

الجمهورية اللبنانية
وزارة الداخلية والبلديات

المستند: ١ - الفقرة (٦) من المادة ٤٦/ من قانون الشراء العام رقم ٢٤٤
تاريخ ٢٠٢١/٧/٢٩
٢- قانون المحاسبة العمومية الموضوع موضع التنفيذ بموجب
المرسوم رقم ١٤٩٦٩ تاريخ ١٩٦٣/١٢/٣٠
٣- دفتر الشروط الإدارية العام لتعهدات لوازم قوى الامن الداخلي
ونظام المناقصات فيها المصدق بموجب المرسوم رقم ٢٨٦٨
تاريخ ١٩٨٠/٤/١٦.

عدد: /
تاريخ: ٢٠٢٥/ /

اتفاق رضائي (إستشفاء)

مستشفيات فئة AB

معقود بين :

الدولة اللبنانية	:	ممثلة بشخص معالي وزير الداخلية والبلديات	فريق أول
مركز الشمال الاستشفائي ش.م.ل	:	ممثلة بالسيد قيصر حنا باسيم - عنوانها : كفرحاتا - زغرتا - هاتف : ٠٣/٥٥٧٧٦٢ - ٠٦/٥٥٥٢٣٠ - فاكس : ٠٦/٥٥٥٢٧٠ - البريد الالكتروني chn@chn.com.lb	فريق ثان

لما كان الفريق الأول بحاجة إلى تأمين المعالجة للمستفيدين على عاتق الإدارة .
ولما كان الفريق الثاني تعهد بتأمين تلك المعالجة ويرغب بالتعاقد مع الفريق الأول لتقديم هذه
المعالجة وفق شروط هذا الاتفاق ووفق تصنيف المديرية العامة لقوى الامن الداخلي فقد تم الاتفاق
بالرضى والقبول المتبادلين بين الفريقين على ما يلي:

المادة الأولى: تعتبر المقدمة أعلاه جزءاً لا يتجزأ من هذا الاتفاق وتنتمى له ، على أن يصار الى اعتماد
التعرفة المعتمدة من قبل الإدارة المبنية على الاسعار المعتمدة والتي ستعتمد من قبل قيادة الجيش
والمرفقة في الجداول ربطاً ، ويجوز تعديلها بموافقة الفريقين بقرار من المدير العام لقوى الأمن الداخلي
وفقاً لما تقتضيه الحاجة.

المادة الثانية: يقصد بالعبارات المدرجة أدناه تلك المقابلة لكل منها أينما وردت في هذا الاتفاق:

- | | |
|--------------------------|--|
| ٢١ . الفريق الأول | الدولة اللبنانية ممثلة بشخص معالي وزير الداخلية والبلديات. |
| ٢٢ . الفريق الثاني | المؤسسة الصحية . |
| ٢٣ . الإدارة | المديرية العامة لقوى الأمن الداخلي. |
| ٢٤ . المركز الطبي المختص | المركز الطبي الذي تقع ضمن نطاقه المؤسسة الصحية |
| ٢٥ . المعالجة | المداواة بكافة أوجهها من طبية وجراحية بالصورة الخارجية أو
الداخلية مع ما تتضمنه على سبيل المثال لا الحصر: |

٢٥١ . الاستشفاء (حالات بارثة وطارئة)

٢٥٢ . الأعمال التشخيصية: مخبرية، شعاعية، رادارية، تخطيطات...

٢٥٣ . المعاينات

٢٥٤ . العناية الطبية المختلفة.

٢٥٥ . الأدوية.

٢٦ . المستفيد الأشخاص المزودين بموافقة الإدارة الخطية

٢٧ . موافقة الإدارة الخطية البطاقة المسلكية أو الصحية ضمن مهلة صلاحيتها، بيان أبحاث،

بطاقة دخول، تعهد، موافقة برقية....

٢٨ . المستندات المثبتة للدين فواتير كلفة المعالجة والمستندات الثبوتية المرفقة بها.

٢٩ . ممثل المؤسسة الصحية هو الشخص المخول بالتوقيع وإبرام العقود عن الفريق الثاني وفقاً

للنظام الداخلي الأساسي.

المادة الثالثة: المستندات الثبوتية المرفقة بالاتفاق والتي تثبت توفر المؤهلات الفنية والمهنية والملاءة المالية

بمقدمتها:

٣١ . المؤهلات الفنية والمهنية:

٣١١ . تصريح / تعهد (مرفق ربطاً) موقع من المفوض بالتوقيع عن المؤسسة الصحية وممهوراً

بالخاتم الرسمي بشأن التعاقد يرفق به:

أ . مستند تصريح النزاهة (مرفق ربطاً) موقعاً من المفوض بالتوقيع وممهوراً بالخاتم الرسمي.

ب. سجل عدلي وإخراج قيد إفرادي أو صورة هوية للمفوض بالتوقيع لا يعود تاريخيهما لأكثر من ثلاثة أشهر.

ج . الإذاعة التجارية (صورة طبق الاصل).

د. إفادة شاملة صادرة عن السجل التجاري تبين المؤسسين والأعضاء والمساهمين أو الشركاء

المفوضين بالتوقيع ، المدير ، رأس المال ، نشاطها والوقوعات الجارية.

٣١٢ . نسخة عن:

أ . ترخيص بفتح واستثمار مستشفى.

ب . إجازة فتح واستثمار (مركز أشعة، مختبر طبي، صيدلية).

٣٢ . الملاءة المالية:

٣٢١ - شهادة تسجيل شركة أو مؤسسة لدى وزارة المالية - مديرية الواردات (صورة طبق الاصل).

٣٢٢ - براءة ذمة من الصندوق الوطني للضمان الإجتماعي " شاملة أو صالحة للإشتراك في

المناقصات " صالحة بتاريخ جلسة التلزم صادرة عن المركز الكائنة ضمن نطاق

صلاحية المؤسسة الصحية تفيد بأنها قد سددت جميع إشتراكاتها . يجب أن تكون

مسجلة في الصندوق وترفض كل إفادة يذكر عليها عبارة "شركة أو مؤسسة غير مسجلة"

بيروت في : ٢٠٢٥ / ٢ / ٢٣

فريق ثان

السيد قيصر حنا باسيم

(صورة طبق الاصل).

٣٢٣- شهادة تسجيل المؤسسة الصحية في مديرية الضريبة على القيمة المضافة إذا كانت خاضعة لها ، أو شهادة عدم التسجيل إذا لم تكون خاضعة ، وفي هذه الحالة يلتزم الملتزم بسعره وان أصبح مسجلاً في فترة التنفيذ .

٣٢٤- إفادة صادرة عن البلدية التي يقع المركز الرئيسي للمؤسسة الصحية ، تفيد أنها سددت كامل الرسوم البلدية المتوجبة عليها ، صادرة عن العام الذي تجري فيه جلسة التلزم .

٣٢٥- تصريح من العارض يبين فيه صاحب الحق الاقتصادي حتى آخر درجة ملكية بحسب النموذج م ١٨ الصادر عن وزارة المالية. (كل شخص طبيعي يملك او يسيطر فعليا في المحصلة النهائية على النشاط الذي يمارسه العارض، بصورة مباشرة او غير مباشرة، سواء كان هذا العارض شخص طبيعي او معنوي).

٣٢٦- بطاقة الهوية او جواز السفر لصاحب (أصحاب) الحق الاقتصادي.

٣٢٧- سجل عدلي لصاحب (أصحاب) الحق الاقتصادي لا يعود تاريخه لأكثر من ثلاثة أشهر من تاريخ جلسة فض العروض.

٣٢٨- إفادتنا عدم إفلاس وعدم تصفية قضائية صادرتين عن المحكمة الكائنة ضمن نطاق صلاحيتهما المؤسسة التجارية تثبت أن هذه الاخيرة ليست في حالة الافلاس والتصفية القضائية على ألا يعود تاريخهما لأكثر من سنة من تاريخ توقيع هذا الاتفاق.

٣٣. ضمان حسن التنفيذ:

باستثناء المستشفيات الحكومية يتعهد الفريق الثاني بتنفيذ بنود هذا الاتفاق ولهذه الغاية يقدم خلال مهلة خمسة عشرة يوماً من تاريخ تبليغه تصديق الاتفاق ضمان حسن التنفيذ بقيمة ٢٠,٠% من القيمة التقديرية للملف المحددة في المادة التاسعة ، وذلك اما نقدياً يدفع الى صندوق الخزينة أو إلى صندوق سلطة التعاقد ، وإما بموجب كتاب ضمان مصرفي غير قابل للرجوع عنه صادر عن مصرف مقبول من مصرف لبنان يبين أنه قابل للدفع غب الطلب . يعاد هذا المستند عند إنتهاء مفاعيل الاتفاقية.

٣٤. الجدول الواردة أدناه مع ملحقاتها موقعة من الفريق الثاني ومرفقة بهذا الاتفاق وتتضمن:

٣٤١ . تعرفه التقديمات الطبية المعتمدة من قبل الادارة المبنية على الاسعار المعتمدة والتي ستعتمد من قبل قيادة الجيش.

في تنفيذ الاتفاق:

المادة الرابعة:

يتعهد الفريق الثاني بما يلي:

٤١ . استقبال ومعالجة المستفيد المزود بموافقة الإدارة الخطية وإبلاغ المركز الطبي المختص فوراً وبواسطة الفاكس عن المستفيدين الذين يقصدون قسم الطوارئ للمعالجة المزودين بالبطاقة الصحية أو المسلكية فقط وعلى المركز المذكور المبادرة فوراً لتأمين موافقة الإدارة الخطية

للفريق الثاني وفقاً للأصول.

٤٢ . الالتزام الحرفي بمضمون موافقة الإدارة الخطية والطلب من المستفيد تدوين أي تعديل أو

إضافة في موافقة الإدارة الخطية من المركز الطبي المختص مسبقاً وذلك فيما يتعلق بـ:

٤٢١ . تمديد مدة الاستشفاء أو إضافة معالجة أو تعديلها.

٤٢٢ . في الحالات الطارئة والتي تكون فيها حالة المستفيد الصحية أو حياته بخطر على

الفريق الثاني تجاوز طلب التعديل الخطي المسبق والمباشرة بالمعالجة اللازمة فوراً على

أن يتم التعديل أو الإضافة لاحقاً.

٤٢٣ . تأمين البدائل واللوازم والمغروسات الطبية التي يحتاجها المستفيد أثناء الاستشفاء وفقاً

لأسعار منصة وزارة الصحة للمغروسات الطبية ، أما للوازم والبدايل غير المغروسة وفقاً

للسعر المحدد من قبل الإدارة على أن تدون بشكل واضح على الموافقة من قبل المركز

الطبي .

٤٢٤ . طلب الموافقة الاستثنائية المسبقة من قبل المركز الطبي المختص قبل إعطاء أدوية

غذائية.

٤٢٥ . أخذ موافقة المركز الطبي المختص على وضع المستفيد في:

٤٢٥١ . غرفة العزل.

٤٢٥٢ . غرفة العناية الفائقة أو القلبية.

ضمن مهلة ٢٤ ساعة من إجراءاته على أن يتم تبرير من قبل الطبيب المعالج بموجب

تقرير مفصل يصدق من قبل المركز الطبي المختص ويضم الى فاتورة المعالجة.

٤٢٦ . التقيد بالرموز المعتمدة من قبل الإدارة فيما يخص الأعمال الطبية والمخبرية والشعاعية

والمدرجة في الجداول المرفقة.

٤٢٧ . فصل الأعمال الطبية والجراحية المقطوعة عن الأعمال الطبية والجراحية غير المقطوعة

وذلك في إعداد المستندات المثبتة للدين.

٤٢٨ . وضع المستفيد في الدرجة الأعلى في حال لم يتوفر سرير شاغر في الدرجة المخصصة

له دون الحاجة إلى تعديل درجة الاستشفاء.

٤٣ . عدم استيفاء أي مبلغ من المستفيد المزود بموافقة الإدارة الخطية ما لم يقتزن ذلك بأمر واضح

من الإدارة، حينها يتم استيفاء المبلغ المفروض عند انتهاء المعالجة وخروج المستفيد نهائياً وعدم

أخذ توقيعه على أي مستند خلافاً للاتفاق.

٤٤ . تسليم المستندات المثبتة للدين الى لجنة إستلام خدمات الطبابة والإستشفاء أو الى المركز

الطبي المختص وذلك بموجب جداول إجمالية وفقاً للنماذج (المرفقة ربطاً)، بالنسبة لحالة

الإستشفاء (دخول) والتحال الدموي وجلسات العلاج الكيميائي يتم تسليم الفواتير من قبل

المستشفى الى لجنة إستلام خدمات الطبابة والاستشفاء ، أما بالنسبة للمعالجات الخارجية أو

الطوارئ تسليم الفواتير من قبل المستشفى الى المركز الطبي الواقع ضمن نطاقها ، وذلك بمدة أقصاها ثلاثة أشهر من تاريخ المعالجة وتعتبر بحكم الساقطة بمرور الزمن كل فاتورة يتجاوز تاريخ تسليمها ثلاثة أشهر إعتباراً من تاريخ خروج المريض ، أما فيما خص تلك العائدة لمعالجة المستفيدين الذين يخرجون من المستشفى في النصف الثاني من كانون الأول فتسلم قبل الخامس من كانون الثاني ٢٠٢٦ ، بالإضافة الى ذلك أن المستندات المثبتة للدين العائدة للمستفيدين الذين يستمر علاجهم داخل المستشفى لما بعد السنة التعاقدية ٢٠٢٥ فتسلم خلال عشرة أيام من تاريخ الخروج .

- بالنسبة للحالات المرضية التي تستدعي البقاء في المستشفى لفترات طويلة تتجاوز ثلاثة أشهر (إعادة تأهيل) فيتم تسليم المستندات المثبتة للدين كل ثلاثة أشهر إعتباراً من تاريخ دخول المستشفى على أن يتم إعادة فتح ملف طبي جديد لإستكمال المعالجة .

٤٥ . تسليم المركز الطبي المختص وبناءً لطلب هذا الأخير الصور الشعاعية اللازمة ليتمكن من التحقق من صحة تركيب اللوازم والبدايل الطبية.

٤٦ . تأمين المعالجة والعمليات الجراحية على يد طبيب اختصاصي أو أكثر ولا يقبل إجرائها من قبل أطباء متمرنين ويشترط بطبيب البنج أن يكون مجازاً ويدون اسمه على سجلات البنج، يستثنى من ذلك المؤسسات الصحية الجامعية حيث تطبق الأعراف الطبية الأكاديمية المعمول بها عالمياً والتي تسمح إجراء العمليات تحت إشراف ومسؤولية الطبيب المعالج المباشرة.

٤٧ . عدم الاعتراض على نقل المستفيد إلى مؤسسة صحية أخرى عندما تقرر الإدارة أو المركز الطبي المختص ذلك والسماح للضباط الأطباء والأطباء المراقبين المزودين بتكليف خطي من الإدارة أو مصلحة الصحة بالإطلاع على حالة المستفيد الصحية والخدمات الطبية المقدمة إليه والإطلاع على كافة السجلات والملفات المسوكة لديه وتسليمهم نسخة عنها إذا إقتضى الأمر وتقديم التسهيلات اللازمة لهذا الشأن.

٤٨ . إعتداد خطة طوارئ مكتوبة تتعلق بدور المستشفى في مواجهة الجائحات المحتملة وتدابير حماية العاملين الصحيين فيها وفقاً لأحكام التعاميم الصادرة عن وزارة الصحة العامة .

٤٩ . تنظيم ومسك وحفظ ملف طبي خاص لكل مستفيد يعالج لديه وفق الأصول القانونية والطبية وأن يدون عليه بانتظام:

٤٩١ . حالة المستفيد عند الدخول.

٤٩٢ . كافة مراحل تطور مرضه.

٤٩٣ . الفحوصات التي أجريت له ونتائجها وآراء الأطباء المعانين والمعالجين.

٤٩٤ . كافة المعالجات التي نالها المستفيد.

٤٩٥ . أية معلومات طبية يراها ضرورية.

٤٩٦ . استمارة التبليغ عن الأمراض الخبيثة الخاضعة للبرنامج الوطني للأمراض الانتقالية .

٤٩٧. ملخص خروج واضح.

٤٩٨ . إجراء كافة الفحوصات والمعاينات والصور الشعاعية غير المتوفرة في المستشفى بصورة إلزامية وعلى نفقته وإضافة القيمة على فاتورة المعالجة وفقاً للنبذة (ز) من البند ٥١٦ أدناه.

٤٩٩ . أتعاب الأطباء على حده ، على أن تحدد بدلات هذه الأتعاب وفق الأسعار الواردة في هذا الاتفاق وتدرج في الفاتورة.

المادة الخامسة:

إعداد المستندات المثبتة للدين ووضعها في طريق الصرف.

من أجل استلام الإدارة خدمات الطبابة والمعالجة المنفذة من الفريق الثاني على هذا الأخير الالتزام بمدرجات هذا الاتفاق وإعداد المستندات المثبتة للدين وتقديمها وفقاً لما يلي:

٥١ . تنظيم فاتورة معالجة يرفق بها المستندات التالية:

٥١١ . موافقة الإدارة الخطية مع كافة تعديلاتها في حال وجودها.

٥١٢ . نسخة عن ملخص الخروج.

٥١٣ . نسختين من استمارة تبليغ عن الأمراض الخبيثة الخاصة للبرنامج الوطني للأمراض الانتقالية .

٥١٤ . صورة عن البطاقة الصحية لأفراد العائلات .

٥١٥ . جدول بكافة اللوازم الطبية المستعملة أثناء المعالجة على أن تكون هوية اللوازم الطبية مفصلة بصورة واضحة (proforma) وتدل عليها دون أي التباس ، ويضم إلى كافة اللوازم فاتورة الشراء من مصدرها أو صورة عنها تحمل اسم المستفيد صاحب العلاقة مع لصق Label لكل مستلزم استعمل أثناء المعالجة .

٥١٥١ . يحتسب سعر اللوازم والبدائل والمغروسات الطبية وفقاً لأسعار منصة وزارة

الصحة العامة أما اللوازم والبدائل الطبية غير المغروسة فيحدد سعرها بناءً

لموافقة الإدارة وتدوّن على التعهد أو ال (proforma) المقدمة من

المستشفى وتوقع من المركز الطبي المختص .

٥١٦ . كلفة المعالجة وذلك وفقاً للأسعار المعتمدة في الجداول المدرجة في البند ٣٤ آنفاً

باستثناء ما يلي:

أ - يدخل ضمن البذل المقطوع:

١ . لأجرة السرير في اليوم: اللوازم الطبية والأدوية وفقاً لما يلي:

□ اللوازم الطبية:المطهرات المحلية على سبيل المثال ANTISEPTIQUES

LOCAUX THERMOMETRE, SERINGUE, MONTAGE, CANULE

مواد التضميد على سبيل المثال GANTS STERIL OU NON , PANSEMET..ETC

□ الأدوية المليينات LAXATIFS ORAUX والمسكنات البسيطة ANTALGIQUES .

