

Pulamed Dental Fees Tariffs 2022-23

DENTAL FEES				
CODE	PROCEDURE DESCRIPTION	DENTAL Tariffs 2022-23	Lab Fees 2022-23	DENTAL FEES (incl Lab) - 2022-23
	DIAGNOSTIC PROCEDURES			
8101	Consultation	219.10		219.10
8102	Comprehensive consultation	0.00		0.00
8104	Consultation for specific problem	112.00		112.00
8105	Appointment not kept (30 min)			0.00
8106	Written treatment plan where prior authorisation is required (covered under 8102)			0.00
8107	Intra oral radiograph	109.50		109.50
8108	Maximum for 8107	846.90		846.90
8113	Occlusal radiograph	187.30		187.30
8114	Handwrist radiograph	438.20		438.20
8115	Panoramic or cephalometric radiograph	438.20		438.20
8117	Two study models	119.20	75.10	194.30
8119	Study models mounted on adjustable articulator	297.30	313.20	610.60
8121	Diagnostic photographs		0.00	0.00
8122	Bacteriological studies for determination of pathologic agents		0.00	0.00
8123	Caries susceptibility test		0.00	0.00
8811	Tracing and analysis of cephalometric radiograph	51.20	0.00	51.20

	EMERGENCY PROCEDURES		0.00	0.00
8131	Emergency treatment for relief of pain	165.40	0.00	165.40
8132	Gross pulpal debridement	270.70	0.00	270.70
8133	Recementing (per crown or abutment unit)	165.40	0.00	165.40
8135	Removal of crown, inlay, bridge	331.20	0.00	331.20
8136	Access through prosthetic crown for RCT	145.90	0.00	145.90
8137	Temporary crown if perm. crown is not to be made	567.40	0.00	567.40
	MISCELLANEOUS PROCEDURES		0.00	0.00
8109	Cross-infection control (i.e. use of rubber gloves, masks, etc. per dentist, per assistant, per visit)	24.50	10.80	35.40
8110	Provision of sterilised & wrapped instruments	65.80	0.00	65.80
8141	Inhalational sedation, first quarter hour	121.90	0.00	121.90
8143	Inhalational sedation, each add. quarter hour	65.80	0.00	65.80
8144	IV sedation	73.10	0.00	73.10
8145	Local anaesthetic, per visit	31.80	0.00	31.80
8147	Use of monitoring equipment under I.V. sedation	260.60	0.00	260.60
8155	Polish only	165.40	0.00	165.40
8157	Re-burnishing	165.40	0.00	165.40
8159	Scale and polish	326.10	0.00	326.10
8161	Topical fluoride	165.40	0.00	165.40
8163	Fissure sealant, per tooth	109.50	0.00	109.50
8167	Treatment o. hypersens. dentine	126.50	0.00	126.50
8169	Bite plate or occlusal guards	637.90	607.90	1245.80

8170	Minor occlusal adjustment	363.00	0.00	363.00
8171	Mouth protector		365.10	365.10
8173	Fixed spacemaintainer	306.60	567.40	874.00
8175	Removable spacemaintainer	394.70	572.30	967.00
8176	Periodontal screening	199.60	0.00	199.60
8177	Oral hygiene instructions for the periodontally compromised patient	250.50	0.00	250.50
8178	Oral hygiene evaluation for period. comp. patient	133.60	0.00	133.60
8179	Plaque removal for period. comp. patient	187.30	0.00	187.30
8180	Scaling and polishing for the period. comp. patient	353.30	0.00	353.30
8182	Root planing, per quadrant	662.80	0.00	662.80
8184	Root planing, per sextant	528.50	0.00	528.50
8185	Gingivectomy-gingivoplasty, per quadrant	866.90	0.00	866.90
8186	Gingivectomy-gingivoplasty, per sextant	691.60	0.00	691.60
8188	Biopsy	421.30	0.00	421.30
8192	Appositioning of soft tissue injuries	818.10	0.00	818.10
8194	Placement of a single osseo-integrated implant per jaw	1536.40	0.00	1536.40
8195	second o.-i. Implant, per jaw	1149.50	0.00	1149.50
8196	subsequent o.-i. Implant, per jaw	769.60	0.00	769.60
8198	Exp./transmuc. o.-i. Implant, per jaw	569.70	0.00	569.70
8199	second Exp./transmuc. o.-i. Implant	428.70	0.00	428.70
8200	subsequ. Exp./transmuc. o.-i. Implant	287.20	0.00	287.20

