroon of brug vir omvattende prostetika*	218.20		
8665	Re-base, per denture / *Herbasering, per kunsgebit*	300.30	+L	
8667	Soft base, per denture (heat cured) / *Sagte basis, per kunsgebit (met hitte verhard)*	448.00	+L	
8668	Tissue conditioner, per denture / *Weefselopknapper, per kunsgebit*	111.20		
8669	Intra-oral reline of complete or partial denture / *Binne-mondse opvulling van vol- of gedeeltelike kunsgebit.*	165.30		
8671	Metal (e.g. Chrome cobalt or gold) partial denture / *Metaal (bv Chroom-kobalt of goud) gedeeltelike kunsgebit*	1488.00	+L	
8672	Additional fee/benefit for altered cast technique for partial denture / *Bykomende gelde/voordeel vir veranderde model tegniek, gedeeltelike kunsgebit*	58.20	+L	
8674	Additive partial denture / *Aanlasbare gedeeltelike kunsgebit*	674.30	+L	
8679	Repairs / *Herstelwerk*	75.50	+L	
8273	Additional fee/benefit where impression is required for 8679 / *Bykomende gelde/voordeel waar 'n afdruk vir 8679 benodig word*	34.50	+L	
8275	Adjustment of denture / *Verstelling van kunsgebit* (After six months or for a patient of another practitioner / *Na ses maande of vir 'n pasiënt van 'n ander tandarts)*	34.50	+L	

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II	SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD

III. SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE

PREAMBLE / INLEIDING

(See Rule 011 / *Sien Reël 011)*

1. (M/W) If extractions (codes 8201 and 8202) are carried out by specialists in maxillo- facial and oral surgery, the fees shall be equal to the appropriate tariff fee plus 50 per cent (See Modifier 8002) /

Indien ekstraksies (kodes 8201 en 8202) deur spesialiste in kaak-, gesigs- en mondchirurgie uitgevoer word, is die gelde gelyk aan die toepaslike tariefgelde plus 50 persent (Sien Wysiger 8002).

2. (M/W) The fee for more than one operation or procedure performed through the same incision shall be calculated as the fee for the major operation plus the tariff fee for the subsidiary operation to the indicated maximum for each such subsidiary operation or procedure (See Modifier 8005)/

Die gelde vir meer as een operasie of prosedure via dieselfde insnyding uitgevoer, word bereken as die gelde vir die hoofoperasie plus die tariefgelde van die bykomende operasie tot die aangeduide maksimum vir elke sodanige operasie of prosedure (Sien Wysiger 8005).

3. (M/W) The fee for more than one operation or procedure performed under the same anaesthetic but through another incision shall be calculated on the tariff fee for the major operation plus:

75% for the second procedure/operation (Modifier 8009)

50% for the third and subsequent procedures/operations (Modifier 8006) /

Die gelde vir meer as een operasie of ingreep onder dieselfde narkose maar via 'n ander insnyding uitgevoer, word bereken as die gelde vir die hoofoperasie plus:

75% vir die tweede prosedure/ operasie (Wysiger 8009)

50% vir die derde en daaropvolgende prosedures/operasies (Wysiger 8006).

This rule shall not apply where two or more unrelated operations are performed by practitioners in different specialities, in which case each practitioner shall be entitled to the full fee for his operation /

Hierdie reël is nie van toepassing nie waar twee of meer onverwante operasies deur praktisyns van verskillende spesialiteite uitgevoer word, in welke geval elke praktisyn geregtig is op die volle gelde vir sy operasie.

If, within four months, a second operation for the same condition or injury is performed, the fee for the second operation shall be half of that for the first operation/

Indien daar binne vier maande 'n tweede operasie vir dieselfde toestand of besering uitgevoer word, is die gelde vir die tweede operasie die helfte van die vir dié, eerste.