٢ . لغرفة العزل: جميع اللوازم الطبية والأدوية المبينة في النبذة ١ أعلاه.

٣ . لغرفة العناية الفائقة: كافة معدات التخطيط والمراقبة واللوازم العائدة لها

MONITORING وجميع اللوازم الطبية والأدوية المبينة في النبذة ١ أعلاه بالإضافة الى الأعمال الطبية التالية:

CBCD, Coag. Fact., NaHCO₃, Creat, CO₂, CPK, Rx Thorax, ECG, O₂, Hummid., Nebuliz.

٤ . لغرفة الولادة: جميع اللوازم الطبية ومعدات التخطيط والمراقبة ومواد التخدير

والأدوية التي تستعمل بداخلها، منها على سبيل المثال لا الحصر:

PRODUITS DESINFECTANTS: MERCRYL, BETADINE. GANTS DISPOSABLES, COTON, COMPRESSES PETITES, COUCHES, FEMME MECHES. COVER BOOT, ETC....

٥ . لكافة سرير المولود حديثاً: جميع اللوازم الطبية المذكورة في النبذة ١ أعلاه ومواد

التغذية العادية على سبيل المثال CARIL, CAROUBA, GLUCOLIN, GELLOPECTOSE, SIMPLA, PICORIZ, LAIT, ETC...

٦ . لأجرة الحاضنة: كافة اللوازم الطبية المستعملة وأجور التحاليل المخبرية والتصوير

الشعاعي وجميع التقديرات التي تدخل في أجرة السرير في العناية الفائقة.

٧ . لغرفة العمليات: اللوازم الطبية والأدوية التالية:

قطن . شاش . مواد تطهير وتعقيم . أدوية التحضير للعملية . أدوية ولوازم التخدير والإنعاش . جميع معدات التخطيط والمراقبة . أوكسيجين . أجرة الطبيب المساعد . خيوط الجراحة بإستثناء الخيوط التي هي دون (٤/صفر) يحدد سعرها كلوازم طبية من قبل الإدارة .

ب . لا يحتسب البديل المقطوع لأجرة غرفة الطوارئ في حال أدخل المستشفى إلى المستشفى،

أما الأعمال التي تجري ضمنها فتحسب وفق التعرفة.

ج . لا تحتسب أجرة سرير المستشفى في قسم الإستشفاء أثناء الإقامة في غرفة العناية الفائقة.

د . لا يحتسب فرق الدرجة الأعلى في حال لم يتوفر سرير شاغر في الدرجة المخصصة للمستفيد.

هـ . تحتسب أجرة السرير في غرفة العزل كإقامة عادية في حال لم تقتن الأسباب الموجبة للعزل بموافقة رئيس المركز الطبي خلال ٢٤ ساعة كحد أقصى.

و . تحتسب قيمة الأعمال التشخيصية غير المتوفرة لدى الفريق الثاني وفق الأسعار المعتمدة والعائدة لتصنيف المؤسسة الصحية حيث أجريت الأعمال.

إستلام وتصفية ودفع النفقة:

المادة السادسة:

٦١ . تسلم المستندات المثبتة للدين وفقاً للفقرة ٤٤ من هذا العقد.

٦٢ . فور تسلم الإدارة المستندات المثبتة للدين تقوم لجنة استلام خدمات الطبابة والاستشفاء أو

المركز الطبي بتدقيق تلك المستندات والتثبت من مطابقة المعالجة مع مضمون موافقة الإدارة الخطية وتعديلاتها والموافقات الاستثنائية اللاحقة وتطابق أسعار تلك المستندات مع الجداول موضوع البند ٣٤ وتدقيقها وإجراء الخصومات التالية:

٦٢١. شطب قيمة المعالجات المخالفة لمضمون موافقة الإدارة الخطية وتعديلاتها.

٦٢٢. حسم المبالغ التي تزيد عن الأسعار موضوع البند ٣٤ أعلاه.

٦٢٣. شطب ثمن اللوازم الطبية المخالفة لمضمون الفقرة ٥١٥ أعلاه.

٦٢٤. شطب كلفة المعالجة المخالفة لمضمون الفقرة ٥١٦ أعلاه.

٦٢٥. شطب كافة النفقات التي ليس لها علاقة بالعلاج كالهاتف والضيافة والسرير الإضافي

والمرضة الخاصة والطعام الإضافي وعلى الفريق الثاني استيفاؤها مباشرة من المستفيد

عند الخروج وذلك بموجب إيصال على أن يرد ذكرها مفصلة في الفاتورة مع الإشارة إلى

أنها سددت من صاحب العلاقة.

٦٢٦. عند وجود أقسام مرخصة إنما غير مصنفة بعد يعتمد في الأسعار التصنيف الأدنى

٦٢٧. يستوفى بدل المعالجة التي لم يرد ذكره في الجداول المعتمدة موضوع البند ٣٤ أعلاه

بموجب جدول مستقل يضم إلى فاتورة المعالجة ويحتسب بالمقارنة مع عمل مماثل له من

حيث الكلفة والوقت، على أنه يبقى للإدارة الحق في الموافقة على احتساب البديل أو

تعديله.

٦٣. وضع المستندات المثبتة للدين في طريق الصرف بموجب حوالة دفع أو نقداً (سلفة) وتصفياتها

وفقاً للأصول واستصدار أمر دفع بالليرة اللبنانية .

المادة السابعة:

الإجراءات والغرامات المفروضة عند مخالفة أي من مدرجات هذا الاتفاق:

٧١. أحكام جزائية :

٧١١. تعتبر المحاكم اللبنانية المختصة هي الجهة الصالحة للبت في الخلافات الناجمة

عن تطبيق بنود هذه الاتفاقية .

٧١٢. يمكن للفريق الأول توجيه كتاب تنبيه أو إنذار الى الفريق الثاني أو كل طبيب

متعاقد معه في حال ثبت لديه ارتكاب أي منهما خطأ يستوجب ذلك وتودع نسخة عن

هذا الكتاب النقابة المعنية (نقابة المستشفيات - نقابة الأطباء - ...)

٧١٣. في حال إخلال الفريق الثاني بأحد أحكام هذه الاتفاقية أو ارتكابه خطأ إدارياً أو

طبيباً يحق للفريق الأول حسم المبالغ المتوجبة من مستحقات الفريق الثاني ، أو تعليق

العمل بالاتفاقية لمدة يعود تقديرها للفريق الأول ، أو فسخ الاتفاقية بصورة نهائية مع

الإحتفاظ بحقه بالملاحقة القانونية على أن يبرّر التدبير أعلاه بكتاب يرسل الى الفريق

الثاني مع حفظ حق هذا الأخير بالإعتراض وفقاً للأصول القانونية .

٧٢. إنهاء مفاعيل الاتفاقية :

٧٢١ . تنتهي مفاعيل هذه الإتفاقية في الحالات التالية :

- عند إنتهاء مدتها .

- بناء على قرار من الفريق الأول في حال إرتكب الفريق الثاني خطأ إدارياً أو طبياً جسيماً .

- عند إحالة الفريق الثاني الى القضاء إثر خطأ جسيم ناجم عن تنفيذ الإتفاقية ، يحق للفريق الأول تعليق العمل بهذه الإتفاقية طيلة مدة المحاكمة .

٧٢٢ . يعتبر الفريق الثاني متمنعاً عن إستقبال المرضى عند التصريح بذلك خطياً أو شفهاً أو عند إلزام الفريق الأول بالموافقة المسبقة أو بأي شرط من الشروط التي تعدل الآلية المعنية في هذا السياق أو عند تكرار شكوى المستفيدين من عدم إستقبال التحويل والتحقق مادياً على الأرض من قبل الفريق الأول من توافر وشغور الأسرة عملاً بشروط هذه الإتفاقية .

٧٣ . فسخ الاتفاق ومصادرة ضمان حسن التنفيذ لمصلحة الخزينة في الحالات التالية:

٧٣١ . عدم تنفيذ الفقرة ٤٢٢ و ٤٢٣ .

٧٣٢ . عدم تنفيذ البنود ٤١ ، ٤٣ ، ٤٦ ، ٤٧ ، ٤٨ ، ٤٩ .

٧٣٣ . تقديم أي من المستندات الثبوتية المدرجة في المادتين الثالثة والسادسة من هذا الاتفاق ليتبين لاحقاً بأنها غير صحيحة.

٧٤ . فسخ الاتفاق

٧٤١ . عند الإفلاس أو التصفية القضائية أو إلغاء ترخيص الاستثمار .

٧٤٢ . عند عدم تنفيذ المادة الثالثة.

٧٥ . تغريم الفريق الثاني بنسبة ٥٠% من قيمة فاتورة المعالجة المدفوعة للمؤسسة الصحية التي تمت فيها معالجة المستفيد في حال عدم تنفيذ البند ٤١ بالإضافة إلى ملاحقته جزائياً إذا تعرض المستفيد لمضاعفات صحية من جراء نقله للمعالجة في مؤسسة طبية أخرى وفقاً لما تنص عليه القوانين الطبية النافذة في كل حين.

٧٦ . عند مخالفة البند ٤٤ أنفاً يتم تأجيل وضع المستندات المثبتة للدين طريق الصرف حتى نهاية العام التعاقدية.

٧٧ . تغريم الفريق الثاني بنسبة ٥% من قيمة فاتورة المعالجة الصافية للدفع عند مخالفة الفقرة ٤٢٦ أعلاه بنسبة ١٠% عند التكرار.

٧٨ . شطب اللوازم والبدائل الطبية وكافة الأتعاب المرافقة لها عند مخالفة البند ٤٥ .

٧٩ . إعادة الفاتورة من لجنة إستلام خدمات الطباية والإستشفاء أو المركز الطبي المختص إلى المؤسسة الصحية بموجب لائحة إرسال وفق الأصول لاستكمال و/أو تصحيح المستندات المثبتة للدين وفقاً لما نصت عليه المادة الخامسة أعلاه في حال وجود نواقص أو مغايرات.

بيروت في : ٢٠٢٥ / ٢ / ٢٣

فريق ثان

السيد قيصر حنا باسيم

المادة الثامنة:

مدة الالتزام بهذا الاتفاق:

- يعمل بهذه الاتفاقية بعد تصديقها من المرجع الصالح وإبلاغها الى الفريق الثاني ولغاية ٢٠٢٥/١٢/٣١ .

- إذا تعذر على الإدارة تلزيم الخدمات الطبية للعام ٢٠٢٦ قبل نهاية العام ٢٠٢٥ يمدد مفعول هذه الاتفاقية خلال العام ٢٠٢٦ بناءً لقرار المرجع الصالح لمرة واحدة أو أكثر ، وذلك لفترة أقصاها السنة الواحدة ، بنفس الشروط والأسعار شرط إبلاغ الفريق الثاني قرار أو قرارات التمديد قبل إنتهاء مدة الإلتزام أو تمديده .

المادة التاسعة:

قيمة الاتفاق

إن هذا الإتفاق هو غب الطلب ضمن قيمة تقديرية وسقفها المالي يبلغ: /٧٥,٠٠٠,٠٠٠,٠٠٠/ ل.ل. خمسة وسبعون مليار ليرة لبنانية سنوياً قابلة للزيادة أو النقصان من قبل الادارة تبعاً للخدمات الطبية والحالات المرضية التي تحيلها الإدارة على الفريق الثاني والتي لا يمكن تحديدها مسبقاً ويعتمد في إجراء المحاسبة الأسعار المحددة وفقاً لما هو مدرج في البند ٣٤ من المادة الثالثة من هذا الإتفاق.

بيروت في / ٢٠٢٥ /
فريق أول
وزير الداخلية والبلديات

بيروت في / ٢٠٢٥ /
عدد /
تأشير مراقب عقد النفقات

ملحق رقم اثنين: أسعار الدرجة العامة (أسعار مقطوعة) في المستشفيات المتعاقدة المصنفة (A/B)

		OPERATION				AUDITORY SYSTEM				Anesthesia				Hospital A/B				Total	
		K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B	Total										
1	69200	5	0	1	1,750,000	0	0	4,312,000	6,062,000										
2	69420	15	0	1	5,250,000	0	3,500,000	8,721,000	17,471,000										
3	69433	20	12	1	7,000,000	4,200,000	3,500,000	11,301,000	26,001,000										
4	69501	75	25	2	26,250,000	8,750,000	3,500,000	31,312,000	69,812,000										
5	69511	90	30	4	31,500,000	10,500,000	3,500,000	52,524,000	98,024,000										
6	69620	60	20	2	21,000,000	7,000,000	3,500,000	24,597,000	56,097,000										
7	69631	75	25	2	26,250,000	8,750,000	3,500,000	32,281,000	70,781,000										
8	69635	110	36	3	38,500,000	12,600,000	3,500,000	49,576,000	104,176,000										
9	69660	80	26	2	28,000,000	9,100,000	3,500,000	35,544,000	76,144,000										
10	69801	50	18	2	17,500,000	6,300,000	3,500,000	25,224,000	52,524,000										
11	69905	75	25	2	26,250,000	8,750,000	3,500,000	31,749,000	70,249,000										
CARDIO SYSTEM																			
12	33200	75	33	1	26,250,000	11,550,000	3,500,000	39,748,000	81,048,000										
13	33210	25	0	1	8,750,000	0	3,500,000	21,811,000	34,061,000										
14	33245	85	0	1	29,750,000	0	3,500,000	31,380,000	64,630,000										
15	33247	65	0	1	22,750,000	0	3,500,000	20,596,000	46,846,000										
16	33250	150	67	7	52,500,000	23,450,000	3,500,000	173,791,000	253,241,000										
17	33411	130	65	7	45,500,000	22,750,000	3,500,000	246,190,000	317,940,000										
18	33416	175	87	5	61,250,000	30,450,000	3,500,000	190,690,000	285,890,000										
19	33420	145	72	7	50,750,000	25,200,000	3,500,000	82,977,000	162,427,000										
20	33425	150	75	7	52,500,000	26,250,000	3,500,000	207,042,000	289,292,000										
21	33430	125	65	7	43,750,000	22,750,000	3,500,000	262,980,000	332,980,000										
22	33452	95	47	7	33,250,000	16,450,000	3,500,000	169,504,000	222,704,000										
23	33460	125	65	7	43,750,000	22,750,000	3,500,000	186,130,000	256,130,000										
24	33468	130	65	7	45,500,000	22,750,000	3,500,000	186,157,000	257,907,000										
25	33472	95	47	7	33,250,000	16,450,000	3,500,000	173,026,000	226,226,000										
26	33478	140	70	6	49,000,000	24,500,000	3,500,000	174,691,000	251,691,000										
27	33480	250	125	6	87,500,000	43,750,000	3,500,000	263,280,000	398,030,000										

		OPERATION											
		K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total				
28	33641	100	50	7	35,000,000	17,500,000	3,500,000	165,246,000	221,246,000				
29	33647	200	100	6	70,000,000	35,000,000	3,500,000	177,231,000	285,731,000				
30	33648	190	95	6	66,500,000	33,250,000	3,500,000	189,952,000	293,202,000				
31	33650	270	135	6	94,500,000	47,250,000	3,500,000	181,408,000	326,658,000				
32	33649	270	135	6	94,500,000	47,250,000	3,500,000	198,006,000	343,256,000				
33	33670	250	125	6	87,500,000	43,750,000	3,500,000	209,991,000	344,741,000				
34	33684	200	100	6	70,000,000	35,000,000	3,500,000	203,575,000	312,075,000				
35	33690	100	50	6	35,000,000	17,500,000	3,500,000	175,456,000	231,456,000				
36	33697	250	125	6	87,500,000	43,750,000	3,500,000	220,938,000	355,688,000				
37	33710	150	75	6	52,500,000	26,250,000	3,500,000	183,783,000	266,033,000				
38	33720	90	45	6	31,500,000	15,750,000	3,500,000	160,032,000	210,782,000				
39	33730	200	100	6	70,000,000	35,000,000	3,500,000	203,575,000	312,075,000				
40	33735	120	60	6	42,000,000	21,000,000	3,500,000	201,118,000	267,618,000				
41	33750	120	60	6	42,000,000	21,000,000	3,500,000	183,373,000	249,873,000				
42	33774	300	150	6	105,000,000	52,500,000	3,500,000	229,783,000	390,783,000				
43	33784	350	175	6	122,500,000	61,250,000	3,500,000	220,911,000	408,161,000				
44	33785	350	175	6	122,500,000	61,250,000	3,500,000	220,911,000	408,161,000				
45	33786	200	100	6	70,000,000	35,000,000	3,500,000	190,225,000	298,725,000				
46	33788	125	65	6	43,750,000	22,750,000	3,500,000	173,872,000	243,872,000				
47	33800	100	50	5	35,000,000	17,500,000	3,500,000	168,822,000	224,822,000				
48	33820	120	60	7	42,000,000	21,000,000	3,500,000	77,313,000	143,813,000				
49	33840	180	90	5	63,000,000	31,500,000	3,500,000	161,643,000	259,643,000				
50	33870	210	105	5	73,500,000	36,750,000	3,500,000	149,085,000	262,835,000				
51	33875	175	90	5	61,250,000	31,500,000	3,500,000	158,857,000	255,107,000				
52	33877	230	115	5	80,500,000	40,250,000	3,500,000	145,317,000	269,567,000				
53	33916	125	65	6	43,750,000	22,750,000	3,500,000	156,127,000	226,127,000				
54	34001	85	34	2	29,750,000	11,900,000	3,500,000	31,668,000	76,818,000				
55	34203	80	30	3	28,000,000	10,500,000	3,500,000	40,840,000	82,840,000				
56	34451	90	35	3	31,500,000	12,250,000	3,500,000	40,021,000	87,271,000				
57	34471	65	25	1	22,750,000	8,750,000	3,500,000	22,180,000	57,180,000				
58	34501	120	40	3	42,000,000	14,000,000	3,500,000	44,170,000	103,670,000				
59	34510	120	40	3	42,000,000	14,000,000	3,500,000	44,170,000	103,670,000				
60	34530	120	40	3	42,000,000	14,000,000	3,500,000	44,170,000	103,670,000				

