

# DIGESTIVE SYSTEM SURGICAL PROCEDURES

## OESOPHAGUS

Asst

Surg

Anae

For procedures on the oesophagus, the following basic units for assistants and anaesthesiologists will apply except if a basic fee is listed.

	Asst	Surg	Anae
# S073 Cervical approach.....	6	-	7
# S074 Thoracic approach.....	10	-	13
# S075 Abdominal approach.....	7	-	8

### ENDOSCOPY

# Z515 Oesophagoscopy, with or without biopsy(ies).....		68.25	4
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#### Oesophagoscopy-gastroscopy, with or without duodenoscopy

# Z399 - elective.....	nil	92.50	4
# Z400 - for active bleeding.....	nil	125.10	4
# E696 - with dilatation of oesophagus ..... add		30.65	
# E702 - with multiple (3 or more) biopsies of specific lesion..... add		15.10	
# E690 - with removal of foreign body(ies)..... add		43.85	
# E795 - with brushing of oesophagus, stomach, and/or duodenum ..... add		46.30	
# E770 - with duodenoscopy and drainage of bile after I.V. CCK stimulation ..... add		23.10	
# E692 - with laser debulking ..... add		69.70	
# E698 - with pneumatic or balloon dilation ..... add		69.70	
# E703 - with snare polypectomy first polyp (> 1 cm) ..... add		50.50	
# E799 - each additional polyp, by snare polypectomy (> 1 cm) (to a maximum of 2) ..... add		25.25	
# E695 - laser palliation of oesophageal tumour, extensive, complete obstruction (see General Preamble GP8) ..... add		I.C	
# E797 - management of uncomplicated upper or lower gastrointestinal bleeding, by any technique (e.g. laser, injection, diathermy, banding etc.) ..... add		46.30	
# E798 - management of complicated upper gastrointestinal bleeding by any technique in haemodynamically unstable patients with active bleeding during endoscopy ..... add		69.70	
# E629 - endoscopic placement of stent in duodenum ..... add		137.05	

#### [Commentary:

E690 is payable for removal of a foreign body including a stent by oesophagoscopy-gastroscopy-duodenoscopy.]

# DIGESTIVE SYSTEM SURGICAL PROCEDURES

## OESOPHAGUS

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### REPAIR

#### Oesophageal hiatus hernia

# S091	- abdominal or transthoracic approach with fundal plication .....	750.00
# S092	- recurrent.....	709.85
# E793	- laparoscopic or laparoscopic assisted, to S091 or S092..... add 25%	
# E744	- with gastroplasty, to either S091 or S092 .....	115.80
# E847	- with reconstruction of diaphragm requiring repair with mesh or equivalent synthetic material, to S091 or S092 .....	75.00
# E742	- when S091 or S092, with or without gastroplasty, is done in conjunction with cholecystectomy, and/or vagotomy with or without drainage procedures, add E742 to S091 or S092 (with or without E744) for each additional procedure performed. For any other combination of surgical procedures with oesophageal hiatus hernia repair (with the exception of S161 and S100), see Surgical Preamble SP2..... add	217.35
# S095	Oesophageal stricture (Thal) - may include oesophageal hiatus hernia repair with or without gastroplasty .....	676.05
# S096	Ruptured oesophagus, suture and drainage .....	507.00
# S097	Oesophago-gastrostomy for bypass (as sole procedure).....	608.30
# E683	- when performed thoroscopically or by video-assisted thoracic surgery (VATS), to S095, S096, S097..... add 25%	

#### Oesophageal bypass, abdomen to neck

# S098	- with stomach .....	912.60
# S099	- with colon or jejunum .....	1264.05
# E683	- when performed thoroscopically or by video-assisted thoracic surgery (VATS), to S098 or S099 .....	add 25%

### SUTURE

# S103	Closure of H-type tracheo-oesophageal fistula by cervical or thoracic approach....	923.05
# S104	Repair of oesophageal atresia with or without tracheal fistula.....	1153.85

### DILATION OF OESOPHAGUS

#### Passive (bougie)

# Z529	- initial session.....	40.55
# Z530	- repeat session (within three months following previous dilation) .....	27.35

#### Pneumatic

# Z525	- as sole procedure .....	110.85
# Z523	- with rigid dilators guided over a string or wire .....	52.90
# Z531	Repeat dilations during the same admission .....	26.40

# DIGESTIVE SYSTEM SURGICAL PROCEDURES

## STOMACH

Asst

Surg

Anae

### ENDOSCOPY

#### Gastroscopy

# Z527	- may include biopsies, photography and removal of polyps less than or equal to 1 cm .....		82.90	4
# Z547	- with removal of foreign body .....		99.75	4
# Z528	- subsequent (within three months following previous gastroscopy).....		67.85	4
# E674	- with snare polypectomy - 1st polyp > 1 cm (maximum 1)..... add		142.40	
# E675	- with snare polypectomy each - additional polyp > 1 cm (maximum 2) ..... add		73.50	

**Note:**

E674, E675 are payable with Z527, Z547 or Z528.