The fee for an operation shall, unless otherwise stated, include normal post-operative care for a period not exceeding four months. If a practitioner does not himself complete the post-operative care, he shall arrange for it to be completed without extra charge: provided that in the case of post-operative treatment of a prolonged or specialised nature, such fee as may be agreed upon between the practitioner and the scheme may be charged /

Die gelde vir 'n operasie sluit in, tensy daar anders vermeld word, die normale na-operatiewe versorging vir 'n tydperk van hoogstens vier maande. Indien 'n praktisyn nie self die na-operatiewe versorging voltooi nie, moet hy reël dat dit voltooi word sonder bykomende heffing: met dien verstande dat, in die geval van na-operatiewe behandeling van 'n langdurige of gespesialiseerde aard, sodanige gelde gehef kan word as waarop die praktisyn en die skema ooreengekom het.

4. (M/W) The fee payable to a general practitioner assistant shall be calculated as 15% of the fee of the practitioner performing the operation, with the indicated minimum (See Modifier 8007). The assistant's fee payable to a maxillo- facial and oral surgeon shall be calculated at 33,33% of the appropriate scheduled fee (Modifier 8001). The assistant's name must appear on the invoice rendered to the patient /

Die bedrag aan 'n algemene praktisyn assistent betaalbaar word bereken op 15% van die gelde van die praktisyn wat die operasie uitvoer, met die aangeduide minimum (Sien Wysiger 8007). Die bedrag aan 'n kaak-, gesigs- en mondchirurg assistent betaalbaar word bereken op 33,33% van die toepaslike gelde (Wysiger 8001). Die assistent se naam moet op die rekening wat aan die pasiënt gelewer word verskyn.

II	SPECIALIST PROSTHODONTISTS / SPESIALIS PROSTODONTISTE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
5. (M/W)	The additional fee to all members of the surgical team for after hours emergency surgery shall be calculated by adding 25% to the fee for the procedure or procedures performed (8008) / *Die bykomende gelde vir alle lede van die snykundige span vir na-ure noodoperasies sal bereken word deur 25% by die gelde vir die prosedure of prosedures uitgevoer by te voeg (8008).*			
6.	In cases where treatment is not listed in this schedule for general practitioners or specialists, the appropriate fee listed in the medical schedule(s) shall be charged, and the relevant medical tariff item must be indicated (See Rule 012) / *In gevalle waar behandeling nie in hierdie skedule vir algemene praktisyns of spesialiste gelys is nie, sal die toepaslike gelde, gelys in die mediese skedule(s) gevra word, en die betrokke mediese gelde tarief-item moet aangedui word (Sien Reël 012).*			
III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	CONSULTATIONS AND VISITS / KONSULTASIES EN BESOEKE			
8901	Consultation at consulting rooms / *Konsultasie by spreekkamers*	90.30		
•8902	Detailed clinical examination, radiographic interpretation, diagnosis, treatment planning and case presentation / *Gedetailleerde kliniese ondersoek, radiografiese interpretasie, diagnose, behandelings-beplanning en uiteensetting van geval* Code 8902 is a separate procedure from code 8901 and is applicable to craniomandibular disorders, implant placement and orthognathic and maxillofacial reconstruction / *Kode 8902 is 'n afsonderlike prosedure van kode 8901 en is van toepassing op kraniomandibulêre steurnisse, plasing van implantate en ortognatiese- en kaak-en-gesig herkonstruksie*	253.10		
8903	Consultation at hospital, nursing home or house / *Konsultasie by hospitaal, verpleeginrigting of tuis*	100.80		
8904	Subsequent consultation at consulting rooms, hospital, nursing home or house / *Daaropvolgende konsultasie by spreekkamer, hospitaal, verpleeginrigting of tuis*	49.20		
8905	Weekend visits and night visits between 18h00 - 07h00 the following day / *Naweek- en nagbesoeke tussen 18h00 en 07h00 die volgende dag*	145.20		
8907	Subsequent consultations, per week, to a maximum of / *Daaropvolgende konsultasies per week, tot 'n maksimum van* "Subsequent consultation" shall mean, in connection with items 8904 and 8907, a consultation for the same pathological condition provided that such consultation occurs within six months of the first consultation *"Daaropvolgende konsultasie" beteken, in verband met items 8904 en 8907, 'n konsultasie vir dieselfde siektetoestand mits sodanige konsultasie plaasvind binne ses maande vanaf die eerste konsultasie."*	166.70		
	INVESTIGATIONS AND RECORDS / ONDERSOEKE EN REKORDS			
8107	Intra-oral radiographs, per film / *Binnemondse röntgen-foto's, per film*	31.60		