		OPERATION					DIGESTIVE SYSTEM														
			K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total											
87	42505	Plastic repair of salivary duct, sialodochoplasty: secondary or complicated	40	16	1	14,000,000	5,600,000	3,500,000	11,683,000	34,783,000											
88	42821	Tonsillectomy and adenoidectomy, including treatment of postoperative complications: any age	35	16	1	12,250,000	5,600,000	3,500,000	15,355,000	36,705,000											
89	42830	Adenoidectomy (separate procedure): primary or secondary	20	13	1	7,000,000	4,550,000	3,500,000	13,444,000	28,494,000											
90	43200	Esophagoscopy, rigid or flexible fiberoptic: diagnostic (separate procedure)	15	0	0	5,250,000	0	0	1,842,000	7,092,000											
91	43205	Esophagoscopy, rigid or flexible fiberoptic: therapeutic	30	15	0	10,500,000	5,250,000	0	9,253,000	25,003,000											
92	43260	Endoscopic retrograde cholangiopancreatography (ERCP) diagnostic (separate procedure)	40	17	1	14,000,000	5,950,000	3,500,000	12,721,000	36,171,000											
93	43300	Esophagoplasty (plastic repair or reconstruction), cervical approach: without repair of tracheoesophageal fistula	60	20	5	21,000,000	7,000,000	3,500,000	47,229,000	78,729,000											
94	43305	Esophagoplasty (plastic repair or reconstruction), cervical approach: with repair of tracheoesophageal fistula	100	40	7	35,000,000	14,000,000	3,500,000	69,778,000	122,278,000											
95	43340	Esophagojejunostomy (without total gastrectomy)	100	34	5	35,000,000	11,900,000	3,500,000	58,749,000	109,149,000											
96	43450	Dilation of esophagus, by unguided sound or bougie, single or multiple passes	15	0	1	5,250,000	0	0	10,387,000	15,637,000											
97	43500	Gastrostomy: with exploration or removal of foreign body	70	24	5	24,500,000	8,400,000	3,500,000	52,497,000	88,897,000											
98	43620	Gastrectomy, total: with repair by intestinal transplant, without lymphadenectomy	160	56	8	56,000,000	19,600,000	3,500,000	131,094,000	210,194,000											
99	43761	Repositioning of the gastric feeding tube through the duodenum for enteric nutrition (separate procedure)	15	0	1	5,250,000	0	0	9,295,000	14,545,000											
100	43825	Gastrojejunostomy with vagotomy, any type	115	40	7	40,250,000	14,000,000	3,500,000	74,269,000	132,019,000											
101	43830	Gastrotomy	70	24	1	24,500,000	8,400,000	3,500,000	21,675,000	58,075,000											
102	43860	Revision of gastrojejunostomy with reconstruction, with or without vagotomy	120	42	5	42,000,000	14,700,000	3,500,000	68,740,000	128,940,000											
103	44020	Enterotomy, small bowel other than duodenum: for exploration, biopsy, or foreign body removal (separate procedure)	75	27	4	26,250,000	9,450,000	3,500,000	49,563,000	88,763,000											
104	44120	Enterectomy: with anastomosis	95	34	6	33,250,000	11,900,000	3,500,000	68,400,000	117,050,000											
105	44146	Colectomy, partial: with coloproctostomy (low pelvic anastomosis), with or without colostomy	130	46	5	45,500,000	16,100,000	3,500,000	73,054,000	138,154,000											
106	44150	Colectomy, total, abdominal, without proctectomy: with continent ileostomy or ileoproctostomy	135	44	6	47,250,000	15,400,000	3,500,000	78,718,000	144,868,000											
107	44153	Colectomy, total or subtotal, with proctectomy: with rectal mucosectomy, ileoanal or coloanal anastomosis, creation of reservoir (S or J), with or without loop ileostomy or colostomy	180	63	10	63,000,000	22,050,000	3,500,000	114,468,000	203,018,000											
108	44345	Reconstruction of colostomy (separate procedure)	70	25	5	24,500,000	8,750,000	3,500,000	54,763,000	91,513,000											
109	44388	Fiberoptic colonoscopy through colostomy: diagnostic or therapeutic (separate procedure)	15	0	1	5,250,000	0	0	6,346,000	11,596,000											
110	44625	Closure of enterostomy, large or small intestine: with or without resection and anastomosis	80	28	5	28,000,000	9,800,000	3,500,000	58,558,000	99,858,000											
111	44950	Appendectomy, any method (non-incidental procedure)	60	21	3	21,000,000	7,350,000	3,500,000	34,779,000	66,629,000											
112	45000	Transrectal drainage of pelvic abscess (separate procedure)	25	14	1	8,750,000	4,900,000	3,500,000	12,406,000	29,556,000											
113	45020	Incision and drainage of deep suprapubic, pelvic, or retrorectal abscess	25	14	1	8,750,000	4,900,000	3,500,000	12,406,000	29,556,000											
114	45110	Proctectomy: complete, combined abdominoperineal, with colostomy, one or two stages	150	53	7	52,500,000	18,550,000	3,500,000	88,560,000	163,110,000											
115	45505	Proctoplasty: for prolapse of mucous membrane or stenosis	50	18	1	17,500,000	6,300,000	3,500,000	17,799,000	45,099,000											

		OPERATION											
		K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B		Total			
116	45905	15	12	1	5,250,000	4,200,000	3,500,000	9,622,000		22,572,000			
117	46040	35	16	1	12,250,000	5,600,000	3,500,000	12,543,000		33,893,000			
118	46060	40	16	1	14,000,000	5,600,000	3,500,000	15,834,000		38,934,000			
119	46080	30	15	1	10,500,000	5,250,000	3,500,000	10,891,000		30,141,000			
120	46200	35	16	1	12,250,000	5,600,000	3,500,000	13,635,000		34,985,000			
121	46262	50	18	2	17,500,000	6,300,000	3,500,000	26,125,000		53,425,000			
122	46270	45	17	1	15,750,000	5,950,000	3,500,000	18,058,000		43,258,000			
123	46750	65	22	3	22,750,000	7,700,000	3,500,000	34,329,000		68,279,000			
124	46760	150	50	10	52,500,000	17,500,000	3,500,000	99,453,000		172,953,000			
125	46937	20	13	1	7,000,000	4,550,000	3,500,000	12,994,000		28,044,000			
126	46938	30	15	1	10,500,000	5,250,000	3,500,000	12,148,000		31,398,000			
127	46940	20	13	1	7,000,000	4,550,000	3,500,000	10,647,000		25,697,000			
128	46945	20	13	1	7,000,000	4,550,000	3,500,000	11,383,000		26,433,000			
129	47000	15	0	1	5,250,000	0	3,500,000	12,462,000		21,212,000			
130	47010	65	23	5	22,750,000	8,050,000	3,500,000	53,602,000		87,902,000			
131	47130	200	80	6	70,000,000	28,000,000	3,500,000	86,622,000		188,122,000			
132	47425	110	39	7	38,500,000	13,650,000	3,500,000	92,218,000		147,868,000			
133	47480	55	20	3	19,250,000	7,000,000	3,500,000	41,044,000		70,794,000			
134	47600	80	28	3	28,000,000	9,800,000	3,500,000	42,696,000		83,996,000			
135	47610	110	39	7	38,500,000	13,650,000	3,500,000	80,616,000		136,266,000			
136	48100	70	25	3	24,500,000	8,750,000	3,500,000	37,782,000		74,532,000			
137	48145	130	46	7	45,500,000	16,100,000	3,500,000	92,001,000		157,101,000			
138	48180	120	42	7	42,000,000	14,700,000	3,500,000	102,865,000		163,065,000			
139	49000	80	28	5	28,000,000	9,800,000	3,500,000	55,390,000		96,690,000			
140	49002	70	25	4	24,500,000	8,750,000	3,500,000	41,932,000		78,682,000			
141	49020	70	25	7	24,500,000	8,750,000	3,500,000	75,865,000		112,615,000			
142	49180	15	0	1	5,250,000	0	0	11,533,000		16,783,000			
143	49496	55	20	1	19,250,000	7,000,000	3,500,000	18,249,000		47,999,000			
144	49507	70	24	1	24,500,000	8,400,000	3,500,000	21,757,000		58,157,000			
145	49550	55	18	1	19,250,000	6,300,000	3,500,000	18,441,000		47,491,000			
146	49553	70	24	1	24,500,000	8,400,000	3,500,000	23,040,000		59,440,000			

		OPERATION								
		K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total	
147	49560	70	24	1	24,500,000	8,400,000	3,500,000	26,262,000	62,662,000	
148	45378	40	16	1	14,000,000	5,600,000	0	8,326,000	27,926,000	
149	43235	25	0	1	8,750,000	0	0	6,688,000	15,438,000	


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	OPERATION					FEMALE GENITAL SYSTEM						
			K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total		
150	56605	Biopsy of vulva or perineum (separate procedure)	10	0	1	3,500,000	0	3,500,000	8,434,000	15,434,000		
151	57000	Colpotomy: with exploration or drainage of pelvic abscess	20	12	3	7,000,000	4,200,000	3,500,000	20,338,000	35,038,000		
152	57110	Vaginectomy, complete removal of vagina	45	17	1	15,750,000	5,950,000	3,500,000	26,221,000	51,421,000		
153	57135	Excision of vaginal cyst or tumor	20	12	1	7,000,000	4,200,000	3,500,000	12,256,000	26,956,000		
154	57200	Colporrhaphy: suture of injury of vagina (non obstetrical)	30	14	1	10,500,000	4,900,000	3,500,000	14,659,000	33,559,000		
155	57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele (separate procedure)	40	16	1	14,000,000	5,600,000	3,500,000	15,478,000	38,578,000		
156	57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy (separate procedure)	35	15	1	12,250,000	5,250,000	3,500,000	13,498,000	34,498,000		
157	57265	Combined anteroposterior colporrhaphy: with or without enterocele repair (separate procedure)	55	19	1	19,250,000	6,650,000	3,500,000	22,945,000	52,345,000		
158	57280	Colpopexy, abdominal approach	55	19	1	19,250,000	6,650,000	3,500,000	20,815,000	50,215,000		
159	57282	Sacrospinous ligament fixation for prolapse of vagina following hysterectomy (separate procedure)	55	19	1	19,250,000	6,650,000	3,500,000	20,815,000	50,215,000		
160	57310	Closure of urethrovaginal fistula: any method	50	18	2	17,500,000	6,300,000	3,500,000	23,559,000	50,859,000		
161	57452	Colposcopy (vaginocopy): (separate procedure)	10	0	1	3,500,000	0	0	8,326,000	11,826,000		
162	57454	Colposcopy: with biopsies, or biopsy of the cervix (separate procedure)	10	0	1	3,500,000	0	0	9,609,000	13,109,000		
163	57460	Colposcopy: with loop electrosurgical excision(s) of the cervix (LEEP) (separate procedure)	20	12	1	7,000,000	4,200,000	3,500,000	12,285,000	26,985,000		
164	57500	Cervix, biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)	10	0	1	3,500,000	0	0	8,926,000	12,426,000		
165	57505	Endocervical curettage (not done as part of a dilation and curettage) (separate procedure)	10	0	1	3,500,000	0	3,500,000	9,253,000	16,253,000		
166	57510	Cauterization of cervix: electro, thermal, cryo, or laser ablation (separate procedure)	15	0	1	5,250,000	0	0	9,376,000	14,626,000		
167	57700	Cerclage of uterine cervix, non obstetrical	25	13	1	8,750,000	4,550,000	3,500,000	13,431,000	30,231,000		
168	58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(ies)	90	30	6	31,500,000	10,500,000	3,500,000	69,478,000	114,978,000		
169	58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(ies)	130	43	6	45,500,000	15,050,000	3,500,000	104,340,000	168,390,000		
170	58240	Pelvic exenteration for gynecologic malignancy (total abdominal hysterectomy, removal of bladder, ureteral transplants and/or abdominopelvic resection of rectum and colon and colostomy)	210	73	10	73,500,000	25,550,000	3,500,000	137,427,000	239,977,000		
171	58267	Vaginal hysterectomy: with colpo-urethrotopexy (Marshall-Marchetti-Krantz or Percyra type, with/without endoscopic control)	100	33	6	35,000,000	11,550,000	3,500,000	67,431,000	117,481,000		
172	58275	Vaginal hysterectomy, with total or partial colpocystomy	110	36	6	38,500,000	12,600,000	3,500,000	71,389,000	125,989,000		
173	58520	Hysterorrhaphy, repair or ruptured uterus (non obstetrical)	55	19	4	19,250,000	6,650,000	3,500,000	44,293,000	73,693,000		
174	58700	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	40	16	1	14,000,000	5,600,000	3,500,000	17,826,000	40,926,000		
175	58800	Drainage of ovarian cyst(s), unilateral or bilateral: vaginal approach	25	13	1	8,750,000	4,550,000	3,500,000	14,236,000	31,036,000		

		OPERATION		MUSCULOSKELETAL SYSTEM				Anesthesia		Hospital A/B		Total	
				K	ARE	Ios	Surgeon						
208	20900	Bone graft, any donor area		35	14	1	12,250,000	4,900,000		3,500,000		37,343,000	
209	20920	Fascia lata graft		35	14	1	12,250,000	4,900,000		3,500,000		35,323,000	
210	21245	Reconstruction of mandible or maxilla, subperiosteal implant		75	27	2	26,250,000	9,450,000		3,500,000		69,270,000	
211	21315	Closed treatment, nasal bone or septum fracture: with or without stabilization		20	12	1	7,000,000	4,200,000		3,500,000		30,642,000	
212	21338	Open treatment of nasosethmoid fracture: with or without external fixation		50	18	1	17,500,000	6,300,000		3,500,000		45,318,000	
213	21445	Open treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)		35	16	2	12,250,000	5,600,000		3,500,000		56,634,000	
214	21462	Open treatment of closed or open mandibular fracture: with or without interdental fixation		60	21	2	21,000,000	7,350,000		3,500,000		62,562,000	
215	21465	Open treatment of mandibular condylar fracture		65	22	2	22,750,000	7,700,000		3,500,000		66,641,000	
216	21470	Open treatment of complicated mandibular fracture by multiple surgical approaches, including internal fixation, interdental fixation, and/or wiring of dentures or splints		100	35	3	35,000,000	12,250,000		3,500,000		94,101,000	
217	21805	Open treatment of rib fracture: without fixation, each		15	12	1	5,250,000	4,200,000		3,500,000		23,391,000	
218	21810	Treatment of rib fracture: requiring external fixation ("flail chest")		35	15	1	12,250,000	5,250,000		3,500,000		35,536,000	
219	22315	Closed treatment of vertebral body fracture and/or dislocation, with or without anesthesia, by manipulation or traction, each		50	18	2	17,500,000	6,300,000		3,500,000		52,825,000	
220	22505	Spine manipulation requiring anesthesia, any region		15	12	2	5,250,000	4,200,000		3,500,000		31,335,000	
221	22554	Arthrodesis, anterior interbody technique: cervical below C2, with bone graft (separate procedure)		120	40	8	42,000,000	14,000,000		3,500,000		151,637,000	
222	22558	Arthrodesis, anterior interbody technique: lumbar, with bone graft (separate procedure)		150	50	8	52,500,000	17,500,000		3,500,000		184,365,000	
223	22585	Arthrodesis, anterior or anterolateral, each additional interspace (list separately in addition to single level arthrodesis)		40	16	8	14,000,000	5,600,000		3,500,000		110,077,000	
224	22610	Arthrodesis, posterior or posterolateral technique, with local bone or bone allograft and/or internal fixation: thoracic or lumbar (separate procedure)		135	45	8	47,250,000	15,750,000		3,500,000		156,111,000	
225	23450	Capsulorrhaphy for recurrent dislocation of shoulder, anterior or posterior, any		85	28	3	29,750,000	9,800,000		3,500,000		92,940,000	
226	23505	Closed treatment of clavicular fracture: with manipulation		20	12	1	7,000,000	4,200,000		3,500,000		25,756,000	
227	23515	Open treatment of clavicular fracture, with or without internal or external skeletal fixation		50	18	1	17,500,000	6,300,000		3,500,000		46,737,000	
228	23575	Closed treatment of scapular fracture: with manipulation, with or without skeletal traction (with or without shoulder joint involvement)		20	12	1	7,000,000	4,200,000		3,500,000		26,029,000	
229	23605	Closed treatment of proximal humeral (surgical or anatomical neck) fracture: with manipulation, with or without skeletal traction		20	12	1	7,000,000	4,200,000		3,500,000		28,540,000	
230	23660	Open treatment of acute shoulder dislocation		40	16	1	14,000,000	5,600,000		3,500,000		71,338,000	
231	23665	Closed treatment of shoulder dislocation, with fracture of greater tuberosity, with manipulation		20	12	1	7,000,000	4,200,000		3,500,000		26,793,000	
232	23700	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)		20	12	1	7,000,000	4,200,000		3,500,000		26,793,000	
233	24102	Arthrotomy, elbow: for synovectomy		50	18	1	17,500,000	6,300,000		3,500,000		45,591,000	
234	24505	Closed treatment of humeral shaft fracture: with manipulation, with or without skeletal traction		35	15	1	12,250,000	5,250,000		3,500,000		38,457,000	
235	24516	Open treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage and/or locking screws		75	25	4	26,250,000	8,750,000		3,500,000		100,648,000	

		OPERATION				K	ARE	Los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
236	24600	Treatment of closed elbow dislocation				35	15	1	12,250,000	5,250,000	3,500,000	17,430,000	38,430,000
237	24615	Open treatment of acute or chronic elbow dislocation				50	18	1	17,500,000	6,300,000	3,500,000	18,291,000	45,591,000
238	24655	Closed treatment of radial head or neck fracture: with manipulation				35	15	1	12,250,000	5,250,000	3,500,000	14,304,000	35,304,000
239	24675	Closed treatment of ulnar fracture, proximal end (olecranon process): with manipulation				35	15	1	12,250,000	5,250,000	3,500,000	14,304,000	35,304,000
240	25105	Arthroscopy, wrist joint: for synovectomy				45	15	1	15,750,000	5,250,000	3,500,000	18,385,000	42,885,000
241	25505	Closed treatment of radial shaft fracture: with manipulation				30	14	1	10,500,000	4,900,000	3,500,000	14,250,000	33,150,000
242	25515	Open treatment of radial shaft fracture: with/without internal or external fixation				60	20	1	21,000,000	7,000,000	3,500,000	30,357,000	61,857,000
243	25535	Closed treatment of ulnar shaft fracture: with manipulation				25	13	1	8,750,000	4,550,000	3,500,000	14,236,000	31,036,000
244	25545	Open treatment of ulnar shaft fracture: with/without internal or external fixation				60	20	1	21,000,000	7,000,000	3,500,000	62,844,000	94,344,000
245	25565	Closed treatment of radial and ulnar shaft fractures: with manipulation				35	15	1	12,250,000	5,250,000	3,500,000	14,590,000	35,590,000
246	25574	Open treatment of radial and ulnar shaft fractures, with internal or external fixation of radius or				35	15	1	12,250,000	5,250,000	3,500,000	19,068,000	40,068,000
247	25575	Open treatment of radial and ulnar shaft fractures, with internal or external fixation: of radius and ulna				70	23	3	24,500,000	8,050,000	3,500,000	43,570,000	79,620,000
248	25620	Open treatment of distal radial fracture, or epiphyseal separation, with or without fracture of ulnar styloid, with or without internal or external fixation				60	20	3	21,000,000	7,000,000	3,500,000	34,125,000	65,625,000
249	25670	Open treatment of radiocarpal or intercarpal dislocation, one or more bones				45	15	1	15,750,000	5,250,000	3,500,000	18,412,000	42,912,000
250	25675	Closed treatment of distal radioulnar dislocation with manipulation				25	13	1	8,750,000	4,550,000	3,500,000	11,724,000	28,524,000
251	25800	Arthrodesis, wrist joint (including radiocarpal and/or ulnocarpal fusion): without bone graft (separate procedure)				70	23	1	24,500,000	8,050,000	3,500,000	20,938,000	56,988,000
252	26025	Drainage of palmar bursa				30	14	1	10,500,000	4,900,000	3,500,000	13,650,000	32,550,000
253	26040	Fasciotomy, palmar, for Dupuytren's contracture: closed (subcutaneous)				35	15	1	12,250,000	5,250,000	3,500,000	16,501,000	37,501,000
254	26100	Arthroscopy for synovial biopsy: carpometacarpal or metacarpophalangeal or interphalangeal joint				25	12	1	8,750,000	4,200,000	3,500,000	17,949,000	34,399,000
255	26499	Correction claw finger, other methods				60	20	1	21,000,000	7,000,000	3,500,000	19,792,000	51,292,000
256	26605	Closed treatment of metacarpal fracture, single: with manipulation, each bone				25	0	1	8,750,000	0	3,500,000	11,943,000	24,193,000
257	26615	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone				40	13	1	14,000,000	4,550,000	3,500,000	15,288,000	37,338,000
258	26735	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each				40	13	1	14,000,000	4,550,000	3,500,000	18,754,000	40,804,000
259	26785	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single				30	12	1	10,500,000	4,200,000	3,500,000	15,724,000	33,924,000
260	27125	Partial hip replacement, prosthesis (eg, femoral stem prosthesis, bipolar arthroplasty)				105	35	6	36,750,000	12,250,000	3,500,000	77,845,000	130,345,000
261	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip replacement), with or without autograft or allograft				150	50	6	52,500,000	17,500,000	3,500,000	94,812,000	168,312,000
262	27235	Percutaneous skeletal fixation of femoral fracture, proximal end, neck, undisplaced, mildly displaced or impacted fracture				70	23	1	24,500,000	8,050,000	3,500,000	26,344,000	62,394,000
263	27236	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement (direct fracture exposure)				95	32	6	33,250,000	11,200,000	3,500,000	101,296,000	149,246,000
264	27240	Closed treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture, with manipulation with or without skin or skeletal traction				50	16	3	17,500,000	5,600,000	3,500,000	30,111,000	56,711,000