### INCISION

#### Gastrotomy

# S116	- with removal of tumour or foreign body.....	6	406.85	7
# E731	- with suture of bleeding peptic ulcer .....		247.05	
# S117	Pyloromyotomy (Ramstedt's).....	6	314.80	10

#### Gastrostomy

# S118	Gastrostomy .....	6	345.85	7
# E697	- with repair of Mallory-Weiss laceration .....		142.40	
# E707	- when done with another intra-abdominal procedure.....		70.80	
# Z532	Percutaneous endoscopic gastrostomy .....	6	172.95	7
Z520	Change of gastrostomy tube.....		10.65	

### EXCISION

#### Biopsy - incisional

# Z526	- by gastrostomy.....		73.60	
# Z533	- by intubation.....		36.80	

# DIGESTIVE SYSTEM SURGICAL PROCEDURES

## INTESTINES (EXCEPT RECTUM)

		Asst	Surg	Anae
<b>ENDOSCOPY</b>				
# Z560	Duodenoscopy (not to be claimed if Z399 and/or Z400 performed on same patient within 3 months).....		92.10	4
# Z749	Subsequent procedure (within three months following previous endoscopic procedure).....		72.55	4
# E629	- endoscopic placement of stent in duodenum ..... add		137.05	
# Z584	Small bowel push enteroscopy .....		185.15	
# Z512	Endoscopy of ileostomy or colostomy, or reduction of obstructed Koch ileostomy .		36.80	4
# E747	- to cecum .....		31.40	
# Z514	- with biopsy .....		44.55	4
<b>SIGMOIDOSCOPY</b>				
# Z580	Sigmoidoscopy (using 60 cm. flexible endoscope).....	nil	57.70	5
<b>Note:</b>				
1. Z580 is <i>not eligible for payment</i> with Z491, Z492, Z493, Z494, Z495, Z496, Z497, Z498, Z499 or Z555 same patient same day.				
2. For sigmoidoscopy with rigid scope, see Z535 (Rectum).				
3. Time units and anaesthesia extra units listed on GP61 are <i>not eligible for payment</i> with anaesthesia services for Z580C.				
4. E003C is not payable for anaesthesia services rendered for Z580.				
<b>COLONOSCOPY</b>				
<b>Colonoscopy for Risk Evaluation</b>				
# Z497	Confirmatory colonoscopy - sigmoid to descending colon.....	nil	51.95	5
<b>Payment rules:</b>				
Z497 is eligible for payment for a colonoscopy rendered for a patient with a positive:				
1. faecal occult blood test(s) or faecal immunochemical test(s) (FIT);				
2. sigmoidoscopy;				
3. barium enema; or				
4. CT abdomen/pelvis or CT colonography examination(s).				
# Z499	Absence of signs or symptoms, family history associated with an increased risk of malignancy (e.g. a first degree relative or at least two second degree relatives with colorectal cancer or a premalignant lesion) – sigmoid to descending colon .....	nil	51.95	5
<b>Payment rules:</b>				
Z499 is only insured for a patient 40 years of age or older or 10 years younger than the earliest age of diagnosis of the youngest affected relative.				
# Z492	Five year follow up of normal colonoscopy (Z499), absence of intervening signs or symptoms - sigmoid to descending.....	nil	51.95	5
# Z493	Ten year follow up of normal colonoscopy (Z497, Z555), absence of intervening signs or symptoms - sigmoid to descending .....	nil	51.95	5
<b>[Commentary:</b>				
1. Z492 and Z493 are eligible for payment for a colonoscopy rendered to a patient following a prior normal colonoscopy who has remained asymptomatic.				
2. A colonoscopy is considered normal if there were either no polyps or only small (<1 cm) hyperplastic polyps present.				
3. An exception to #1 above is a patient with hyperplastic polyposis syndrome who are at increased risk for adenomas and colorectal cancer and need to be identified for more intensive follow-up evaluation. See Z494.				
4. A patient with sessile adenomas that may have only been partially removed or adenomatous polyps that are removed piecemeal should be considered for follow-up evaluation at short intervals (2–6 months) to verify complete removal. See Z491.]				
<b>Payment rules:</b>				
1. Z492 is an <i>uninsured service</i> for the same patient in the five year period following Z499.				
2. Z493 is an <i>uninsured service</i> for the same patient in the ten year period following Z497 and Z555.				

# DIGESTIVE SYSTEM SURGICAL PROCEDURES

## BILIARY TRACT

Asst

Surg

Anae

**Note:**

Unless otherwise specified, there is no additional fee payable for cholangiogram during abdominal surgery.

**ENDOSCOPY**

**Endoscopic retrograde cholangiopancreatography (ERCP)**

# Z561	- with cannulation of common bile duct and/or pancreatic duct .....	213.15	6
# Z558	- including sphincterotomy and may include removal of one or more bile duct stones .....	300.25	6
# Z760	- through gastrojejunostomy following previous Billroth II .....	251.85	6
# E702	- with multiple (3 or more) biopsies of a specific lesion..... add	15.10	
# E666	- with biliary tract manometry..... add	52.30	
# E662	- with intraductal cytology brushing or intraductal biopsy..... add	49.75	
# E668	- with cannulation of minor papilla..... add	93.80	
# E680	- with insertion of first endobiliary prosthesis and/or pancreatic stent (maximum 1)..... add	82.35	
# E681	- with insertion of each additional endobiliary prosthesis and/or pancreatic stent (maximum 3)..... add	43.60	
# E669	- with oesophagoscopy-gastroscopy and may include duodenoscopy .....	102.75	

**Note:**

E662, E666, E668, E702, E680, E681, E669 are payable with Z561, Z558 or Z760.

# Z593	Nasobiliary catheter insertion .....	55.25	
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**INCISION**

# S233	Percutaneous trans-hepatic catheter drainage of obstructed bile ducts including daily supervision and including percutaneous cholangiogram and catheterization to duodenum if achieved.....	394.25	
# S234	Replacement of catheter in above .....	64.85	

**Biliary duct calculus manipulation and/or removal via T-tube tract**

# Z562	- as sole procedure .....	116.20	7
# Z542	Intubation of bile duct for obstruction.....	85.25	