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III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	**Procedure description** ***Prosedure beskrywing***	Rc FEE TARIEF		MP MD
8108	Maximum for 8107 / *Maksimum vir 8107*	251.90		
8113	Occlusal radiographs / *Okklusale röntgenfoto's*	49.20		
8115	Extra-oral radiograph, per film / *Buitemondse röntgenfoto, per film* (i.e. panoramic, cephalometric, PA / *i.e. panoramies, kefalometries, PA)* The fee is chargeable to a maximum of two films per treatment plan / *Die tarief mag tot 'n maksimum van twee films per behandelingsplan gehef word.*	130.00		
8117	Study models - unmounted / *Studiemodelle – ongemonteer*	35.50	+L	
8119	Study models - mounted on adjustable articulator / *Studiemodelle - op verstelbare artikulator gemonteer*	91.20	+L	
8121	Diagnostic photographs - per photograph / *Diagnostiese fotos - per foto*	35.50		
8917	Biopsies – intra-oral / *Biopsies - binnemonds*	185.40		
8919	Biopsy of bone - needle / *Beenbiopsie - naald*	320.30		
8921	Biopsy of bone - open / *Beenbiopsie - oop*	527.50		
	ORTHOGNATHIC SURGERY AND TREATMENT PLANNING / ORTOGNATIESE CHIRURGIE EN BEHANDELINGSBEPLANNING			
(M/W)	In the case of treatment planning requiring the combined services of an Orthodontist and a Maxillo-Facial and Oral Surgeon, Modifier 8009 (75%) may be applied to the fee charged by each specialist / *In die geval van behandelingsbeplanning waar die gesamentlike dienste van 'n Ortodontis en 'n Kaak-, Gesigs- en Mondchirurg benodig word, mag Wysiger 8009 (75%) toegepas word by die gelde gevra deur elke spesialis.*			
8840	Treatment planning for orthognathic surgery / *Behandelingsbeplanning vir ortognatiese chirurgie*	396.60	+L	
	REMOVAL OF TEETH / VERWYDERING VAN TANDE Modifier 8002 is applicable to codes 8201 and 8202 / *Wysiger 8002 is van toepassing op tariefitems 8201 en 8202*			•
	Extractions during a single visit / Ekstraksies ten tyde van enkele besoek			
8201	Single tooth / *Enkel tand* Code 8201 is charged for the first extraction in a quadrant / *Kode 8201 word vir die eerste ekstraksie in 'n kwadrant gehef.*	49.20		T
8202	Each additional tooth in the same quadrant / Elke bykomende tand in dieselfde kwadrant Code 8202 is charged for each additional extraction in the same quadrant / *Kode 8202 word vir elke bykomende ekstraksie in dieselfde kwadrant gehef.*	69.60		T
8957	Alveolotomy or alveolectomy - concurrent with or independent of extractions (per jaw) / *Alveolotomie of alveolektomie - tesame met of onafhanklik van ekstraksie (per kaak)*	439.70		
8961	Auto-transplantation of teeth / *Auto-transplantering van tande*	720.80	+L	
8931	Local treatment of post-extraction haemorrhage (excluding treatment of bleeding in the case of blood dyscrasias, e.g. haemophilia) / *Lokale behandeling van post-ekstraksiebloeding (met uitsluiting van bloeding in die geval van bloedsiektes, bv. hemofilie)*	241.30		