		OPERATION													
		K	AKR	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total						
295	27503	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000						
296	27510	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000						
297	27511	85	28	5	29,750,000	9,800,000	3,500,000	58,572,000	101,622,000						
298	27514	95	31	6	33,250,000	10,850,000	3,500,000	88,875,000	136,475,000						
299	27517	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000						
300	27519	90	30	3	31,500,000	10,500,000	3,500,000	44,034,000	89,534,000						
301	27532	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000						
302	27550	35	12	3	12,250,000	4,200,000	3,500,000	27,040,000	46,990,000						
303	27558	100	33	5	35,000,000	11,550,000	3,500,000	77,695,000	127,745,000						
304	27560	35	12	3	12,250,000	4,200,000	3,500,000	27,040,000	46,990,000						
305	27566	60	20	5	21,000,000	7,000,000	3,500,000	68,550,000	100,050,000						
306	27570	15	0	1	5,250,000	0	3,500,000	10,741,000	19,491,000						
307	27625	40	13	1	14,000,000	4,550,000	3,500,000	17,526,000	39,576,000						
308	27626	60	20	1	21,000,000	7,000,000	3,500,000	21,348,000	52,848,000						
309	27652	60	20	1	21,000,000	7,000,000	3,500,000	23,887,000	55,387,000						
310	27700	75	25	1	26,250,000	8,750,000	3,500,000	24,037,000	62,537,000						
311	27705	80	26	1	28,000,000	9,100,000	3,500,000	29,701,000	70,301,000						
312	27752	40	13	4	14,000,000	4,550,000	3,500,000	36,553,000	58,603,000						
313	27758	75	25	5	26,250,000	8,750,000	3,500,000	75,115,000	113,615,000						
314	27781	25	0	4	8,750,000	0	3,500,000	33,483,000	45,733,000						
315	27784	40	13	6	14,000,000	4,550,000	3,500,000	67,567,000	89,617,000						
316	27830	25	0	4	8,750,000	0	3,500,000	33,483,000	45,733,000						
317	27842	40	13	4	14,000,000	4,550,000	3,500,000	36,553,000	58,603,000						
318	27846	60	20	6	21,000,000	7,000,000	3,500,000	59,049,000	90,549,000						
319	27848	75	25	3	26,250,000	8,750,000	3,500,000	38,833,000	77,333,000						
320	27860	15	0	3	5,250,000	0	3,500,000	23,901,000	32,651,000						
321	27870	90	30	6	31,500,000	10,500,000	3,500,000	68,058,000	113,558,000						
322	27871	60	20	6	21,000,000	7,000,000	3,500,000	71,389,000	102,889,000						

		OPERATION						K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
351	29800	Arthroscopy, diagnostic: any joint, with or without biopsy, limited debridement, partial synovectomy, removal of loose or foreign body, lysis and resection of adhesions or lavage and drainage (separate procedure)						40	13	1	14,000,000	4,550,000	3,500,000	20,392,000	42,442,000


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		OPERATION		NERVOUS SYSTEM		K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
352	61500	Cranicectomy: with excision of tumor or other bone lesion of skull		130	52	8			45,500,000	18,200,000	3,500,000	187,414,000	254,614,000
353	61543	Craniotomy, trephination, bone flap craniotomy: for partial or subtotal hemispherectomy		145	58	8			50,750,000	20,300,000	3,500,000	155,241,000	229,791,000
354	61548	Hypophysectomy or excision of pituitary tumor, transnasal or transseptal approach, non-bifrontal bone flap		160	64	8			56,000,000	22,400,000	3,500,000	140,076,000	221,976,000
355	61550	Craniectomy for craniostenosis: single or multiple sutures, or frontal or partial bone flap, or bifrontal bone flap		135	52	8			47,250,000	18,200,000	3,500,000	189,393,000	258,343,000
356	62000	Elevation of depressed skull fracture: simple, extradural		80	28	8			28,000,000	9,800,000	3,500,000	176,739,000	218,039,000
357	62194	Replacement or irrigation, subarachnoid/subdural catheter		35	16	6			12,250,000	5,600,000	3,500,000	57,861,000	79,211,000
358	62201	Ventriculocisternostomy, third ventricle: stereotactic method or any method		90	32	10			31,500,000	11,200,000	3,500,000	103,002,000	149,202,000
359	62230	Replacement or revision of CSI: shunt, obstructed valve, or distal catheter in shunt		70	25	4			24,500,000	8,750,000	3,500,000	63,417,000	100,167,000
360	62258	Removal of complete CSI: shunt system: with replacement by similar or other shunt at same operation		110	39	10			38,500,000	13,650,000	3,500,000	110,919,000	166,569,000
361	62269	Biopsy of spinal cord, percutaneous needle		30	0	1			10,500,000	0	3,500,000	18,099,000	32,099,000
362	62270	Spinal puncture, diagnostic		10	0	1			3,500,000	0	3,500,000	6,688,000	13,688,000
363	63001	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or disectomy, one or two vertebral segments: cervical, thoracic, lumbar or sacral		110	39	5			38,500,000	13,650,000	3,500,000	89,898,000	145,548,000
364	63046	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral) with decompression of spinal cord, cauda equina and/or nerve root(s), single vertebral segment: thoracic or lumbar		110	39	5			38,500,000	13,650,000	3,500,000	89,898,000	145,548,000
365	63075	Disectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophylectomy: cervical or thoracic, single		135	48	5			47,250,000	16,800,000	3,500,000	96,900,000	164,450,000
366	63650	Percutaneous implantation of neurostimulator electrodes: epidural		45	17	1			15,750,000	5,950,000	3,500,000	15,546,000	40,746,000
367	64722	Decompression of nerve		35	15	1			12,250,000	5,250,000	3,500,000	13,513,000	34,513,000
368	63744	Replacement, irrigation or revision of lumbar subarachnoid shunt		50	19	4			17,500,000	6,650,000	3,500,000	69,832,000	97,482,000
369	64856	Suture of major peripheral nerve, arm or leg: including transposition		95	32	2			33,250,000	11,200,000	3,500,000	32,281,000	80,231,000
370	64861	Suture of brachial or lumbar plexus		135	45	3			47,250,000	15,750,000	3,500,000	47,638,000	114,138,000
EYE AND OCULAR ADNEXA													
371	65280	Repair of laceration: cornea and/or sclera, perforating, not involving uveal tissue		50	18	1			17,500,000	6,300,000	3,500,000	19,383,000	46,683,000
372	65400	Keratotomy: lamellar, partial (except pterygium)		40	16	1			14,000,000	5,600,000	3,500,000	16,707,000	39,807,000
373	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization		20	12	1			7,000,000	4,200,000	3,500,000	8,790,000	23,490,000
374	65710	Keratoplasty: lamellar		80	26	1			28,000,000	9,100,000	3,500,000	25,935,000	66,535,000
375	65771	Radial keratotomy		85	28	1			29,750,000	9,800,000	3,500,000	24,583,000	67,633,000
376	65855	Trabeculoplasty by laser surgery, one or more sessions (defined treatment series)		40	16	1			14,000,000	5,600,000	3,500,000	14,413,000	37,513,000
377	65860	Severing adhesions of anterior segment, laser technique (separate procedure)		30	15	1			10,500,000	5,250,000	3,500,000	10,482,000	29,732,000
378	66220	Repair of scleral staphyloma: without graft		50	18	1			17,500,000	6,300,000	3,500,000	17,799,000	45,099,000
379	66225	Repair of scleral staphyloma: with graft		75	25	1			26,250,000	8,750,000	3,500,000	22,630,000	61,130,000
380	66625	Iridectomy, with comesclear or corneal section: peripheral or sector, for glaucoma (separate procedure)		45	17	1			15,750,000	5,950,000	3,500,000	15,834,000	41,034,000
381	66635	Iridectomy, with comesclear or corneal section: "optical" (separate procedure)		45	17	1			15,750,000	5,950,000	3,500,000	15,834,000	41,034,000

		OPERATION					K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
382	66680	Repair of iris, ciliary body (as for iridodialysis)					45	17	1	15,750,000	5,950,000	3,500,000	15,834,000	41,034,000
383	66700	Ciliary body destruction: diathermy, cyclophotocoagulation, cryotherapy or cyclodialysis					35	15	1	12,250,000	5,250,000	3,500,000	11,847,000	32,847,000
384	66761	Iridotomy/iridectomy by laser surgery (eg. for glaucoma)					25	13	1	8,750,000	4,550,000	3,500,000	5,241,000	22,041,000
385	66762	Iridoplasty by photocoagulation (eg. for improvement of vision, for widening of anterior chamber angle)					30	14	1	10,500,000	4,900,000	3,500,000	7,234,000	26,134,000
386	66984	Extra- or intracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique					90	32	1	31,500,000	11,200,000	3,500,000	30,849,000	77,049,000
387	66985	Insertion of intraocular lens prosthesis (secondary implant), not associated with concurrent cataract removal, with or without anterior vitrectomy					70	23	1	24,500,000	8,050,000	3,500,000	24,924,000	60,974,000
388	67005	Removal of vitreous, anterior approach (open sky technique or limbal incision): partial, or subtotal removal with mechanical vitrectomy					45	18	1	15,750,000	6,300,000	3,500,000	17,389,000	42,939,000
389	67028	Intravitreal injection of pharmacologic agent (separate procedure)					20	12	1	7,000,000	4,200,000	3,500,000	7,452,000	22,152,000
390	67311	Strabismus surgery: any technique, any number of muscles					60	20	1	21,000,000	7,000,000	3,500,000	24,078,000	55,578,000
391	67515	Injection of therapeutic agent into Tenon's capsule					10	0	1	3,500,000	0	0	8,271,000	11,771,000
392	67700	Blepharotomy, drainage of abscess, eyelid					10	0	1	3,500,000	0	3,500,000	7,425,000	14,425,000
393	67710	Severing of tarsorrhaphy					10	12	1	3,500,000	4,200,000	3,500,000	6,769,000	17,969,000
394	67914	Repair of ectropion: suture or thermocauterization					25	13	1	8,750,000	4,550,000	3,500,000	13,362,000	30,162,000
395	68110	Excision of lesion, conjunctiva					15	0	1	5,250,000	0	3,500,000	11,806,000	20,556,000
396	68130	Excision of lesion, conjunctiva: with adjacent sclera					35	15	1	12,250,000	5,250,000	3,500,000	17,266,000	38,266,000
397	68200	Subconjunctival injection					5	0	1	1,750,000	0	3,500,000	7,521,000	12,771,000
398	68326	Conjunctivoplasty, with or without reconstruction cul-de-sac: with conjunctival graft, extensive rearrangement, or buccal mucous membrane graft (includes obtaining graft)					50	18	1	17,500,000	6,300,000	3,500,000	18,754,000	46,054,000
399	68340	Repair of symblepharon: division of symblepharon with or without insertion of conformer or contact lens					30	14	1	10,500,000	4,900,000	3,500,000	12,679,000	31,579,000
400	68360	Conjunctival flap: bridge or partial					30	14	1	10,500,000	4,900,000	3,500,000	12,679,000	31,579,000
401	68362	Conjunctival flap: total (eg. Gunderson thin flap or purse string flap)					50	18	1	17,500,000	6,300,000	3,500,000	16,707,000	44,007,000
RESPIRATORY SYSTEM														
402	30140	Submucous resection turbinate, complete or partial					30	14	1	10,500,000	4,900,000	3,500,000	14,386,000	33,286,000
403	30520	Submucous resection of nasal septum					40	16	1	14,000,000	5,600,000	3,500,000	14,250,000	37,350,000
404	30540	Repair choanal atresia: intranasal					60	20	1	21,000,000	7,000,000	3,500,000	21,294,000	52,794,000
405	30801	Cauterization and/or ablation, mucosa of turbinates (separate procedure)					15	0	1	5,250,000	0	3,500,000	10,332,000	19,082,000
406	30901	Control nasal hemorrhage, any method (separate procedure)					15	12	1	5,250,000	4,200,000	3,500,000	13,744,000	26,694,000
407	30920	Ligation arteries: ethmoidal or internal maxillary artery, transantral					55	19	1	19,250,000	6,650,000	3,500,000	21,825,000	51,225,000
408	31020	Sinusotomy, maxillary (antrotomy): intranasal					20	12	1	7,000,000	4,200,000	3,500,000	11,602,000	26,302,000
409	31030	Sinusotomy maxillary (antrotomy): radical (Caldwell-Luc), with or without removal of antrochoanal polyps					40	16	2	14,000,000	5,600,000	3,500,000	24,787,000	47,887,000
410	31040	Pterygomaxillary fossa surgery, any approach					60	20	2	21,000,000	7,000,000	3,500,000	26,016,000	57,516,000
411	31070	Sinusotomy, sphenoid, frontal or intranasal					40	16	1	14,000,000	5,600,000	3,500,000	15,069,000	38,169,000

		OPERATION				MEDIASTINUM AND DIAPHRAGM				URINARY SYSTEM			
		K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total				
443	39200	Excision of mediastinal cyst	80	32	7	28,000,000	11,200,000	69,123,000	111,823,000				
444	39220	Excision of mediastinal tumor	100	40	7	35,000,000	14,000,000	80,698,000	133,198,000				
445	39400	Mediastinoscopy, with or without biopsy	30	15	1	10,500,000	5,250,000	18,700,000	37,950,000				
446	39501	Repair of diaphragmatic laceration, any approach	90	36	5	31,500,000	12,600,000	49,003,000	96,603,000				
447	50020	Drainage of perirenal or renal abscess (separate procedure)	70	25	3	24,500,000	8,750,000	31,941,000	68,691,000				
448	50045	Nephrotomy, with exploration	80	28	4	28,000,000	9,800,000	43,297,000	84,597,000				
449	50065	Nephrolithotomy: secondary surgical operation for calculus	120	42	6	42,000,000	14,700,000	76,957,000	137,157,000				
450	50200	Renal biopsy: percutaneous, by trocar or needle	20	0	1	7,000,000	0	13,704,000	24,204,000				
451	50205	Renal biopsy: by surgical exposure of kidney	75	27	1	26,250,000	9,450,000	12,898,000	52,098,000				
452	50220	Nephrectomy, including partial ureterectomy, any approach including rib resection	100	35	6	35,000,000	12,250,000	73,900,000	124,650,000				
453	50230	Nephrectomy, including partial ureterectomy, any approach including rib resection: radical, with regional lymphadenectomy and/or vena caval thrombectomy	140	50	5	49,000,000	17,500,000	80,206,000	150,206,000				
454	50234	Nephrectomy, with total ureterectomy and bladder cuff	140	50	5	49,000,000	17,500,000	78,541,000	148,541,000				
455	50240	Nephrectomy, partial	100	35	6	35,000,000	12,250,000	76,740,000	127,490,000				
456	50340	Recipient nephrectomy (separate procedure), bilateral	100	35	6	35,000,000	12,250,000	76,740,000	127,490,000				
457	50393	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection, percutaneous	25	0	1	8,750,000	0	13,362,000	25,612,000				
458	50590	Lithotripsy, extracorporeal shock wave	65	0	1	22,750,000	0	17,266,000	43,516,000				
459	50610	Ureterolithotomy	70	25	6	24,500,000	8,750,000	57,820,000	94,570,000				
460	50650	Ureterectomy, with bladder cuff (separate procedure)	95	34	6	33,250,000	11,900,000	74,923,000	123,573,000				
461	50951	Ureteral endoscopy through established ureterostomy diagnostic or therapeutic	30	0	1	10,500,000	0	16,707,000	30,707,000				
462	51020	Cystostomy or cystostomy: with fulguration and/or insertion of radioactive material	25	13	1	8,750,000	4,550,000	12,393,000	29,193,000				
463	51045	Cystostomy, with insertion of ureteral catheter or stent (separate procedure)	40	16	1	14,000,000	5,600,000	15,478,000	38,578,000				
464	51050	Cystolithotomy, cystostomy with removal of calculus: without vesical neck dissection	40	16	1	14,000,000	5,600,000	20,475,000	43,575,000				
465	51060	Transvesical ureterolithotomy	45	17	1	15,750,000	5,950,000	20,542,000	45,742,000				
466	51530	Cystostomy: for excision of bladder tumor	75	27	6	26,250,000	9,450,000	64,276,000	103,476,000				
467	51575	Cystectomy, complete: with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	200	70	12	70,000,000	24,500,000	186,294,000	284,294,000				
468	51700	Bladder irrigation, simple, lavage and/or irrigation (separate procedure)	5	0	1	1,750,000	0	4,981,000	10,231,000				
469	51705	Change of cystostomy tube (separate procedure)	10	0	1	3,500,000	0	8,271,000	15,271,000				
470	51785	Electromyography studies (EMG) of anal or urethral sphincter, any technique	10	0	1	3,500,000	0	8,271,000	15,271,000				
471	51792	Stimulus evoked response (eg, measurement of bulbocavernosus reflex latency time)	10	0	1	3,500,000	0	8,271,000	15,271,000				
472	51797	Voiding pressure studies (VP): intra-abdominal voiding pressure (AP) (rectal, gastric, intra-peritoneal)	10	0	1	3,500,000	0	6,006,000	13,006,000				
473	51860	Cystorhaphy, suture of bladder wound, injury or rupture	70	25	4	24,500,000	8,750,000	44,143,000	80,893,000				
474	51900	Closure of vesicovaginal fistula	80	26	6	28,000,000	9,100,000	65,301,000	105,901,000				
475	52000	Cystourethroscopy diagnostic or therapeutic	25	12	1	8,750,000	4,200,000	14,727,000	31,177,000				