8201	Simple extraction	165.40	0.00	165.40
8202	Add. Tooth same quadrant	65.80	0.00	65.80
8209	Surgical removal of tooth	716.10	0.00	716.10
8210	Impacted tooth, first tooth	1188.10	0.00	1188.10
8211	Impacted tooth, second tooth	637.90	0.00	637.90
8212	Impacted tooth, each additional	360.50	0.00	360.50
8213	Surgical removal of residual roots (cutting procedure)	716.10	0.00	716.10
8214	Surgical removal of residual roots - each subsequent tooth	552.60	0.00	552.60
8215	Surgical exposure for orthodontic reasons	1227.00	0.00	1227.00
8220	Suture material provided by practitioner	43.90	0.00	43.90
8221	Post-extr. Haemorrhage, first visit	121.90	0.00	121.90
8225	Septic socket, initial visit	121.90	0.00	121.90
8227	Septic socket, each additional visit	77.90	0.00	77.90
8229	Apicectomy, incisors and canines	818.10	0.00	818.10
8231	Full upper and lower dentures	2673.60	1422.10	4095.70
8232	Full upper or lower denture	1643.40	1111.40	2754.90
8233	1 tooth	766.90	472.40	1239.30
8234	2 teeth	766.90	506.50	1273.40
8235	3 teeth	1147.20	530.80	1678.00
8236	4 teeth	1147.20	530.80	1678.00
8237	5 teeth	1147.20	530.80	1678.00
8238	6 teeth	1519.50	647.60	2167.20
8239	7 teeth	1519.50	764.40	2283.90
8240	8 teeth	1519.50	866.90	2386.50
8241	9 teeth or more	1519.50	891.50	2411.00
8251	Cast gold clasp per rest or clasp	153.70	114.60	268.30

8253	Wrought gold clasp or rest per rest or clasps	153.70	106.70	260.40
8255	Stainless steel clasp or rest	161.00	106.70	267.70
8257	Lingual or palatal bar	187.30	170.60	357.90
8259	Rebase, heat cure	625.90	589.50	1215.30
8261	Remodel	1000.80	769.60	1770.40
8263	Reline, cold cure, direct	394.70	0.00	394.70
8265	Tiss. Cond. + soft self cure interim reline	260.60	0.00	260.60
8267	Soft-base reline, heat cured	910.60	742.80	1653.40
8269	Repair of denture or intra-oral appliance	211.80	241.30	453.10
8270	Add clasp to existing partial denture	153.70	73.10	226.80
8271	Add tooth to existing denture	153.70	73.10	226.80
8273	Additional fee when impression required	121.90	82.80	204.70
8275	Adjustment of denture	121.90	0.00	121.90
8277	Gold inlay in denture		0.00	0.00
8279	Metal base to full denture		0.00	0.00
8281	Chrome cobalt partial base	1786.90	1344.00	3130.90
8303	Indirect pulp capping	219.10	0.00	219.10
8304	Rubber Dam, per arch	129.10	0.00	129.10
8305	Apexification of root canal, per visit	219.10	0.00	219.10
8306	Cost of Mineral Trioxide Aggregate	0.00	0.00	0.00
8307	Pulpotomy	216.60	0.00	216.60
8308	Bleaching, vital, per arch		0.00	0.00
8309	Supply of and instruction for home bleaching		0.00	0.00
8310	Supply of bleaching materials		0.00	0.00
8311	Follow-up visit for home bleaching		0.00	0.00