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III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8933	Treatment of haemorrhage in the case of blood dyscrasias, e.g. hemophilia, per week / Behandeling van bloeding in die geval van bloedsiektes, bv. hemofilie, per week	856.40		
8935	Treatment of post-extraction septic socket where patient is referred by another registered person / *Behandeling van post-ekstraksie septiese tandkas waar die pasiënt verwys word deur 'n ander geregistreerde persoon*	63.80		
8937	Surgical removal of a tooth i.e.:- raising of muco-periosteal flap, removal of bone and suturing / *Chirurgiese verwydering van 'n tand d.w.s. maak van mukoperiosteale flap, verwydering van been en hegting*	222.80		
	Removal of roots / Verwydering van wortels			
8953	Surgical removal of residual roots of first tooth / *Chirurgiese verwydering van wortelreste van die eerste tand*	320.50		T
8955 (M/W)	Surgical removal of residual roots of each subsequent tooth / *Chirurgiese verwydering van wortelreste van elke daaropvolgende tand* (See Rule 011 and Notes 2 and 3 / *Sien Reël 011 en Notas 2 en 3)*	na/nvt		T
	Unerupted or impacted teeth / Ongeërupteerde of beklemde tande			
8941	First tooth / *Eerste tand*	530.80		T
8943	Second tooth / *Tweede tand*	285.20		T
8945	Third tooth / *Derde tand*	162.90		T
8947	Fourth and subsequent tooth / *Vierde en daaropvolgende tand*	162.90		T
	DIVERSE PROCEDURES / IVERSE PROSEDURES			
8908	Removal of roots from maxillary antrum involving Caldwell-Luc and closure of oral antral communication / *Verwydering van tandwortels van die maksilêre antrum insluitend Caldwell-Luc operasie en herstel van antro-orale fistel*	1094.30		
8909	Closure of oral antral fistula - acute or chronic / *Sluiting van antro-orale fistel - akuut of kronies*	840.50		
8911	Caldwell-Luc procedure / *Caldwell-Luc prosedure*	329.90		
8965	Peripheral neurectomy / *Perifere neurektomie*	720.80		
8966	Functional repair of oronasal fistula (local flaps) / *Funksionele herstel van oronasale fistula (lokale flappe)*	1020.70		
8977	Major repairs of upper or lower jaw (i.e. by means of bone grafts or prosthesis, with jaw splintage) / *Groot herstelwerk aan bo- of onderkaak (bv. deur middel van beenoorplanting of prostese, met kaakspalking* (Modifiers 8005 and 8006 are not applicable in this instance. The full fee may be charged irrespective of whether this procedure is carried out concomitantly with procedure 8975 or as a separate procedure / *Wysigers 8005 en 8006 is nie van toepassing in hierdie geval nie. Die volle gelde kan gehef word ongeag of hierdie prosedure gelyktydig met prosedure 8975 of as 'n afsonderlike prosedure uitgevoer word)*	1713.70		
8978	Harvesting of autogenous grafts (extra-oral) / *Insameling van outogene been (buitemonds)*	324.30		

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III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
8979	Harvesting of autogenous grafts (intra-oral) / *Insameling van outogene been (binnemonds)*	117.90		
8761	Masticatory mucosal autograft and subepithelial connective tissue autograft extending across not more than four teeth (isolated procedure) / *Selfoorplanting van kou-mukose en subepiteliële bindweefsel gestrek oor nie meer as vier tande nie (geïsoleerde prosedure)*	485.50		
8767	Bone regenerative / repair procedure at a single site / *Been regeneratiewe-herstel prosedure by 'n enkele area*	596.30		
8769	Subsequent removal of membrane used for guided tissue regeneration procedure / Daaropvolgende verwydering van 'n membraan wat gebruik is vir 'n gerigte weefselregenerasie prosedure Codes 8761, 8767 and 8769 to be used only as part of implant surgery / *Kodes 8761, 8767 en 8769 mag net tesame met implantaat-chirurgie gebruik word.*	237.50		
	SURGICAL PREPARATION OF JAWS FOR PROSTHETICS / CHIRURGIESE GEREEDMAKING VAN KAKEBEEN VIR PROSTETIEK			
8987	Reduction of mylohyoid ridges, per side / *Reduksie van mylohyoid riwwe, per kant*	736.20	+L	
8989	Torus mandibularis reduction, per side / *Reduksie van torus mandibularis, per side*	736.20	+L	
8991	Torus palatinus reduction / *Reduksie van torus palatinus*	736.20	+L	
8993	Reduction of hypertrophic tuberosity, per side / *Reduksie van hipertrofiese tuberositeite, per kant* See procedure code 8971 for excision of denture granuloma / Sien prosedure kode 8971 vir die verwydering van kunsgebitgranuloom	328.10	+L	
8995	Gingivectomy, per jaw / *Gingivektomie, per kaak*	654.50	+L	
8997	Sulcoplasty/Vestibuloplasty / *Sulkoplastiek/Vestibulo-plastiek*	1652.20	+L	
9003	Repositioning mental foramen and nerve, per side / *Herplasing van formen mentale en senuwee, per kant*	1001.50	+L	
9005	Total Alveolar ridge augmentation by bone graft / *Verbetering van totale alveolêre rif deur beenoorplanting*	1681.50	+L	
9007	Total Alveolar ridge augmentation by alloplastic material / *Verbetering van totale alveolêre rif met alloplastiese materiaal*	1084.30	+L	
9008	Alveolar ridge augmentation across 1 to 2 adjacent tooth sites / *Verbetering van alveolêre rif wat strek oor 1 tot 2 naasliggende tand areas.*	693.10	+L	
9009	Alveolar ridge augmentation across 3 or more tooth sites / *Verbetering van alveolêre rif wat strek oor 3 of meer naasliggende tand areas*	772.90	+L	
9010	Sinus lift procedure / Sinus lig prosedure	1094.30	+L	
	SEPSIS / SEPSIS			
9011	Incision and drainage of pyogenic abscesses (intra-oral approach) / *Lansering en dreinering van piogene absesse (binnemondse toegang)*	205.70		