OPERATION										Hospital A/B		Total
				K	ARE	Ios	Surgeon	Anesthesia	Consultation			
476	52204	Cystourethroscopy, with biopsy (separate procedure)		25	12	1	8,750,000	4,200,000	3,500,000	15,055,000		31,505,000
477	52214	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands		25	12	1	8,750,000	4,200,000	3,500,000	13,608,000		30,058,000
478	52277	Cystourethroscopy, with resection of external sphincter (sphincterotomy)		40	16	1	14,000,000	5,600,000	3,500,000	18,099,000		41,199,000
479	52290	Cystourethroscopy: with ureteral meatotomy, unilateral or bilateral (separate procedure)		30	0	1	10,500,000	0	3,500,000	13,977,000		27,977,000
480	52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure)		30	14	1	10,500,000	4,900,000	3,500,000	17,608,000		36,508,000
481	52317	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments		50	18	1	17,500,000	6,300,000	3,500,000	20,665,000		47,965,000
482	52320	Cystourethroscopy (including ureteral catheterization): removal or fragmentation of ureteral calculus, with or without manipulation (separate procedure)		40	16	1	14,000,000	5,600,000	3,500,000	27,600,000		50,700,000
483	52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type) (separate procedure)		25	12	1	8,750,000	4,200,000	3,500,000	12,762,000		29,212,000
484	52334	Cystourethroscopy, with insertion of ureteral guide wire through kidney to establish a percutaneous nephrostomy, retrograde (separate procedure)		35	15	1	12,250,000	5,250,000	3,500,000	16,980,000		37,980,000
485	52450	Transurethral incision of prostate		45	17	1	15,750,000	5,950,000	3,500,000	19,000,000		44,200,000
486	52500	Transurethral resection of bladder neck (separate procedure)		50	18	1	17,500,000	6,300,000	3,500,000	20,992,000		48,292,000
487	52510	Transurethral balloon dilation of the prostatic urethra, any method		40	16	1	14,000,000	5,600,000	3,500,000	16,597,000		39,697,000
488	52601	Transurethral resection of prostate including complete vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy		100	33	6	35,000,000	11,550,000	3,500,000	77,313,000		127,363,000
489	52650	Transurethral cryosurgical removal of prostate (postoperative irrigations and aspiration of sloughing tissue included)		70	23	1	24,500,000	8,050,000	3,500,000	24,160,000		60,210,000
490	52700	Transurethral drainage of prostatic abscess		40	16	1	14,000,000	5,600,000	3,500,000	15,478,000		38,578,000
491	53200	Biopsy of urethra		15	12	1	5,250,000	4,200,000	3,500,000	10,851,000		23,801,000
492	53210	Urethrectomy, total, including cystostomy		90	30	1	31,500,000	10,500,000	3,500,000	27,627,000		73,127,000
493	53670	Catheterization, urethra (sonde foley - foley cath)		5	0	1	1,750,000	0	0	5,337,000		7,087,000
HEMIC AND LYMPHATIC SYSTEMS												
494	38100	Splenectomy		90	31	5	31,500,000	10,850,000	3,500,000	65,929,000		111,779,000
495	38500	Biopsy or excision of lymph node(s): superficial (separate procedure)		20	12	1	7,000,000	4,200,000	3,500,000	12,912,000		27,612,000
496	38510	Biopsy or excision of lymph node(s): deep (cervical with or without excision of scalene fat pad, or axillary nodes) (separate procedure)		30	14	1	10,500,000	4,900,000	3,500,000	14,959,000		33,859,000
ENDOCRINE SYSTEM												
497	60220	Total thyroid lobectomy, unilateral (hemithyroidectomy)		90	30	3	31,500,000	10,500,000	3,500,000	44,662,000		90,162,000
498	60225	Total thyroid lobectomy, unilateral: with contralateral subtotal lobectomy, including		110	36	3	38,500,000	12,600,000	3,500,000	47,092,000		101,692,000
499	60240	Thyroidectomy, total or complete		120	40	4	42,000,000	14,000,000	3,500,000	55,063,000		114,563,000
500	60500	Panthyroidectomy		105	35	4	36,750,000	12,250,000	3,500,000	51,828,000		104,328,000



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 مركز الشمال الاستشفائي بالدمشق

 RC: 12739

ملحق رقم واحد: أسعار الدرجة الخاصة (أسعار مقطوعة) في المستشفيات المتعاقة المصنفة (A/B)

CODE	OPERATION	K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
AUDITORY SYSTEM									
1	69200 Removal foreign body from external auditory canal (separate procedure)	5	0	1	1,925,000	0	0	4,476,000	6,401,000
2	69420 Myringotomy including aspiration and/or eustachian tube inflation (separate procedure)	15	0	1	5,775,000	0	3,850,000	9,772,000	19,397,000
3	69433 Tympanostomy (requiring insertion of ventilating tube)	20	12	1	7,700,000	4,620,000	3,850,000	12,858,000	29,028,000
4	69501 Mastoidectomy: simple	75	25	2	28,875,000	9,625,000	3,850,000	36,199,000	78,549,000
5	69511 Mastoidectomy: radical, any procedure	90	30	4	34,650,000	11,550,000	3,850,000	60,277,000	110,327,000
6	69620 Myringoplasty, uncomplicated	60	20	2	23,100,000	7,700,000	3,850,000	28,146,000	62,796,000
7	69631 Tympanoplasty without mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial or revision: any method	75	25	2	28,875,000	9,625,000	3,850,000	37,372,000	79,722,000
8	69635 Tympanoplasty with antrotomy or mastoidectomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair); with or without ossicular chain reconstruction, any method	110	36	3	42,350,000	13,860,000	3,850,000	57,438,000	117,498,000
9	69660 Stapedectomy or stapedotomy with reestablishment of ossicular continuity, with or without use of foreign material	80	26	2	30,800,000	10,010,000	3,850,000	41,277,000	85,937,000
10	69801 Labyrinthotomy, with or without cryosurgery or other nonexcisional destructive procedures or tack procedure: transcanal	50	18	2	19,250,000	6,930,000	3,850,000	28,882,000	58,912,000
11	69905 Labyrinthectomy: transcanal	75	25	2	28,875,000	9,625,000	3,850,000	36,718,000	79,068,000
CARDIO SYSTEM									
12	33200 Insertion of permanent pacemaker with epicardial electrode(s): open procedure	75	33	1	28,875,000	12,705,000	3,850,000	47,010,000	92,440,000
13	33210 Insertion or replacement of temporary transvenous single chamber cardiac electrode, or pacemaker catheter (separate procedure)	25	0	1	9,625,000	0	3,850,000	25,470,000	38,945,000
14	33245 Implantation of automatic implantable cardioverter-defibrillator pads with or without	85	0	1	32,725,000	0	3,850,000	36,963,000	73,538,000
15	33247 Insertion or replacement of implantable cardioverter-defibrillator lead(s) by other than thoracotomy	65	0	1	25,025,000	0	3,850,000	24,034,000	52,909,000
16	33250 Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, A-V node re-entry), tract(s), and/or focus (foci)	150	67	7	57,750,000	25,795,000	3,850,000	203,772,000	291,167,000
17	33411 Replacement, aortic valve: with or without aortic annulus enlargement, noncoronary cusp	130	65	7	50,050,000	25,025,000	3,850,000	290,652,000	369,577,000
18	33416 Resection or incision of subvalvular aortic stenosis	175	87	5	67,375,000	33,495,000	3,850,000	225,415,000	330,135,000
19	33420 Valvotomy, mitral valve (commisurotomy): closed	145	72	7	55,825,000	27,720,000	3,850,000	94,795,000	182,190,000
20	33425 Valvuloplasty, mitral valve, any method	150	75	7	57,750,000	28,875,000	3,850,000	243,673,000	334,148,000
21	33430 Replacement, mitral valve	125	65	7	48,125,000	25,025,000	3,850,000	310,798,000	387,798,000
22	33452 Valvotomy, tricuspid valve	95	47	7	36,575,000	18,095,000	3,850,000	198,628,000	257,148,000
23	33460 Valvuloplasty or valvectomy, tricuspid valve, with or without insertion of tricuspid ring	125	65	7	48,125,000	25,025,000	3,850,000	218,580,000	295,580,000
24	33468 Tricuspid valve replacement or repositioning and plication for Ebstein anomaly	130	65	7	50,050,000	25,025,000	3,850,000	218,611,000	297,536,000
25	33472 Valvotomy, pulmonary valve (commisurotomy) closed or open	95	47	7	36,575,000	18,095,000	3,850,000	202,854,000	261,374,000
26	33478 Pulmonary artery patch for supraventricular stenosis	140	70	6	53,900,000	26,950,000	3,850,000	205,536,000	290,236,000
27	33480 Double valve procedure	250	125	6	96,250,000	48,125,000	3,850,000	311,841,000	460,066,000

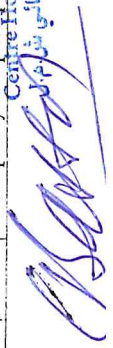
CODE	OPERATION	K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
28	33641 Repair atrial septal defect, secundum, with or without patch	100	50	7	38,500,000	19,250,000	3,850,000	193,518,000	255,118,000
29	33647 Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	200	100	6	77,000,000	38,500,000	3,850,000	208,582,000	327,932,000
30	33648 Correction of cor triatriatum	190	95	6	73,150,000	36,575,000	3,850,000	223,848,000	337,423,000
31	33650 Bicaual - bipulmonary bypass procedure	270	135	6	103,950,000	51,975,000	3,850,000	213,594,000	373,369,000
32	33649 Repair of tricuspid atresia	270	135	6	103,950,000	51,975,000	3,850,000	233,512,000	393,287,000
33	33670 Repair of complete atrioventricular canal, with prosthetic valve	250	125	6	96,250,000	48,125,000	3,850,000	247,894,000	396,119,000
34	33684 Closure of ventricular septal defect, with pulmonary valvotomy or infundibular resection, with or without patch	200	100	6	77,000,000	38,500,000	3,850,000	240,195,000	359,545,000
35	33690 Banding of pulmonary artery	100	50	6	38,500,000	19,250,000	3,850,000	206,452,000	268,052,000
36	33697 Complete repair of tetralogy of Fallot: with or without closure of previous shunt	250	125	6	96,250,000	48,125,000	3,850,000	261,031,000	409,256,000
37	33710 Repair sinus of Valsalva fistula, with/ without repair of ventricular septal defect	150	75	6	57,750,000	28,875,000	3,850,000	216,444,000	306,919,000
38	33720 Repair sinus of Valsalva aneurysm	90	45	6	34,650,000	17,325,000	3,850,000	187,944,000	243,769,000
39	33730 Complete repair of total anomalous venous return	200	100	6	77,000,000	38,500,000	3,850,000	240,195,000	359,545,000
40	33735 Atrial septectomy or septostomy any method	120	60	6	46,200,000	23,100,000	3,850,000	237,247,000	310,397,000
41	33750 Shunt: systemic or vena cava to pulmonary artery, with or without graft	120	60	6	46,200,000	23,100,000	3,850,000	215,953,000	289,103,000
42	33774 Repair of transposition of the great arteries, any method	300	150	6	115,500,000	57,750,000	3,850,000	271,645,000	448,745,000
43	33784 Total repair of double outlet ventricle	350	175	6	134,750,000	67,375,000	3,850,000	260,998,000	466,973,000
44	33785 Total repair of single ventricle (double inlet ventricle)	350	175	6	134,750,000	67,375,000	3,850,000	260,998,000	466,973,000
45	33786 Total repair, truncus arteriosus (Rastelli type operation)	200	100	6	77,000,000	38,500,000	3,850,000	224,176,000	343,526,000
46	33788 Reimplantation of anomalous pulmonary artery	125	65	6	48,125,000	25,025,000	3,850,000	204,552,000	281,552,000
47	33800 Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	100	50	5	38,500,000	19,250,000	3,850,000	199,174,000	260,774,000
48	33820 Patent ductus arteriosus: ligation and/or division, any age	120	60	7	46,200,000	23,100,000	3,850,000	87,997,000	161,147,000
49	33840 Excision or repair of coarctation of aorta, with or without associated patent ductus arteriosus, any type	180	90	5	69,300,000	34,650,000	3,850,000	190,558,000	298,358,000
50	33870 Transverse arch graft, with or without cardiopulmonary by-pass	210	105	5	80,850,000	40,425,000	3,850,000	175,489,000	300,614,000
51	33875 Descending thoracic aorta graft, with or without cardiopulmonary by-pass	175	90	5	67,375,000	34,650,000	3,850,000	187,216,000	293,091,000
52	33877 Repair of thoracoabdominal aortic aneurysm with graft	230	115	5	88,550,000	44,275,000	3,850,000	170,968,000	307,643,000
53	33916 Pulmonary embolectomy or endarterectomy with or without embolectomy	125	65	6	48,125,000	25,025,000	3,850,000	183,258,000	260,258,000
54	34001 Arterial embolectomy or thrombectomy, with or without catheter: carotid, subclavian, innominate, axillary, brachial, radial, or ulnar artery (separate procedure)	85	34	2	32,725,000	13,090,000	3,850,000	36,636,000	86,301,000
55	34203 Arterial embolectomy or thrombectomy, with or without catheter: popliteal-tibio-peroneal, femoropopliteal, or aortoiliac artery (separate procedure)	80	30	3	30,800,000	11,550,000	3,850,000	46,960,000	93,160,000
56	34451 Venous thrombectomy, direct or with catheter: vena cava, iliac, or femoropopliteal vein, by abdominal and leg incision (separate procedure)	90	35	3	34,650,000	13,475,000	3,850,000	45,978,000	97,953,000
57	34471 Venous thrombectomy, direct or with catheter: axillary and subclavian vein, by neck or arm incision (separate procedure)	65	25	1	25,025,000	9,625,000	3,850,000	25,935,000	64,435,000
58	34501 Valvuloplasty, femoral vein (separate procedure)	120	40	3	46,200,000	15,400,000	3,850,000	50,958,000	116,408,000
59	34510 Venous valve transposition, any vein donor (separate procedure)	120	40	3	46,200,000	15,400,000	3,850,000	50,958,000	116,408,000
60	34530 Saphenopopliteal vein anastomosis (separate procedure)	120	40	3	46,200,000	15,400,000	3,850,000	50,958,000	116,408,000

CODE	OPERATION	K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
61	35001 Direct repair of aneurysm, false aneurysm, or excision and graft insertion, with or without patch graft for aneurysm, ruptured aneurysm, or occlusive disease: carotid, subclavian, innominate, vertebral, or axillary- brachial artery	130	50	5	50,050,000	19,250,000	3,850,000	158,011,000	231,161,000
62	35045 Direct repair of aneurysm, false aneurysm, or excision and graft insertion, with or without patch graft for aneurysm, false aneurysm, ruptured aneurysm or occlusive disease, radial or ulnar artery	75	30	1	28,875,000	11,550,000	3,850,000	29,914,000	74,189,000
63	35231 Repair blood vessel, with graft: neck, extremity, hand, finger	80	26	1	30,800,000	10,010,000	3,850,000	32,305,000	76,965,000
64	35241 Repair blood vessel, with graft: intrathoracic, with bypass	150	75	5	57,750,000	28,875,000	3,850,000	177,618,000	268,093,000
65	35246 Repair blood vessel, with graft: intrathoracic without bypass	125	55	5	48,125,000	21,175,000	3,850,000	113,736,000	186,886,000
66	35301 Thromboendarterectomy, with or without patch graft: carotid, vertebral, subclavian, innominate	125	50	5	48,125,000	19,250,000	3,850,000	119,437,000	190,662,000
67	35331 Thromboendarterectomy, with or without patch graft: abdominal aorta, and/or major branches, iliac -	175	70	5	67,375,000	26,950,000	3,850,000	167,157,000	265,332,000
68	35381 Thromboendarterectomy, with or without patch graft: axillary, brachial, common femoral, deep (profunda), femoral and/or popliteal, and/or tibioperoneal	100	35	5	38,500,000	13,475,000	3,850,000	125,607,000	181,432,000
69	35526 Bypass graft, with vein or prosthesis: carotid, subclavian, vertebral, axillary,	125	44	5	48,125,000	16,940,000	3,850,000	125,688,000	194,603,000
70	35531 Bypass graft, with vein or prosthesis: aorto-splenic, renal, iliac, celiac, or mesenteric	165	66	5	63,525,000	25,410,000	3,850,000	166,677,000	259,462,000
71	36010 Introduction of catheter, superior or inferior vena cava (separate procedure)	15	0	1	5,775,000	0	3,850,000	10,455,000	20,080,000
72	36215 Selective catheter placement, arterial system: any site (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	16,647,000	39,747,000
73	36260 Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver) (separate procedure)	60	20	1	23,100,000	7,700,000	3,850,000	22,806,000	57,456,000
74	36420 Placement of peripheral venous catheter by cutdown (outside O.R.) (separate procedure)	10	0	1	3,850,000	0	3,850,000	8,097,000	15,797,000
75	36488 Placement of central venous catheter (subclavian, jugular, or other vein): percutaneous or cutdown separate procedure)	15	0	1	5,775,000	0	3,850,000	10,455,000	20,080,000
76	36510 Catheterization of umbilical vein (separate procedure)	10	0	1	3,850,000	0	3,850,000	8,097,000	15,797,000
77	36530 Percutaneous insertion or revision of implantable intravenous infusion pump chamber or Broviac catheter (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	16,647,000	39,747,000
78	36821 Arterio-venous anastomosis, direct, any site	60	20	1	23,100,000	7,700,000	3,850,000	22,806,000	57,456,000
79	36825 Creation of arteriovenous fistula: any graft	70	23	1	26,950,000	8,855,000	3,850,000	27,556,000	67,211,000
80	37205 Transcatheter placement of an intravascular stent, (non coronary vessel), percutaneous or open: initial vessel	55	20	1	21,175,000	7,700,000	3,850,000	20,413,000	53,138,000
81	93548 Combined left heart catheterization, selective coronary angiography, one or more coronary arteries, selective left ventricular angiography, with aortic root aortography	50	0	1	19,250,000	0	3,850,000	27,982,000	51,082,000
82	93549 Combined right and left heart catheterization, selective coronary angiography, one or more coronary arteries, and selective ventricular angiography	60	0	1	23,100,000	0	3,850,000	29,128,000	56,078,000
83	92982 Percutaneous transluminal angioplasty: single vessel	85	0	2	32,725,000	0	3,850,000	44,089,000	80,664,000
84	33510 Coronary artery bypass, single coronary graft, vein or artery, (includes obtaining graft)	170	85	5	65,450,000	32,725,000	3,850,000	243,351,000	345,376,000
85	33511 Coronary artery bypass, double coronary graft, vein or artery, (includes obtaining grafts), with or without	190	95	5	73,150,000	36,575,000	3,850,000	245,563,000	359,138,000

CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
86 33512	Coronary artery bypass, triple coronary graft, vein or artery, (includes obtaining grafts), with or without endarterectomy	200	100	5	77,000,000	38,500,000	3,850,000	249,249,000	368,599,000


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 RC: 12739

CODE	OPERATION	K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
DIGESTIVE SYSTEM									
87	42505 Plastic repair of salivary duct, sialodochoplasty: secondary or complicated	40	16	1	15,400,000	6,160,000	3,850,000	13,338,000	38,748,000
88	42821 'I'ossilectomy and adenoidectomy, including treatment of postoperative complications: any age	35	16	1	13,475,000	6,160,000	3,850,000	17,745,000	41,230,000
89	42830 Adenoidectomy (separate procedure): primary or secondary	20	13	1	7,700,000	5,005,000	3,850,000	15,451,000	32,006,000
90	43200 Esophagoscopy, rigid or flexible fiberoptic: diagnostic (separate procedure)	15	0	0	5,775,000	0	0	2,211,000	7,986,000
91	43205 Esophagoscopy, rigid or flexible fiberoptic: therapeutic	30	15	0	11,550,000	5,775,000	0	11,104,000	28,429,000
92	43260 Endoscopic retrograde cholangiopancreatography (ERCP) diagnostic (separate procedure)	40	17	1	15,400,000	6,545,000	3,850,000	14,583,000	40,378,000
93	43300 I'sophagoplasty (plastic repair or reconstruction), cervical approach: without repair of tracheoesophageal fistula	60	20	5	23,100,000	7,700,000	3,850,000	53,262,000	87,912,000
94	43305 I'sophagoplasty (plastic repair or reconstruction), cervical approach: with repair of tracheoesophageal fistula	100	40	7	38,500,000	15,400,000	3,850,000	78,957,000	136,707,000
95	43340 Esophagojejunostomy (without total gastrectomy)	100	34	5	38,500,000	13,090,000	3,850,000	67,086,000	122,526,000
96	43450 Dilatation of esophagus, by unguided sound or bougie, single or multiple passes (separate procedure)	15	0	1	5,775,000	0	0	11,782,000	17,557,000
97	43500 Gastrotomy: with exploration or removal of foreign body	70	24	5	26,950,000	9,240,000	3,850,000	59,584,000	99,624,000
98	43620 Gastrectomy, total: with repair by intestinal transplant, without lymphadenectomy	160	56	8	61,600,000	21,560,000	3,850,000	151,852,000	238,862,000
99	43761 Repositioning of the gastric feeding tube through the duodenum for enteric nutrition (separate procedure)	15	0	1	5,775,000	0	0	10,471,000	16,246,000
100	43825 Gastrojejunostomy with vagotomy, any type	115	40	7	44,275,000	15,400,000	3,850,000	84,345,000	147,870,000
101	43830 Gastrotomy	70	24	1	26,950,000	9,240,000	3,850,000	25,327,000	65,367,000
102	43860 Revision of gastrojejunostomy with reconstruction, with or without vagotomy	120	42	5	46,200,000	16,170,000	3,850,000	79,077,000	145,297,000
103	44020 I'nterotomy, small bowel other than duodenum: for exploration, biopsy, or foreign body removal (separate procedure)	75	27	4	28,975,000	10,395,000	3,850,000	56,745,000	99,865,000
104	44120 Enterectomy: with anastomosis	95	34	6	36,575,000	13,090,000	3,850,000	77,985,000	131,500,000
105	44146 Colectomy, partial: with coloproctostomy (low pelvic anastomosis), with or without colostomy	130	46	5	50,050,000	17,710,000	3,850,000	84,252,000	155,862,000
106	44150 Colectomy, total, abdominal, without proctectomy: with continent ileostomy or ileoproctostomy	135	44	6	51,975,000	16,940,000	3,850,000	90,367,000	163,132,000
107	44153 Colectomy, total or subtotal, with proctectomy: with rectal mucosectomy, ileoanal or coloanal anastomosis, creation of reservoir (S or J), with or without loop ileostomy or colostomy	180	63	10	69,300,000	24,255,000	3,850,000	130,537,000	227,942,000
108	44345 Reconstruction of colostomy (separate procedure)	70	25	5	26,950,000	9,625,000	3,850,000	62,304,000	102,729,000
109	44388 Fiberoptic colonoscopy through colostomy: diagnostic or therapeutic (separate procedure)	15	0	1	5,775,000	0	0	6,933,000	12,708,000
110	44625 Closure of enterostomy, large or small intestine: with or without resection and	80	28	5	30,800,000	10,780,000	3,850,000	66,856,000	112,286,000
111	44950 Appendectomy, any method (non-incidental procedure)	60	21	3	23,100,000	8,085,000	3,850,000	39,688,000	74,723,000
112	45000 Transrectal drainage of pelvic abscess (separate procedure)	25	14	1	9,625,000	5,390,000	3,850,000	14,206,000	33,071,000
113	45020 Incision and drainage of deep suprapubic, pelvic, or retrorectal abscess	25	14	1	9,625,000	5,390,000	3,850,000	14,206,000	33,071,000
114	45110 Proctectomy: complete, combined abdominoperineal, with colostomy, one or two stages	150	53	7	57,750,000	20,405,000	3,850,000	101,494,000	183,499,000
115	45505 Proctoplasty: for prolapse of rectosigmoid membrane or stenosis	50	18	1	19,250,000	6,930,000	3,850,000	20,676,000	50,706,000


 مركز الشموال الإسكندرية
 RG: 12739

CODE	OPERATION	K	ARE	Los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
116	Dilation of anal or rectal sphincter (separate procedure) under anesthesia	15	12	1	5,775,000	4,620,000	3,850,000	10,864,000	25,109,000
117	Incision and drainage of ischioanal, perirectal or perianal abscess (separate procedure)	35	16	1	13,475,000	6,160,000	3,850,000	14,370,000	37,855,000
118	Incision and drainage of ischioanal or intramural abscess, with fistulectomy, submuscular	40	16	1	15,400,000	6,160,000	3,850,000	18,318,000	43,728,000
119	Sphincterotomy, anal (separate procedure)	30	15	1	11,550,000	5,775,000	3,850,000	12,388,000	33,563,000
120	Fissurectomy, with or without sphincterotomy	35	16	1	13,475,000	6,160,000	3,850,000	15,681,000	39,166,000
121	Hemorrhoidectomy, internal and external: with fistulectomy and/or fissurectomy	50	18	2	19,250,000	6,930,000	3,850,000	29,985,000	60,015,000
122	Surgical treatment of anal fistula: fistulotomy / fistulectomy (separate procedure)	45	17	1	17,325,000	6,545,000	3,850,000	20,988,000	48,708,000
123	Sphincteroplasty, anal, for incontinence or prolapse	65	22	3	25,025,000	8,470,000	3,850,000	39,147,000	76,492,000
124	Sphincteroplasty, anal, for incontinence: muscle transplant	150	50	10	57,750,000	19,250,000	3,850,000	112,519,000	193,369,000
125	Cryosurgery of rectal tumor: benign (separate procedure)	20	13	1	7,700,000	5,005,000	3,850,000	14,910,000	31,465,000
126	Cryosurgery of rectal tumor: malignant (separate procedure)	30	15	1	11,550,000	5,775,000	3,850,000	13,894,000	35,069,000
127	Curettage or cauterization of anal fissure, including dilation of anal sphincter (separate procedure)	20	13	1	7,700,000	5,005,000	3,850,000	12,093,000	28,648,000
128	Ligation of internal hemorrhoids (separate procedure)	20	13	1	7,700,000	5,005,000	3,850,000	12,978,000	29,533,000
129	Biopsy of liver, percutaneous needle (separate procedure)	15	0	1	5,775,000	0	3,850,000	14,271,000	23,896,000
130	Hepatotomy for drainage of abscess or cyst, one or two stages	65	23	5	25,025,000	8,855,000	3,850,000	60,910,000	98,640,000
131	Hepatectomy: total right lobectomy	200	80	6	77,000,000	30,800,000	3,850,000	99,852,000	211,502,000
132	Cholecystectomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystectomy: with or without transduodenal sphincterotomy or sphincteroplasty	110	39	7	42,350,000	15,015,000	3,850,000	105,885,000	167,100,000
133	Cholecystectomy or cholecystostomy with exploration, drainage, or removal of calculus (separate procedure)	55	20	3	21,175,000	7,700,000	3,850,000	47,206,000	79,931,000
134	Cholecystectomy: with or without cholangiography, any method	80	28	3	30,800,000	10,780,000	3,850,000	49,167,000	94,597,000
135	Cholecystectomy: with exploration of common duct	110	39	7	42,350,000	15,015,000	3,850,000	91,945,000	153,160,000
136	Biopsy of pancreas (separate procedure)	70	25	3	26,950,000	9,625,000	3,850,000	43,291,000	83,716,000
137	Pancreatotomy, distal subtotal, with or without splenectomy: with or without pancreaticojejunostomy	130	46	7	50,050,000	17,710,000	3,850,000	105,622,000	177,232,000
138	Pancreatocoejunostomy, side-to-side anastomosis (Puestow type operation)	120	42	7	46,200,000	16,170,000	3,850,000	118,662,000	184,882,000
139	Exploratory laparotomy, exploratory celiotomy, with or without biopsy (separate)	80	28	5	30,800,000	10,780,000	3,850,000	63,057,000	108,487,000
140	Reopening of recent laparotomy (separate procedure)	70	25	4	26,950,000	9,625,000	3,850,000	47,589,000	88,014,000
141	Drainage of peritoneal abscess or localized peritonitis, transabdominal (separate procedure)	70	25	7	26,950,000	9,625,000	3,850,000	86,262,000	126,687,000
142	Biopsy, abdominal or retroperitoneal mass, percutaneous needle	15	0	1	5,775,000	0	0	13,158,000	18,933,000
143	Repair initial inguinal hernia, under age 5 years, with or without hydrocelectomy	55	20	1	21,175,000	7,700,000	3,850,000	21,211,000	53,936,000
144	Repair inguinal hernia, age 5 years or over, initial, recurrent, or sliding, with or without prosthesis, with or without hydrocelectomy	70	24	1	26,950,000	9,240,000	3,850,000	25,416,000	65,456,000
145	Repair femoral, umbilical, or lumbar hernia, any age, initial	55	18	1	21,175,000	6,930,000	3,850,000	21,430,000	53,385,000
146	Repair femoral, umbilical, or lumbar hernia, any age, recurrent, with or without prosthesis	70	24	1	26,950,000	9,240,000	3,850,000	26,965,000	67,005,000
147	Repair incisional (abdominal) hernia, reducible, with or without prosthesis: initial separate	70	24	1	26,950,000	9,240,000	3,850,000	30,820,000	70,860,000

CODE	OPERATION	K	ARE	Los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
148 45378	Colonoscopy, fiberoptic, beyond splenic flexure: diagnostic	40	16	1	15,400,000	6,160,000	0	9,309,000	30,869,000
149 43235	Upper gastrointestinal endoscopy (esophagus, stomach, and either the duodenum and/or jejunum as appropriate): diagnostic (separate procedure)	25	0	1	9,625,000	0	0	7,342,000	16,967,000

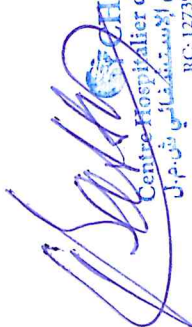

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 مركز الشمال للمستشفيات
 RC: 12739

CODE	OPERATION	K	ARE	Los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
FEMALE GENITAL SYSTEM									
150	Biopsy of vulva or perineum (separate procedure)	10	0	1	3,850,000	0	3,850,000	9,439,000	17,139,000
151	Colpotomy: with exploration or drainage of pelvic abscess	20	12	3	7,700,000	4,620,000	3,850,000	22,357,000	38,527,000
152	Vaginectomy, complete removal of vagina	45	17	1	17,325,000	6,545,000	3,850,000	30,783,000	58,503,000
153	Excision of vaginal cyst or tumor	20	12	1	7,700,000	4,620,000	3,850,000	14,026,000	30,196,000
154	Colporrhaphy: suture of injury of vagina (non obstetrical)	30	14	1	11,550,000	5,390,000	3,850,000	16,909,000	37,699,000
155	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele (separate procedure)	40	16	1	15,400,000	6,160,000	3,850,000	17,892,000	43,302,000
156	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	15,516,000	38,616,000
157	Combined anteroposterior colporrhaphy: with or without enterocele repair (separate procedure)	55	19	1	21,175,000	7,315,000	3,850,000	26,851,000	59,191,000
158	Colpopexy, abdominal approach	55	19	1	21,175,000	7,315,000	3,850,000	24,297,000	56,637,000
159	Sacrospinous ligament fixation for prolapse of vagina following hysterectomy (separate procedure)	55	19	1	21,175,000	7,315,000	3,850,000	24,297,000	56,637,000
160	Closure of urethrovaginal fistula: any method	50	18	2	19,250,000	6,930,000	3,850,000	26,905,000	56,935,000
161	Colposcopy (vaginocopy): (separate procedure)	10	0	1	3,850,000	0	0	9,309,000	13,159,000
162	Colposcopy: with biopsies, or biopsy of the cervix (separate procedure)	10	0	1	3,850,000	0	0	10,848,000	14,698,000
163	Colposcopy: with loop electrosurgical excision(s) of the cervix (LEEP) (separate procedure)	20	12	1	7,700,000	4,620,000	3,850,000	14,059,000	30,229,000
164	Cervix, biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)	10	0	1	3,850,000	0	0	10,029,000	13,879,000
165	Endocervical curettage (not done as part of a dilation and curettage) (separate procedure)	10	0	1	3,850,000	0	3,850,000	10,422,000	18,122,000
166	Cauterization of cervix: electro, thermal, cryo, or laser ablation (separate procedure)	15	0	1	5,775,000	0	0	10,570,000	16,345,000
167	Cerclage of uterine cervix, non obstetrical	25	13	1	9,625,000	5,005,000	3,850,000	15,435,000	33,915,000
168	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(ies)	90	30	6	34,650,000	11,550,000	3,850,000	79,278,000	129,328,000
169	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(ies)	130	43	6	50,050,000	16,555,000	3,850,000	121,102,000	191,557,000
170	Pelvic exenteration for gynecologic malignancy (total abdominal hysterectomy, removal of bladder, ureteral transplantations and/or abdominopelvic resection of rectum and colon and colostomy)	210	73	10	80,850,000	28,105,000	3,850,000	158,088,000	270,893,000
171	Vaginal hysterectomy: with colpo-urethrocytostomy (Marshall-Marchetti-Krantz or Pexeyra type, with/without endoscopic control)	100	33	6	38,500,000	12,705,000	3,850,000	76,821,000	131,876,000
172	Vaginal hysterectomy, with total or partial colpocystomy	110	36	6	42,350,000	13,860,000	3,850,000	81,571,000	141,631,000
173	Hysterorrhaphy, repair or ruptured uterus (non obstetrical)	55	19	4	21,175,000	7,315,000	3,850,000	50,422,000	82,762,000
174	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	40	16	1	15,400,000	6,160,000	3,850,000	20,709,000	46,119,000
175	Drainage of ovarian cyst(s), unilateral or bilateral: vaginal approach	25	13	1	9,625,000	5,005,000	3,850,000	16,401,000	34,881,000

CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
176	58805 Drainage of ovarian cyst(s), unilateral or bilateral: abdominal approach	40	16	1	15,400,000	6,160,000	3,850,000	23,428,000	48,838,000
177	58900 Biopsy of ovary, unilateral or bilateral	45	18	1	17,325,000	6,930,000	3,850,000	19,840,000	47,945,000
178	59300 Episiotomy or vaginal repair only, by other than attending physician	15	12	1	5,775,000	4,620,000	3,850,000	9,783,000	24,028,000
179	59320 Cerclage of cervix, during pregnancy: vaginal	20	12	1	7,700,000	4,620,000	3,850,000	12,192,000	28,362,000
180	59325 Cerclage of cervix, during pregnancy: abdominal	40	16	1	15,400,000	6,160,000	3,850,000	21,855,000	47,265,000
181	59100 Hysterectomy, abdominal (eg, for removal of hydatiform mole, abortion)	60	20	4	23,100,000	7,700,000	3,850,000	50,701,000	85,351,000
182	59151 Laparoscopic treatment of ectopic pregnancy: with or without salpingectomy and/or oophorectomy	60	20	1	23,100,000	7,700,000	3,850,000	30,177,000	64,827,000
183	59350 Hysterorrhaphy of ruptured uterus	45	17	4	17,325,000	6,545,000	3,850,000	49,308,000	77,028,000
184	59410 Vaginal delivery only (with or without episiotomy and/or forceps) including postpartum care	60	0	1	23,100,000	0	3,850,000	19,846,000	46,796,000
185	59515 Cesarean delivery including postpartum care, with or without hysterectomy	80	26	4	30,800,000	10,010,000	3,850,000	57,438,000	102,098,000
186	59840 Induced abortion, by dilation and curettage	20	12	1	7,700,000	4,620,000	3,850,000	12,912,000	29,082,000
MALE GENITAL SYSTEM									
187	54150 Circumcision, using clamp or other device: newborn	10	0	1	3,850,000	0	0	10,618,000	14,468,000
188	54161 Circumcision, surgical excision other than clamp, device, or dorsal slit: except newborn	25	13	1	9,625,000	5,005,000	3,850,000	15,255,000	33,735,000
189	54322 One stage distal hypospadias repair (with or without chordee or circumcision): with simple meatal advancement (eg, Magpi, V-flap) or with urethroplasty by local skin flaps	80	26	1	30,800,000	10,010,000	3,850,000	26,572,000	71,232,000
190	54500 Biopsy of testis: needle (separate procedure)	10	0	1	3,850,000	0	3,850,000	10,455,000	18,155,000
191	54520 Orchiectomy: simple (including subcapsular), with or without testicular prosthesis, scrotal or	40	16	1	15,400,000	6,160,000	3,850,000	19,857,000	45,267,000
192	54530 Orchiectomy, radical, for tumor: any approach	60	20	3	23,100,000	7,700,000	3,850,000	42,997,000	77,647,000
193	54640 Orchiopexy, any type, with or without hernia repair	60	20	1	23,100,000	7,700,000	3,850,000	22,314,000	56,964,000
194	54700 Incision and drainage of epididymis, testis, and/or scrotal space (eg, abscess or hematoma)	25	13	1	9,625,000	5,005,000	3,850,000	13,551,000	32,031,000
195	55040 Excision of hydrocele: unilateral	35	15	1	13,475,000	5,775,000	3,850,000	18,301,000	41,401,000
196	55700 Biopsy, prostate: needle or punch, single or multiple, any approach	15	0	1	5,775,000	0	3,850,000	13,894,000	23,519,000
197	55705 Biopsy, prostate: incisional, any approach	30	14	1	11,550,000	5,390,000	3,850,000	17,302,000	38,092,000
198	55720 Prostatotomy, external drainage of prostatic abscess, any approach	40	16	1	15,400,000	6,160,000	3,850,000	20,185,000	45,595,000
199	55801 Prostatectomy, perineal, subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy)	90	30	6	34,650,000	11,550,000	3,850,000	83,209,000	133,259,000
INTEGUMENTARY SYSTEM									
200	11770 Excision of pilonidal cyst or sinus	40	15	1	15,400,000	5,775,000	3,850,000	19,890,000	44,915,000
201	19020 Mastotomy with exploration and drainage of abscess, deep	20	12	1	7,700,000	4,620,000	3,850,000	11,077,000	27,247,000
202	19100 Biopsy of breast: needle aspiration (separate procedure)	10	0	1	3,850,000	0	0	11,896,000	15,746,000
203	19140 Mastectomy for gynecomastia	40	15	1	15,400,000	5,775,000	3,850,000	20,217,000	45,242,000
204	19160 Mastectomy, partial, for excision of cyst or tumor	40	15	1	15,400,000	5,775,000	3,850,000	22,216,000	47,241,000
205	19162 Mastectomy, partial: with axillary lymphadenectomy	100	33	1	38,500,000	12,705,000	3,850,000	47,998,000	103,053,000
206	19180 Mastectomy, simple, complete	60	20	1	23,100,000	7,700,000	3,850,000	28,932,000	63,582,000
207	19200 Mastectomy, radical, including pectoral muscles, axillary lymph nodes	100	33	5	38,500,000	12,705,000	3,850,000	80,746,000	135,801,000