8325	Bleaching, non vital,per tooth	392.40	0.00	392.40
8327	Each additional visit for non-vital bleaching	177.60	0.00	177.60
8330	Removal/bypassing of fractured post/ instrument	216.60	0.00	216.60
	Preparatory visits, obturation done at separate visit		0.00	0.00
8332	Single canal tooth, per visit (max. 2 visits)	165.40	0.00	165.40
8333	Multi canal tooth, per visit (max. 2 visits)	231.40	0.00	231.40
8334	Re-preparation of previously obturated canal	246.10	0.00	246.10
	Obturation visit		0.00	0.00
8335	First canal, anteriors and premolars	750.00	0.00	750.00
8328	Each additional canal, anteriors and premolars	306.60	0.00	306.60
8336	First canal, molars	1034.60	0.00	1034.60
8337	Each additional canal, molars	306.60	0.00	306.60
8338	First canal, anteriors and premolars	1149.50	0.00	1149.50
8329	Each additional canal, anteriors and premolars	382.30	0.00	382.30
8339	First canal, molars	1582.70	0.00	1582.70
8340	Each additional canal, molars	382.30	0.00	382.30
8341	One surface	299.20	0.00	299.20
8342	Two surfaces	372.50	0.00	372.50
8343	Three surfaces	448.20	0.00	448.20
8344	More than three surfaces	501.90	0.00	501.90
8345	Pre-formed post retention	326.10	0.00	326.10
8347	Pin retention, first pin	163.60	0.00	163.60
8348	Pin retention, each additional pin	153.70	0.00	153.70

8349	Carving or contouring plastic restoration to accommodate existing prosthesis	68.10	0.00	68.10
8366	Pin retention as part of cast restoration	246.10	0.00	246.10
8376	Prefabricated post and core in addition to crown	903.30	0.00	903.30
8379	Cost of posts	153.70	0.00	153.70
8351	One surface, anterior	331.20	0.00	331.20
8352	Two surfaces, anterior	414.10	0.00	414.10
8353	Three surfaces, anterior	496.60	0.00	496.60
8354	More than three surfaces, ant.	552.60	0.00	552.60
8355	Composite Veneers (Direct)	572.30	0.00	572.30
8367	One surface, posterior	355.40	0.00	355.40
8368	Two surfaces, posterior	440.80	0.00	440.80
8369	Three surfaces, posterior	530.80	0.00	530.80
8370	More than three surfaces, pos.	572.30	0.00	572.30
8361	One surface inlay	504.20	635.60	1139.80
8362	Two surface inlay	735.40	925.10	1660.50
8363	Threesurfaces inlay	1229.60	964.10	2193.70
8364	Four or more surfaces inlay	1485.50	964.10	2449.60
8371	One surface inlay	606.40	1261.20	1867.60
8372	Two surfaces inlay	896.10	1261.20	2157.30
8373	Three surfaces inlay	1475.70	1261.20	2736.90
8374	More than three surfaces inlay	1786.90	1073.80	2860.70
8193	Crown on implant	2457.00	1229.60	3686.60
8356	Bridge per abutment - only applicable to Maryland type	735.40	0.00	735.40
8357	Pre-formed metal crown	338.10	0.00	338.10
8391	Cast post & core - single	379.80	450.30	830.10

8393	Cast post & core - double	606.40	645.30	1251.70
8395	Cast post & core - triple	876.70	645.30	1522.00
8396	Cast coping	246.10	443.20	689.30
8397	Cast core with pins	606.40	645.30	1251.70
8398	Core build-up including any pins	735.40	0.00	735.40
8401	Cast metal full crown	1892.00	1129.90	3021.80
8403	Cast three-quarter crown	1892.00	769.60	2661.60
8405	Acrylic jacket crown	1892.00	0.00	1892.00
8407	Acrylic veneered crown	1892.00	752.50	2644.50
8409	Porcelain jacket crown	1892.00	1159.20	3051.20
8411	Porcelain veneered crown	1892.00	1175.80	3067.80
8413	Facing replacement	370.20	496.60	866.80
8414	Additional fee for provision of crown within an existing clasp	109.50	227.90	337.40
8420	Sanitary pontic	920.20	0.00	920.20
8422	Posterior pontic	1229.60	0.00	1229.60
8424	Anterior pontic including premolars	1546.10	0.00	1546.10
8560	Cost of ceramic block	0.00	0.00	0.00