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III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
9013	Extra-oral approach, e.g. Ludwig's angina / *Buitemondse toegang, bv. Ludwigangina*	279.90		
9015	Apicectomy including retrograde filling where necessary – anterior teeth / *Apisektomie insluitend retrograde herstelling waar nodig – anterior tande*	360.70		T
9016	Apicectomy including retrograde filling where necessary, posterior teeth / *Apisektomie insluitend retrograde herstelling waar nodig, posterior tande*	722.30		T
9017	Decortication, saucerisation and sequestrectomy for osteomyelitis of the mandible / *Dekortisering, uitholling en sekwestrektomie vir osteomiëlitis van mandibula*	1485.20		
9019	Sequestrectomy - intra-oral, per sextant and/or per ramus/ *Sekwestrektomie - binne-mondse toegang, per skestant en/of per ramus*	320.10		
	TRAUMA / TROUMA			
	Treatment of associated soft tissue injuries / Behandeling van gepaardgaande sagteweefsel-beserings			
9021	Minor / *Gering*	360.70		
9023	Major / *Uitgebreid*	761.70		
9024	Dento-alveolar fracture, per sextant / *Dento-alveolêre fraktuur, per sekstant*	360.70	+L	
	Mandibular fractures / Frakture van die mandibula			
9025	Treatment by closed reduction, with intermaxillary fixation / *Behandeling deur middel van geslote reduksie, met intermaksilêre fiksering*	800.40		
9027	Treatment of compound fracture, involving eyelet wiring / *Behandeling van saamgestelde fraktuur deur middel van ogies en kruisbedrading*	1123.50		
9029	Treatment by metal cap splintage or Gunning's splints / *Behandeling deur middel van metaaldopspalke of Gunningspalke*	1245.50	+L	
9031	Treatment by open reduction with restoration of occlusion by splintage/ *Behandeling deur middel van oop reduksie en herstel van okklusie met spalke*	1844.40	+L	
	Maxillary fractures with special attention to occlusion / Frakture van die maksilla met spesiale aandag aan okklusie			
	• When open reduction is required for Items 9035 and 9037, Modifier 8010 may be applied/ *Wanneer oopreduksie vir Items 9035 en 9037 benodig is, mag Wysiger 8010 toegepas word*			
9035	Le Fort I or Guerin fracture / *Le Fort I-fraktuur of Guerin-fraktuur*	1126.30	+L	
9037	Le Fort II or middle third of face / *Le Fort II-fraktuur of middelste derde van gesig*	1844.40	+L	
9039	Le Fort III or craniofacial disjunction or comminuted mid-facial fractures requiring open reduction and splintage / *Le Fort III-fraktuur of kraniofasiale ontwrigting of brokkelfraktuur van middel gesig wat oop reduksie en spalke vereis*	2644.20	+L	