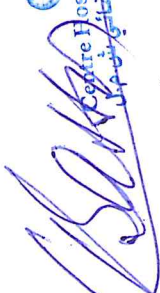
CODE	OPERATION	K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
MUSCULOSKELETAL SYSTEM									
208	Bone graft, any donor area	35	14	1	13,475,000	5,390,000	3,850,000	19,350,000	42,065,000
209	Fascia lata graft	35	14	1	13,475,000	5,390,000	3,850,000	16,926,000	39,641,000
210	Reconstruction of mandible or maxilla, subperiosteal implant	75	27	2	28,875,000	10,395,000	3,850,000	34,719,000	77,839,000
211	Closed treatment, nasal bone or septum fracture: with or without stabilization	20	12	1	7,700,000	4,620,000	3,850,000	18,448,000	34,618,000
212	Open treatment of nasoethmoid fracture: with or without external fixation	50	18	1	19,250,000	6,930,000	3,850,000	20,938,000	50,968,000
213	Open treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)	35	16	2	13,475,000	6,160,000	3,850,000	40,977,000	64,462,000
214	Open treatment of closed or open mandibular fracture: with or without interdental fixation	60	21	2	23,100,000	8,085,000	3,850,000	35,490,000	70,525,000
215	Open treatment of mandibular condylar fracture	65	22	2	25,025,000	8,470,000	3,850,000	37,864,000	75,209,000
216	Open treatment of complicated mandibular fracture by multiple surgical approaches, including internal fixation, interdental fixation, and/or wiring of dentures or splints	100	35	3	38,500,000	13,475,000	3,850,000	49,974,000	105,799,000
217	Open treatment of rib fracture: without fixation, each	15	12	1	5,775,000	4,620,000	3,850,000	11,847,000	26,092,000
218	Treatment of rib fracture: requiring external fixation ("flail chest")	35	15	1	13,475,000	5,775,000	3,850,000	16,761,000	39,861,000
219	Closed treatment of vertebral body fracture and/or dislocation, with or without anesthesia, by manipulation or traction, each	50	18	2	19,250,000	6,930,000	3,850,000	29,265,000	59,295,000
220	Spine manipulation requiring anesthesia, any region	15	12	2	5,775,000	4,620,000	3,850,000	20,698,000	34,943,000
221	Arthrodesis, anterior interbody technique: cervical below C2, with bone graft (separate procedure)	120	40	8	46,200,000	15,400,000	3,850,000	105,105,000	170,555,000
222	Arthrodesis, anterior interbody technique: lumbar, with bone graft (separate procedure)	150	50	8	57,750,000	19,250,000	3,850,000	127,578,000	208,428,000
223	Arthrodesis, anterior or anterolateral, each additional interspace (list separately in addition to single level arthrodesis)	40	16	8	15,400,000	6,160,000	3,850,000	98,913,000	124,323,000
224	Arthrodesis, posterior or posterolateral technique, with local bone or bone allograft and/or internal fixation: thoracic or lumbar (separate procedure)	135	45	8	51,975,000	17,325,000	3,850,000	102,073,000	175,223,000
225	Capsulorrhaphy for recurrent dislocation of shoulder, anterior or posterior, any type	85	28	3	32,725,000	10,780,000	3,850,000	57,820,000	105,175,000
226	Closed treatment of clavicular fracture: with manipulation	20	12	1	7,700,000	4,620,000	3,850,000	12,585,000	28,755,000
227	Open treatment of clavicular fracture, with or without internal or external skeletal fixation	50	18	1	19,250,000	6,930,000	3,850,000	22,642,000	52,672,000
228	Closed treatment of scapular fracture: with manipulation, with or without skeletal traction (with or without shoulder joint involvement)	20	12	1	7,700,000	4,620,000	3,850,000	12,912,000	29,082,000
229	Closed treatment of proximal humeral (surgical or anatomical neck) fracture: with manipulation, with or without skeletal traction	20	12	1	7,700,000	4,620,000	3,850,000	15,925,000	32,095,000
230	Open treatment of acute shoulder dislocation	40	16	1	15,400,000	6,160,000	3,850,000	57,204,000	82,614,000
231	Closed treatment of shoulder dislocation, with fracture of greater tuberosity, with manipulation	20	12	1	7,700,000	4,620,000	3,850,000	13,830,000	30,000,000
232	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)	20	12	1	7,700,000	4,620,000	3,850,000	13,830,000	30,000,000
233	Arthroplasty, elbow: for synovectomy	50	18	1	19,250,000	6,930,000	3,850,000	21,265,000	51,295,000

CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
234	24505 Closed treatment of humeral shaft fracture: with manipulation, with or without skeletal traction	35	15	1	13,475,000	5,775,000	3,850,000	20,266,000	43,366,000
235	24516 Open treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage and/or locking screws	75	25	4	28,875,000	9,625,000	3,850,000	71,847,000	114,197,000


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 RC: 12739

CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
236	Treatment of closed elbow dislocation	35	15	1	13,475,000	5,775,000	3,850,000	20,233,000	43,333,000
237	Open treatment of acute or chronic elbow dislocation	50	18	1	19,250,000	6,930,000	3,850,000	21,265,000	51,295,000
238	Closed treatment of radial head or neck fracture: with manipulation	35	15	1	13,475,000	5,775,000	3,850,000	16,483,000	39,583,000
239	Closed treatment of ulnar fracture, proximal end (olecranon process): with manipulation	35	15	1	13,475,000	5,775,000	3,850,000	16,483,000	39,583,000
240	Arthrotomy, wrist joint: for synovectomy	45	15	1	17,325,000	5,775,000	3,850,000	21,381,000	48,331,000
241	Closed treatment of radial shaft fracture: with manipulation	30	14	1	11,550,000	5,390,000	3,850,000	16,417,000	37,207,000
242	Open treatment of radial shaft fracture: with/without internal or external fixation	60	20	1	23,100,000	7,700,000	3,850,000	35,746,000	70,396,000
243	Closed treatment of ulnar shaft fracture: with manipulation	25	13	1	9,625,000	5,005,000	3,850,000	16,401,000	34,881,000
244	Open treatment of ulnar shaft fracture: with/without internal or external fixation	60	20	1	23,100,000	7,700,000	3,850,000	74,730,000	109,380,000
245	Closed treatment of radial and ulnar shaft fractures: with manipulation	35	15	1	13,475,000	5,775,000	3,850,000	16,827,000	39,927,000
246	Open treatment of radial and ulnar shaft fractures, with internal or external fixation of	35	15	1	13,475,000	5,775,000	3,850,000	22,200,000	45,300,000
247	Open treatment of radial and ulnar shaft fractures, with internal or external fixation: of radius and ulna	70	23	3	26,950,000	8,855,000	3,850,000	50,236,000	89,891,000
248	Open treatment of distal radial fracture, or epiphyseal separation, with or without fracture of ulnar styloid, with or without internal or external fixation	60	20	3	23,100,000	7,700,000	3,850,000	38,902,000	73,552,000
249	Open treatment of radiocarpal or intercarpal dislocation, one or more bones	45	15	1	17,325,000	5,775,000	3,850,000	21,414,000	48,364,000
250	Closed treatment of distal radioulnar dislocation with manipulation	25	13	1	9,625,000	5,005,000	3,850,000	13,387,000	31,867,000
251	Arthrodesis, wrist joint (including radiocarpal and/or ulnocarpal fusion): without bone graft (separate procedure)	70	23	1	26,950,000	8,855,000	3,850,000	24,444,000	64,099,000
252	Drainage of palmar bursa	30	14	1	11,550,000	5,390,000	3,850,000	15,697,000	36,487,000
253	Fasciotomy, palmar, for Dupuytren's contracture: closed (subcutaneous)	35	15	1	13,475,000	5,775,000	3,850,000	19,120,000	42,220,000
254	Arthrotomy for synovial biopsy: carpometacarpal or metacarpophalangeal or interphalangeal joint	25	12	1	9,625,000	4,620,000	3,850,000	20,856,000	38,951,000
255	Correction claw finger, other methods	60	20	1	23,100,000	7,700,000	3,850,000	23,068,000	57,718,000
256	Closed treatment of metacarpal fracture, single: with manipulation, each bone	25	0	1	9,625,000	0	3,850,000	13,650,000	27,125,000
257	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone	40	13	1	15,400,000	5,005,000	3,850,000	17,662,000	41,917,000
258	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each	40	13	1	15,400,000	5,005,000	3,850,000	21,823,000	46,078,000
259	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single	30	12	1	11,550,000	4,620,000	3,850,000	18,186,000	38,206,000
260	Partial hip replacement, prosthesis (eg. femoral stem prosthesis, bipolar arthroplasty)	105	35	6	40,425,000	13,475,000	3,850,000	89,298,000	147,048,000
261	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip replacement), with or without autograft or allograft	150	50	6	57,750,000	19,250,000	3,850,000	109,663,000	190,513,000
262	Percutaneous skeletal fixation of femoral fracture, proximal end, neck, undisplaced, mildly displaced or impacted fracture	70	23	1	26,950,000	8,855,000	3,850,000	30,930,000	70,585,000
263	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement (direct fracture exposure)	95	32	6	36,575,000	12,320,000	3,850,000	117,460,000	170,205,000

CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
264 27240	Closed treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture, with manipulation: with or without skin or skeletal traction	50	16	3	19,250,000	6,160,000	3,850,000	34,086,000	63,346,000



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CODE	OPERATION	K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
265	27244 Open treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture: with plate/screw type implant, with or without cerclage	100	33	6	38,500,000	12,705,000	3,850,000	104,896,000	159,951,000
266	27245 Open treatment of intertrochanteric, pertrochanteric or subtrochanteric femoral fracture: with intramedullary implant, with or without interlocking screws and/or cerclage	100	33	1	38,500,000	12,705,000	3,850,000	46,228,000	101,283,000
267	27250 Closed treatment of hip dislocation, traumatic	30	12	3	11,550,000	4,620,000	3,850,000	29,172,000	49,192,000
268	27253 Open treatment of hip dislocation, traumatic, without internal fixation	70	23	1	26,950,000	8,855,000	3,850,000	26,344,000	65,999,000
269	27332 Arthroscopy, knee, for meniscectomy: medial OR lateral	55	18	1	21,175,000	6,930,000	3,850,000	22,167,000	54,122,000
270	27333 Arthroscopy, knee, for meniscectomy: medial AND lateral	60	20	1	23,100,000	7,700,000	3,850,000	23,395,000	58,045,000
271	27335 Arthroscopy, knee, for synovectomy: anterior AND/OR posterior including popliteal area	55	18	1	21,175,000	6,930,000	3,850,000	22,167,000	54,122,000
272	27350 Patellectomy or hemipatellectomy	55	18	1	21,175,000	6,930,000	3,850,000	24,951,000	56,906,000
273	27372 Removal of foreign body, deep, thigh region or knee area	35	12	1	13,475,000	4,620,000	3,850,000	16,893,000	38,838,000
274	27400 Tendon or muscle transfer, hamstrings to femur (Eggers type procedure)	55	18	1	21,175,000	6,930,000	3,850,000	22,167,000	54,122,000
275	27403 Arthroscopy with open meniscus repair	60	20	1	23,100,000	7,700,000	3,850,000	23,952,000	58,602,000
276	27405 Repair, primary, torn ligament and/or capsule, knee: collateral or cruciate	55	18	1	21,175,000	6,930,000	3,850,000	21,577,000	53,532,000
277	27409 Repair, primary, torn ligament and/or capsule, knee: collateral and cruciate	95	31	1	36,575,000	11,935,000	3,850,000	43,428,000	95,788,000
278	27418 Anterior tibial tubercle plasty for chondromalacia patellae (Maquet procedure)	60	20	1	23,100,000	7,700,000	3,850,000	22,806,000	57,456,000
279	27424 Reconstruction for recurrent dislocating patella: with patellectomy	55	18	1	21,175,000	6,930,000	3,850,000	31,798,000	63,753,000
280	27427 Ligamentous reconstruction (augmentation), knee: extra-articular	55	18	1	21,175,000	6,930,000	3,850,000	29,734,000	61,689,000
281	27428 Ligamentous reconstruction (augmentation), knee: intra-articular (open)	75	25	1	28,875,000	9,625,000	3,850,000	30,520,000	72,870,000
282	27435 Capsulotomy, knee, posterior capsular release	55	18	1	21,175,000	6,930,000	3,850,000	26,982,000	58,937,000
283	27438 Arthroplasty, patella: with prosthesis	60	20	1	23,100,000	7,700,000	3,850,000	29,358,000	64,008,000
284	27440 Arthroplasty, knee, tibial plateau	55	18	1	21,175,000	6,930,000	3,850,000	23,215,000	55,170,000
285	27443 Arthroplasty, knee, femoral condyles or tibial plateaus: with or without debridement and partial synovectomy	60	20	3	23,100,000	7,700,000	3,850,000	48,958,000	83,608,000
286	27446 Arthroplasty, knee condyle and plateau: medial OR lateral compartment	95	31	6	36,575,000	11,935,000	3,850,000	105,339,000	157,699,000
287	27447 Arthroplasty, knee condyle and plateau: medial AND lateral compartments with or without patella resurfacing ("total knee replacement")	140	46	6	53,900,000	17,710,000	3,850,000	115,723,000	191,183,000
288	27448 Osteotomy, femur, shaft or supracondylar: without fixation	60	20	1	23,100,000	7,700,000	3,850,000	23,854,000	58,504,000
289	27450 Osteotomy, femur, shaft or supracondylar: with fixation	105	35	1	40,425,000	13,475,000	3,850,000	37,236,000	94,986,000
290	27455 Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus or genu valgus): before or after epiphyseal closure	95	31	1	36,575,000	11,935,000	3,850,000	32,487,000	84,847,000
291	27486 Revision of total knee arthroplasty, with or without allograft: one component	120	40	6	46,200,000	15,400,000	3,850,000	99,426,000	164,876,000
292	27487 Revision of total knee arthroplasty, with or without allograft: all components	160	53	6	61,600,000	20,405,000	3,850,000	94,315,000	180,170,000
293	27488 Removal of knee prosthesis, including "total knee", methyl methacrylate and insertion of spacer, when applicable	95	31	6	36,575,000	11,935,000	3,850,000	99,049,000	151,409,000
294	27502 Closed treatment of femoral shaft fracture: with manipulation, with or without skin or skeletal fixation	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000


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CODE	OPERATION	K	ARE	Los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
295	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension: with manipulation, with or without skin or skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
296	Closed treatment of femoral fracture, distal end, medial or lateral condyle: with manipulation	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
297	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with internal fixation	85	28	5	32,725,000	10,780,000	3,850,000	66,873,000	114,228,000
298	Open treatment of femoral fracture, distal end, medial or lateral condyle, with or without internal or external fixation	95	31	6	36,575,000	11,935,000	3,850,000	102,555,000	154,915,000
299	Closed treatment of distal femoral epiphyseal separation: with manipulation, with or without skin or skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
300	Open treatment of distal femoral epiphyseal separation, with or without internal or	90	30	3	34,650,000	11,550,000	3,850,000	50,793,000	100,843,000
301	Closed treatment of tibial fracture, proximal (plateau): with or without manipulation, with skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
302	Closed treatment of knee dislocation	35	12	3	13,475,000	4,620,000	3,850,000	30,400,000	52,345,000
303	Open treatment of knee dislocation with or without internal or external fixation: with primary ligamentous repair, with or without augmentation/reconstruction	100	33	5	38,500,000	12,705,000	3,850,000	89,821,000	144,876,000
304	Closed treatment of patellar dislocation	35	12	3	13,475,000	4,620,000	3,850,000	30,400,000	52,345,000
305	Open treatment of patellar dislocation, with or without partial or total patellectomy	60	20	5	23,100,000	7,700,000	3,850,000	78,847,000	113,497,000
306	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)	15	0	1	5,775,000	0	3,850,000	12,208,000	21,833,000
307	Arthroscopy, ankle, for synovectomy	40	13	1	15,400,000	5,005,000	3,850,000	20,349,000	44,604,000
308	Arthroscopy, ankle, for synovectomy: including tenosynovectomy	60	20	1	23,100,000	7,700,000	3,850,000	24,934,000	59,584,000
309	Repair, primary, open or percutaneous, ruptured Achilles tendon: with or without graft	60	20	1	23,100,000	7,700,000	3,850,000	27,982,000	62,632,000
310	Arthroplasty, ankle	75	25	1	28,875,000	9,625,000	3,850,000	28,162,000	70,512,000
311	Osteotomy: tibia or tibia and fibula	80	26	1	30,800,000	10,010,000	3,850,000	34,959,000	79,619,000
312	Closed treatment of tibial shaft fracture (with or without fibular fracture): with	40	13	4	15,400,000	5,005,000	3,850,000	41,134,000	65,389,000
313	Open treatment of tibial shaft fracture (with or without fibular fracture), with plate/screws, with or without cerclage	75	25	5	28,875,000	9,625,000	3,850,000	86,725,000	129,075,000
314	Closed treatment of proximal or distal fibula or shaft fracture: with manipulation	25	0	4	9,625,000	0	3,850,000	37,449,000	50,924,000
315	Open treatment of proximal or distal fibula or shaft fracture, with or without internal or external fixation	40	13	6	15,400,000	5,005,000	3,850,000	76,986,000	101,241,000
316	Closed treatment of proximal tibiofibular joint dislocation	25	0	4	9,625,000	0	3,850,000	37,449,000	50,924,000
317	Closed treatment of ankle dislocation, with percutaneous skeletal fixation	40	13	4	15,400,000	5,005,000	3,850,000	41,134,000	65,389,000
318	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation: without repair or internal fixation	60	20	6	23,100,000	7,700,000	3,850,000	66,763,000	101,413,000
319	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation: with repair or internal or external fixation	75	25	3	28,875,000	9,625,000	3,850,000	44,553,000	86,903,000
320	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)	15	0	3	5,775,000	0	3,850,000	26,632,000	36,257,000

