

REGULATIONS 1966, No. 9†

Commence-
ment.

1. These Regulations shall come into operation on the fourteenth day of February, 1966.

* Made under the *Canberra Community Hospital Ordinance 1938-1964* on 9 December, 1965; notified in the *Commonwealth Gazette* and commenced on 16 December, 1965.

† Made under the *Canberra Community Hospital Ordinance 1938-1964* on 25 January, 1966; notified in the *Commonwealth Gazette* on 11 February, 1966 and commenced on 14 February, 1966.

2. The Second, Third and Fourth Schedules to the Canberra Community Hospital (Charges) Regulations are repealed and the following Schedules inserted in their stead:—

“ SECOND SCHEDULE

Regulation 9.

CHARGES FOR DENTAL TREATMENT

Column 1 Item No.	Column 2 Dental Service provided	Column 3 Charge
		\$
1	Extractions, for each tooth	0.20
2	Extractions under general anaesthetic, the charge payable under item 1, plus	2.00
3	Amalgam, porcelain, cement or synthetic fillings, for each filling ..	0.50
4	Root treatment, per tooth	0.50
5	Prophylactic treatment, including scaling and cleaning	0.50
6	Full upper or lower denture	5.00
7	Full upper and lower denture	10.00
8	Partial dentures, consisting of not more than four teeth	2.50
9	Partial dentures, consisting of more than four teeth	5.00
10	Repairing fractured denture or replacing one tooth	0.50
11	Replacing each additional tooth after first tooth	0.25

“ THIRD SCHEDULE

Regulation 11.

CHARGES FOR AN ATTENDANCE, A SERVICE OR A MEDICAL TREATMENT PROVIDED FOR A PERSON TO WHOM REGULATION 11 APPLIES

Column 1 Item No.	Column 2 Attendance, Service or Medical Treatment	Column 3 Charge
	PART 1.—ADMINISTRATION OF ANAESTHETICS	\$
1	Administration of anaesthetics, whether by one or more than one medical practitioner, namely—	
	(1) General anaesthetic (not covered by any other sub-item of this item) for—	
	(a) Major operation	8.40
	(b) Minor operation—	
	(i) lasting half an hour or longer	5.60
	(ii) lasting less than half an hour	2.80
	(2) Intravenous anaesthetic, for—	
	(a) Major operation	8.40
	(b) Minor operation	5.60
	(3) Spinal anaesthetic	8.40

CANBERRA COMMUNITY HOSPITAL ORDINANCE—

"THIRD SCHEDULE—*continued.*

Column 1 Item No.	Column 2 Attendance, Service or Medical Treatment	Column 3 Charge
	PART 1.—ADMINISTRATION OF ANAESTHETICS—<i>continued</i>	\$
1	Administration of anaesthetics, etc.— <i>continued</i>	
	(4) Nitrous oxide	8.40
	(5) Cyclopropane	8.40
	(6) Local anaesthetic (not including freezing by ethyl chloride) for—	
	(a) Major operation	5.60
	(b) Minor operation	1.40
	PART 2.—TREATMENT OF FRACTURES	
	<i>Division 1.—Treatment of Simple and Uncomplicated Fractures, not being Chip Fractures and not requiring Open Operation and, except where specified, not involving Treatment of a Joint or Joints</i>	
2	Treatment of fracture of—	
	(1) Nasal bones	14.00
	(2) One or more metacarpals not involving base of first carpo- metacarpal joint	11.20
	(3) One or more metacarpals including the base of the first metacarpal and involving the first carpo-metacarpal joint (Bennett's fracture)	19.60
	(4) One or more metatarsals	12.60
	(5) Terminal phalanx of finger or thumb	5.60
	(6) Proximal phalanx of finger or thumb	14.00
	(7) Middle phalanx of finger	8.40
	(8) Terminal phalanx of toe	5.60
	(9) Proximal phalanx of great toe	11.20
	(10) Proximal phalanx of toe other than great toe	8.40
	(11) Carpal bone (excluding the navicular)	9.45
	(12) Navicular	22.40
	(13) Tarsal bone (excepting os calcis or os talus)	14.00
	(14) Os calcis	28.00
	(15) Os talus	28.00
	(16) Wrist (Colles's fracture)	19.60
	(17) Radius	16.80
	(18) Ulna	14.00
	(19) Both shafts of forearm	30.80
	(20) Tibia	25.20
	(21) Fibula	14.00
	(22) Both shafts of leg	39.20
	(23) Ankle with dislocation of ankle joint	39.20
	(24) Femur	56.00
	(25) Humerus	33.60
	(26) Clavicle	14.00
	(27) Scapula	14.00
	(28) Patella	14.00
	(29) Mandible	33.60
	(30) Maxilla	28.00
	(31) Zygoma	14.00
	(32) Pelvis	33.60
	(33) One or more ribs	9.80
	(34) Symphysis pubis	22.40
	<i>Division 2.—Treatment of Simple and Uncomplicated Fractures requiring Open Operation</i>	
3	Treatment of a simple and uncomplicated fracture of a part referred to in item 2 of this Schedule, other than a part referred to in item 4 of this Schedule, requiring an open operation—the amount specified for the treatment of that part in item 2, plus one-third of that amount	

“THIRD SCHEDULE—continued.