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III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	Zygoma/Orbit/Antral - complex fractures / Wangbeen/Oogkas/Antrum saamgestelde frakture			
9041	Gillies or temporal elevation / *Gillies of temporale elevasie*	800.40		
9043	Unstable and/or comminuted zygoma, treatment by open reduction or Caldwell-Luc operation / *Onstabiele en/of verbrokkelde wangbeen, behandeling deur middel van oop reduksie of Caldwell-Luc operasie*	1603.10		
9045	Requiring multiple osteosynthesis and/or grafting / *Wat veelvuldige osteosintese en/of oorplanting vereis*	2403.40		
	FUNCTIONAL CORRECTION OF MALOCCLUSIONS / FUNKSIONELE REGSTELLING VAN WANSLUITINGS For items 9047 to 9072 the full fee may be charged i.e. notes 2 and 3 (re Rule 011) will not apply / *Die volle gelde kan gehef word vir prosedures 9047 tot 9072 d.w.s. aanmerking 2 en 3 (i.s. Reël 011) is nie van toepassing nie.*			
9047	Operation for the improvement or restoration of occlusal and masticatory function, e.g. bilateral osteotomy, open operation (with immobilisation) / *Operasie ter verbetering of restourasie van okklusale- en koufunksie, bv. Bilaterale osteotomie, oop operasie (met immobilisering)*	3364.90	+L	
9049	Anterior segmental osteotomy of mandible (Köle) / *Osteotomie van anterior segment van die mandibula (Köle)*	2803.50	+L	
9050	Total subapical osteotomy / *Totale subapikale osteotomie*	5661.50		
9051	Genioplasty / *Kenplastiek*	1603.10		
9052	Midfacial exposure (for maxillary and nasal augmentation or pyramidal Le Fort II osteotomy) / *Midfasiale ontbloting (vir maksilêre en nasale augmentasie of piramidale Le Fort II-osteotomie)*	2593.60		
9055	Maxillary posterior segment osteotomy (Schukardt) - 1 or 2 stage procedure / *Osteotomie van posterior segment van die maksilla (Schukardt) - 1-stadium of 2-stadium-prosedure*	2803.50	+L	
9057	Maxillary anterior segment osteotomy (Wassmund) - 1 or 2 stage procedure / *Osteotomie van anterior segment van die maksilla (Wassmund) - 1-stadium of 2-stadium-prosedure*	2803.50	+L	
9059	Le Fort I osteotomy - one piece / *Le Fort I-osteotomie - een stuk*	5275.40	+L	
9062	Le Fort I osteotomy - multiple segments / *Le Fort I-osteotomie - veelvuldige segmente*	6869.30	+L	
9060	Le Fort I osteotomy with inferior repositioning and inter positional grafting / *Le Fort I-osteotomie met inferior-herposisionering en inter-posisionele transplantering*	6046.00		
9061	Palatal osteotomy / Palatale osteotomie	1844.40		
9063	Le Fort II osteotomy for correction of facial deformities or faciostenosis and post-traumatic deformities / *Le Fort II-osteotomie ter korreksie van gesigsdeformiteite of fasiostenose en nabesering-deformiteite*	6687.40	+L	
9069	Functional tongue reduction (partial glossectomy) / *Funksionele tongreduksie (gedeeltelike glossektomie)*	1203.30		
9071	Geniohyoidotomy / *Geniohioïedotomie*	720.80		