CODE	OPERATION	K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B	T Total
321	27870 Arthrodesis, ankle, any method (separate procedure)	90	30	6	34,650,000	11,550,000	3,850,000	77,575,000	127,625,000
322	27871 Arthrodesis, tibiofibular joint, proximal or distal (separate procedure)	60	20	6	23,100,000	7,700,000	3,850,000	81,571,000	116,221,000


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CODE	OPERATION	K	ARE	LOS	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
323	28020 Arthroscopy, with exploration, drainage or removal of loose or foreign body: intertarsal or tarsometatarsal joint or metatarsophalangeal joint or interphalangeal joint	35	12	1	13,475,000	4,620,000	3,850,000	17,646,000	39,591,000
324	28054 Arthroscopy for synovial biopsy: interphalangeal joint or metatarsophalangeal or intertarsal or tarsometatarsal	25	12	1	9,625,000	4,620,000	3,850,000	15,189,000	33,284,000
325	28070 Synovectomy, intertarsal, tarsometatarsal or metatarsophalangeal joint, each	35	12	1	13,475,000	4,620,000	3,850,000	17,646,000	39,591,000
326	28086 Synovectomy, tendon sheath, foot: flexor or extensor	25	12	1	9,625,000	4,620,000	3,850,000	15,189,000	33,284,000
327	28140 Metatarsectomy	50	16	1	19,250,000	6,160,000	3,850,000	21,430,000	50,690,000
328	28160 Hemiphalangectomy or interphalangeal joint excision, toe, single, each	25	12	1	9,625,000	4,620,000	3,850,000	15,222,000	33,317,000
329	28192 Removal of foreign body, foot: deep	35	12	1	13,475,000	4,620,000	3,850,000	17,416,000	39,361,000
330	28260 Capsulotomy, midfoot: medial release only with or without tendon lengthening (separate procedure)	50	16	1	19,250,000	6,160,000	3,850,000	19,464,000	48,724,000
331	28288 Osteotomy, partial, exostectomy or condylectomy, single, metatarsal head, first through fifth, each metatarsal head	25	12	1	9,625,000	4,620,000	3,850,000	17,449,000	35,544,000
332	28296 Hallux valgus (bunion) correction: with or without metatarsal osteotomy or tendon	55	18	1	21,175,000	6,930,000	3,850,000	43,165,000	75,120,000
333	28406 Closed treatment or percutaneous skeletal fixation of calcaneal fracture: with manipulation	35	12	1	13,475,000	4,620,000	3,850,000	16,500,000	38,445,000
334	28420 Open treatment of closed or open calcaneal fracture, with or without internal or external skeletal fixation: with primary autogenous bone graft (includes obtaining graft)	85	28	1	32,725,000	10,780,000	3,850,000	32,388,000	79,743,000
335	28436 Closed treatment or percutaneous skeletal fixation of talus fracture: with manipulation	25	12	1	9,625,000	4,620,000	3,850,000	15,288,000	33,383,000
336	28445 Open treatment of talus fracture, with or without internal or external fixation	70	23	1	26,950,000	8,855,000	3,850,000	25,099,000	64,754,000
337	28476 Closed treatment or percutaneous skeletal fixation of metatarsal fracture: with	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
338	28546 Percutaneous skeletal fixation of tarsal bone dislocation other than talotarsal, with manipulation	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
339	28555 Open treatment of tarsal bone dislocation, with or without internal or external fixation	40	13	1	15,400,000	5,005,000	3,850,000	18,973,000	43,228,000
340	28600 Closed treatment of tarsometatarsal joint dislocation	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
341	28636 Closed treatment or percutaneous skeletal fixation of metatarsophalangeal joint dislocation, with manipulation	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
342	28760 Arthrodesis, great toe, interphalangeal joint, with extensor hallucis longus transfer to first metatarsal neck (Jones type procedure) (separate procedure)	50	16	6	19,250,000	6,160,000	3,850,000	66,600,000	95,860,000
343	28800 Amputation, foot: midtarsal or transmetatarsal	50	16	5	19,250,000	6,160,000	3,850,000	54,703,000	83,963,000
344	28810 Amputation, metatarsal, with toe, single	40	13	5	15,400,000	5,005,000	3,850,000	52,279,000	76,534,000
345	28820 Amputation, toe: metatarsophalangeal joint	25	12	5	9,625,000	4,620,000	3,850,000	48,594,000	66,689,000
346	29000 Application of halo type body cast	20	0	1	7,700,000	0	3,850,000	12,978,000	24,528,000
347	29040 Application of body cast, shoulder to hips: including head and/or one or both thighs	20	0	1	7,700,000	0	3,850,000	12,978,000	24,528,000
348	29305 Application of hip spica cast: one leg	15	0	1	5,775,000	0	0	10,471,000	16,246,000
349	29325 Application of hip spica cast: one and one half spica or both legs	20	0	1	7,700,000	0	3,850,000	12,978,000	24,528,000

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CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
350	29355 Application of long leg cast (thigh to toes): walking or ambulatory type	10	0	1	3,850,000	0	0	9,243,000	13,093,000
351	29800 Arthroscopy, diagnostic: any joint, with or without biopsy, limited debridement, partial synovectomy, removal of loose or foreign body, lysis and resection of adhesions or lavage and drainage (separate procedure)	40	13	1	15,400,000	5,005,000	3,850,000	23,788,000	48,043,000

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CODE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
NERVOUS SYSTEM									
352	Craniectomy: with excision of tumor or other bone lesion of skull	130	52	8	50,050,000	20,020,000	3,850,000	219,436,000	293,356,000
353	Craniotomy, trephination, bone flap craniotomy: for partial or subtotal hemispherectomy	145	58	8	55,825,000	22,330,000	3,850,000	180,829,000	262,834,000
354	Hypophysectomy or excision of pituitary tumor, transnasal or transseptal approach, non-sterotactic	160	64	8	61,600,000	24,640,000	3,850,000	162,631,000	252,721,000
355	Craniectomy for craniostomosis: single or multiple sutures, or frontal or partial bone flap, or bifrontal bone flap	135	52	8	51,975,000	20,020,000	3,850,000	221,812,000	297,657,000
356	Elevation of depressed skull fracture: simple, extradural	80	28	8	30,800,000	10,780,000	3,850,000	206,628,000	252,058,000
357	Replacement or irrigation, subarachnoid/subdural catheter	35	16	6	13,475,000	6,160,000	3,850,000	65,338,000	88,823,000
358	Ventriculocisternostomy, third ventricle: stereotactic method or any method	90	32	10	34,650,000	12,320,000	3,850,000	116,778,000	167,598,000
359	Replacement or revision of CSF shunt, obstructed valve, or distal catheter in shunt system	70	25	4	26,950,000	9,625,000	3,850,000	73,371,000	113,796,000
360	Removal of complete CSF shunt system: with replacement by similar or other shunt at same operation	110	39	10	42,350,000	15,015,000	3,850,000	126,277,000	187,492,000
361	Biopsy of spinal cord, percutaneous needle	30	0	1	11,550,000	0	3,850,000	21,036,000	36,436,000
362	Spinal puncture, diagnostic	10	0	1	3,850,000	0	3,850,000	7,342,000	15,042,000
363	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or diskectomy, one or two vertebral segments: cervical, thoracic, lumbar or sacral	110	39	5	42,350,000	15,015,000	3,850,000	104,466,000	165,681,000
364	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral) with decompression of spinal cord, cauda equina and/or nerve root(s), single vertebral segment: thoracic or	110	39	5	42,350,000	15,015,000	3,850,000	104,466,000	165,681,000
365	Diskectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophylectomy: cervical or thoracic, single	135	48	5	51,975,000	18,480,000	3,850,000	112,869,000	187,174,000
366	Percutaneous implantation of neurostimulator electrodes: epidural	45	17	1	17,325,000	6,545,000	3,850,000	17,973,000	45,693,000
367	Decompression of nerve	35	15	1	13,475,000	5,775,000	3,850,000	15,532,000	38,632,000
368	Replacement, irrigation or revision of lumbar subarachnoid shunt	50	19	4	19,250,000	7,315,000	3,850,000	81,069,000	111,484,000
369	Suture of major peripheral nerve, arm or leg: including transposition	95	32	2	36,575,000	12,320,000	3,850,000	37,372,000	90,117,000
370	Suture of brachial or lumbar plexus	135	45	3	51,975,000	17,325,000	3,850,000	55,117,000	128,267,000
EYE AND OCULAR ADNEXA									
371	Repair of laceration: cornea and/or sclera, perforating, not involving uveal tissue	50	18	1	19,250,000	6,930,000	3,850,000	22,576,000	52,606,000
372	Keratotomy: lamellar, partial (except pterygium)	40	16	1	15,400,000	6,160,000	3,850,000	19,366,000	44,776,000
373	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermo-cauterization	20	12	1	7,700,000	4,620,000	3,850,000	9,865,000	26,035,000
374	Keratoplasty: lamellar	80	26	1	30,800,000	10,010,000	3,850,000	30,439,000	75,099,000
375	Radial keratotomy	85	28	1	32,725,000	10,780,000	3,850,000	28,816,000	76,171,000
376	Trabeculoplasty by laser surgery, one or more sessions (defined treatment series)	40	16	1	15,400,000	6,160,000	3,850,000	16,614,000	42,024,000
377	Severing adhesions of anterior segment, laser technique (separate procedure)	30	15	1	11,550,000	5,775,000	3,850,000	11,896,000	33,071,000
378	Repair of scleral staphyloma: without graft	50	18	1	19,250,000	6,930,000	3,850,000	20,676,000	50,706,000
379	Repair of scleral staphyloma: with graft	75	25	1	28,875,000	9,625,000	3,850,000	26,475,000	68,825,000
380	Iridectomy, with corneoscleral or corneal section: peripheral or sector, for glaucoma	45	17	1	17,325,000	6,545,000	3,850,000	18,318,000	46,038,000
381	Iridectomy, with corneoscleral or corneal section: "optical" (separate procedure)	45	17	1	17,325,000	6,545,000	3,850,000	18,318,000	46,038,000

CODE	OPERATION	K	ARE	Ios	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
382	Repair of iris, ciliary body (as for iridodialysis)	45	17	1	17,325,000	6,545,000	3,850,000	18,318,000	46,038,000
383	Ciliary body destruction: diathermy, cyclophotocoagulation, cryotherapy or cryodiolysis	35	15	1	13,475,000	5,775,000	3,850,000	13,534,000	36,634,000
384	Iridotomy/iridectomy by laser surgery (eg, for glaucoma)	25	13	1	9,625,000	5,005,000	3,850,000	5,607,000	24,087,000
385	Iridoplasty by photocoagulation (eg, for improvement of vision, for widening of anterior chamber angle)	30	14	1	11,550,000	5,390,000	3,850,000	7,998,000	28,788,000
386	Extra- or intracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique	90	32	1	34,650,000	12,320,000	3,850,000	36,336,000	87,156,000
387	Insertion of intraocular lens prosthesis (secondary implant), not associated with concurrent cataract removal, with or without anterior vitrectomy	70	23	1	26,950,000	8,855,000	3,850,000	29,226,000	68,881,000
388	Removal of vitreous, anterior approach (open sky technique or limbal incision): partial, or subtotal removal with mechanical vitrectomy	45	18	1	17,325,000	6,930,000	3,850,000	20,185,000	48,290,000
389	Intravitreal injection of pharmacologic agent (separate procedure)	20	12	1	7,700,000	4,620,000	3,850,000	8,260,000	24,430,000
390	Strabismus surgery: any technique, any number of muscles	60	20	1	23,100,000	7,700,000	3,850,000	28,210,000	62,860,000
391	Injection of therapeutic agent into Tenon's capsule	10	0	1	3,850,000	0	0	9,243,000	13,093,000
392	Blepharotomy, drainage of abscess, eyelid	10	0	1	3,850,000	0	3,850,000	8,227,000	15,927,000
393	Severing of tarsorrhaphy	10	12	1	3,850,000	4,620,000	3,850,000	7,441,000	19,761,000
394	Repair of ectropion: suture or thermocauterization	25	13	1	9,625,000	5,005,000	3,850,000	15,352,000	33,832,000
395	Excision of lesion, conjunctiva	15	0	1	5,775,000	0	3,850,000	13,485,000	23,110,000
396	Excision of lesion, conjunctiva: with adjacent sclera	35	15	1	13,475,000	5,775,000	3,850,000	20,037,000	43,137,000
397	Subconjunctival injection	5	0	1	1,925,000	0	3,850,000	8,341,000	14,116,000
398	Conjunctivoplasty, with or without reconstruction cul-de-sac: with conjunctival graft, extensive rearrangement, or buccal mucous membrane graft (includes obtaining graft)	50	18	1	19,250,000	6,930,000	3,850,000	21,823,000	51,853,000
399	Repair of symblepharon: division of symblepharon with or without insertion of conjunctival contact lens	30	14	1	11,550,000	5,390,000	3,850,000	14,533,000	35,323,000
400	Conjunctival flap: bridge or partial	30	14	1	11,550,000	5,390,000	3,850,000	14,533,000	35,323,000
401	Conjunctival flap: total (eg, Gunderson thin flap or purse string flap)	50	18	1	19,250,000	6,930,000	3,850,000	19,366,000	49,396,000
RESPIRATORY SYSTEM									
402	Submucous resection turbinate, complete or partial	30	14	1	11,550,000	5,390,000	3,850,000	16,581,000	37,371,000
403	Submucous resection of nasal septum	40	16	1	15,400,000	6,160,000	3,850,000	16,417,000	41,827,000
404	Repair choanal atresia: intranasal	60	20	1	23,100,000	7,700,000	3,850,000	24,870,000	59,520,000
405	Cauterization and/or ablation, mucosa of turbinates (separate procedure)	15	0	1	5,775,000	0	3,850,000	11,716,000	21,341,000
406	Control nasal hemorrhage, any method (separate procedure)	15	12	1	5,775,000	4,620,000	3,850,000	15,811,000	30,056,000
407	Ligation arteries: ethmoidal or internal maxillary artery, transantral	55	19	1	21,175,000	7,315,000	3,850,000	25,509,000	57,849,000
408	Sinusotomy, maxillary (antrotomy): intranasal	20	12	1	7,700,000	4,620,000	3,850,000	13,240,000	29,410,000
409	Sinusotomy maxillary (antrotomy): radical (Caldwell-Luc), with or without removal of antrochoanal polyps	40	16	2	15,400,000	6,160,000	3,850,000	28,380,000	53,790,000
410	Pterygomaxillary fossa surgery, any approach	60	20	2	23,100,000	7,700,000	3,850,000	29,854,000	64,504,000
411	Sinusotomy, sphenoid, frontal or intranasal	40	16	1	15,400,000	6,160,000	3,850,000	17,400,000	42,810,000

CCDE	OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
MEDIASTINUM AND DIAPHRAGM									
443	39200	80	32	7	30,800,000	12,320,000	3,850,000	78,169,000	125,139,000
444	39220	100	40	7	38,500,000	15,400,000	3,850,000	92,061,000	149,811,000
445	39400	30	15	1	11,550,000	5,775,000	3,850,000	21,757,000	42,932,000
446	39501	90	36	5	34,650,000	13,860,000	3,850,000	55,390,000	107,750,000
447	50020	70	25	3	26,950,000	9,625,000	3,850,000	36,280,000	76,705,000
URINARY SYSTEM									
448	50045	80	28	4	30,800,000	10,780,000	3,850,000	49,227,000	94,657,000
449	50065	120	42	6	46,200,000	16,170,000	3,850,000	88,254,000	154,474,000
450	50200	20	0	1	7,700,000	0	3,850,000	15,762,000	27,312,000
451	50205	75	27	1	28,875,000	10,395,000	3,850,000	14,796,000	57,916,000
452	50220	100	35	6	38,500,000	13,475,000	3,850,000	84,585,000	140,410,000
453	50230	140	50	5	53,900,000	19,250,000	3,850,000	92,835,000	169,835,000
454	50234	140	50	5	53,900,000	19,250,000	3,850,000	90,837,000	167,837,000
455	50240	100	35	6	38,500,000	13,475,000	3,850,000	87,993,000	143,818,000
456	50340	100	35	6	38,500,000	13,475,000	3,850,000	87,993,000	143,818,000
457	50393	25	0	1	9,625,000	0	3,850,000	15,352,000	28,827,000
458	50590	65	0	1	25,025,000	0	3,850,000	20,037,000	48,912,000
459	50610	70	25	6	26,950,000	9,625,000	3,850,000	65,290,000	105,715,000
460	50650	95	34	6	36,575,000	13,090,000	3,850,000	85,813,000	139,328,000
461	50951	30	0	1	11,550,000	0	3,850,000	19,366,000	34,766,000
462	51020	25	13	1	9,625,000	5,005,000	3,850,000	14,190,000	32,670,000
463	51045	40	16	1	15,400,000	6,160,000	3,850,000	17,892,000	43,302,000
464	51050	40	16	1	15,400,000	6,160,000	3,850,000	23,887,000	49,297,000
465	51060	45	17	1	17,325,000	6,545,000	3,850,000	23,968,000	51,688,000
466	51530	75	27	6	28,875,000	10,395,000	3,850,000	73,038,000	116,158,000
467	51575	200	70	12	77,000,000	26,950,000	3,850,000	215,364,000	323,164,000
468	51700	5	0	1	1,925,000	0	3,850,000	5,295,000	11,070,000
469	51705	10	0	1	3,850,000	0	3,850,000	9,243,000	16,943,000
470	51785	10	0	1	3,850,000	0	3,850,000	9,243,000	16,943,000
471	51792	10	0	1	3,850,000	0	3,850,000	9,243,000	16,943,000
472	51797	10	0	1	3,850,000	0	3,850,000	6,523,000	14,223,000