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III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
9072	Functional closure of the secondary oro-nasal fistula and associated structures with bone grafting (complete procedure) / *Funksionele herstel van sekondêre oro-nasale fistel en verwante strukture met been transplantaat (volledige prosedure)*	5275.40	+L	
	TEMPOROMANDIBULAR JOINT PROCEDURES / PROSEDURES VIR TEMPOROMANDIBULÊRE GEWRIG For Items 9081, 9083 and 9092 the full fee may be charged per side / *Vir Items 9081, 9083 en 9092 mag volledige gelde per kant gehef word*			
9073	Bite plate for TMJ dysfunction / *Bytplaat vir TMG-disfunksie*	283.40	+L	
9074	Diagnostic arthroscopy / *Diagnostiese artroskopie*	811.10		
9075	Condylectomy or coronoidectomy or both (extra-oral approach) / *Kondilektomie of koronoïdektomie of albei (buitemondse toegang)*	1682.80		
9076	Arthrocentesis TMJ / *Arthrosintese TMG*	485.10		
9053	Coronoidectomy (intra-oral approach) / *Koronoïdek-tomie (binnemondse toegang)*	1001.50		
9077	Intra-articular injection, per injection / *Intra-artikulêre inspuiting, per inspuiting*	120.60		
9079	Trigger point injection, per injection / *Sneller-punt inspuiting, per inspuiting*	94.80		
9081	Condyle neck osteotomy (Ward/ Kostecka) / *Kondielnek-osteotomie (Ward/ Kostecka)*	800.40		
9083	Temporomandibular joint arthroplasty / *Temporo-mandibulêre gewrigsartroplastie*	2003.50		
9085	Reduction of temporomandibular joint dislocation without anaesthetic / *Reduksie van temporo-mandibulêre ontwrigting sonder narkose*	159.20		
9087	Reduction of temporomandibular joint dislocation, with anaesthetic/ *Reduksie van temporomandibulêre ontwrigting, onder narkose*	320.30		
9089	Reduction of temporomandibular joint dislocation, with anaesthetic and immobilisation / *Reduksie van temporo-mandibulêre ontwrigting, onder narkose en immobilisasie* .	800.40		
9091	Reduction of temporomandibular joint dislocation requiring open reduction/ *Reduksie van temporo-mandibulêre ontwrigting wat oopreduksie vereis*	1682.80		
9092	Total joint reconstruction with alloplastic material or bone (includes condylectomy and coronoidectomy) / *Totale gewrigsherkonstruksie met alloplastiese materiaal of been (insluitend kondilektomie en koronoïdektomie)*	5440.80	+L	
	SALIVARY GLANDS / SPEEKSELKLIERE			
9095	Removal of sublingual salivary gland / *Verwydering van sublinguale speekselklier*	962.50		
9096	Removal of salivary gland (extra-oral) / *Verwydering van speekselklier (buitemonds)*	1455.70		

• = New Code * = Revised Code

III	SPECIALIST MAXILLO- FACIAL AND ORAL SURGEONS / SPESIALIS KAAK-, GESIGS- EN MONDCHIRURGE (M) See Rule 009/ (W) Sien Reël 009			
Code *Kode*	Procedure description *Prosedure beskrywing*	Rc FEE TARIEF		MP MD
	IMPLANTS / INPLANTATE			
	For items 9180 to 9192 the full fee may be charged, i.e. Note 2 of Rule 011 will not apply / *Vir items 9180 tot 9192 mag die volle gelde gehef word, d.w.s. nota 2 van Reël 011 is nie van toepassing nie*			
9180	Placement of sub-periosteal implant - Preparatory procedure/operation / *Plasing van sub-periosteale inplantaat - voorbereidingsprosedure/operasie*	1106.40		
9181	Placement of sub-periosteal implant prosthesis/ operation / *Plasing van sub-periosteale inplantaat prostese/ operasie*	1106.40		
9182	Placement of endosteal implant, per implant / *Plasing van endosteale inplantaat, per inplantaat*	553.30	+L	
9183	Placement of a single osseo-integrated implant per jaw / *Plasing van een osseo-integreerde inplantaat per kaak*	732.00		
9184	Placement of a second osseo-integrated implant in the same jaw / *Plasing van 'n tweede osseo-integreerde inplantaat in dieselfde kaak*	548.60		
9185	Placement of a third and subsequent osseo-integrated implant in the same jaw, per implant / *Plasing van 'n derde en daaropvolgende osseo-integreerde inplantaat in dieselfde kaak, per inplantaat*	365.90		
9189	Cost of implants / *Koste van inplantate*	Reël 013		
9190	Exposure of a single osseo-integrated implant and placement of a transmucosal element / *Blootlegging van een osseo-integreerde inplantaat en plasing van 'n transmukosale element*	270.50		
9191	Exposure of a second osseo-integrated implant and placement of a transmucosal element in the same jaw / *Blootlegging van 'n tweede osseo-integreerde inplantaat en plasing van 'n transmukosale element in dieselfde kaak*	202.90		
9192	Exposure of a third and subsequent osseo-integrated implant in the same jaw, per implant / *Blootlegging van 'n derde en daaropvolgende osseo-integreerde inplantaat in dieselfde kaak, per inplantaat*	135.10		

CONTENTS

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