Column 1	
Item No.	
	—
	PART 2.—TREATMENT OF FRACTURES—continued
	<i>Division 2.—continued</i>
4	Treatment of a simple and uncomplicated fracture of— (a) patella requiring an open operation—Forty-two dollars; or (b) coccyx, requiring excision—Twenty-eight dollars
	<i>Division 3.—Treatment of Simple Fractures requiring Treatment of a Joint or Joints</i>
5	Treatment of a simple fracture of a part referred to in item 2 of this Schedule requiring treatment of a joint or joints—the amount specified for the treatment of that part in that item, plus, where the treatment for which the amount is specified does not include treatment of a joint or joints one-third of that amount
	<i>Division 4.—Treatment of Compound Fractures</i>
6	Treatment of a compound fracture of a part referred to in item 2 of this Schedule— (a) requiring an open operation—the amount specified for the treatment of that part in that item, plus one-half of that amount; or (b) not requiring an open operation—the amount specified for the treatment of that part in that item, plus one-quarter of that amount
	<i>Division 5.—Treatment of Chip Fractures</i>
7	Treatment of a chip fracture of a part referred to in item 2 of this Schedule requiring little treatment—one-half the amount specified for the treatment of that part in that item
	<i>Division 6.—Treatment of Fractures of more than one Phalanx of same Finger, Thumb or Toe</i>
8	Treatment of fractures of more than one phalanx of same finger, thumb or toe—the sum of— (a) whichever of the amounts specified in item 2 of this Schedule for the treatment of those fractures is the greater or greatest amount; and (b) Two dollars and ten cents for each of the other fractures so treated
	<i>Division 7.—Treatment of Fractures of Phalanges on more than one Finger or Thumb, or on more than one Toe</i>
9	Treatment of fractures of phalanges on more than one finger or thumb, or on more than one toe— (a) where the amount specified in item 2 of this Schedule for the treatment of those fractures is the same—the sum of— (i) the amount so specified; and (ii) an amount ascertained by multiplying one-half the amount so specified by the number by which the number of the phalanges so treated exceeds one; or (b) where the amounts specified in item 2 of this Schedule for the treatment of those fractures are not the same—the sum of— (i) the amount which is the greater or greatest of the amounts so specified; and (ii) one-half of each of the other amounts so specified

“THIRD SCHEDULE—continued.

Column 1	—	
Item No.		
	PART 2.—TREATMENT OF FRACTURES—continued	
	<i>Division 8.—Treatment of Complicated Fracture involving Viscera, Blood Vessels or Nerves and requiring Open Operation</i>	
10	Treatment of complicated fracture of a part referred to in item 2 of this Schedule involving viscera, blood vessels or nerves and requiring open operation—the amount specified for the treatment of that part in that item plus three-quarters of that amount	
	Column 2	Column 3
	Attendance, Service or Medical Treatment	Charge
		\$
	PART 3.—TREATMENT OF DISLOCATIONS	
	<i>Division 1.—Treatment of Dislocations not necessitating Open Operation</i>	
11	Treatment of dislocation of—	
	(1) Mandible	5.60
	(2) Clavicle	16.80
	(3) Shoulder	14.00
	(4) Elbow	16.80
	(5) Carpus on radius and ulna	25.20
	(6) Carpal bone	11.20
	(7) Finger	5.60
	(8) Metacarpo-phalangeal joint of thumb	14.00
	(9) Hip	33.60
	(10) Knee	28.00
	(11) Patella	11.20
	(12) Ankle	19.60
	(13) Toe	5.60
	<i>Division 2.—Treatment of Dislocations necessitating Open Operation</i>	
12	Treatment of a dislocation referred to in item 11 of this Schedule which requires an open operation—the amount specified for the treatment of that dislocation in that item, plus one-half of that amount	
	PART 4.—OPERATIONS	
	<i>Division 1.—Amputations or Disarticulations of Limbs</i>	
13	Amputation or disarticulation, namely—	
	(1) Finger or fingers, thumb or thumbs—	
	(a) one finger or thumb	11.20
	(b) each additional finger or thumb	2.80
	(2) Through metacarpals	14.00
	(3) Hand	28.00
	(4) Forearm	28.00
	(5) Through arm	28.00
	(6) Shoulder	56.00
	(7) Toe or toes—	
	(a) one toe (or great toe)	14.00
	(b) each additional toe (or great toe)	2.80
	(8) Foot	42.00

“ THIRD SCHEDULE—continued.

Column 1	Column 2	Column 3
Item No.	Attendance, Service or Medical Treatment	Charge
	PART 4.—OPERATIONS—continued	\$
	<i>Division 1.—continued</i>	
13	Amputation or disarticulation, namely— <i>continued</i>	
	(9) Through leg	42.00
	(10) At knee	42.00
	(11) Through thigh	56.00
	(12) At hip	66.70
14	Trephining or resection of skull	56.00
15	Laminectomy	56.00
16	Hernia—radical operation	33.60
17	Hernia—strangulated	50.40
18	Hernia—strangulated with resection of the bowel	66.70
19	Hernia—double	50.40
20	Hernia—by taxis	3.60
21	Nephrectomy	66.70
22	Splenectomy	66.70
23	Hydrocele	28.00
24	Haematocele	28.00
25	Paracentesis thoracis—by aspiration	3.60
26	Laparotomy	56.00
27	Laparotomy and repairs to viscera	66.70
28	Semilunar cartilage removal	42.00
29	Catheterization of urethra	2.80
30	Enucleation of the eye	28.00
31	Suture of tendons of hand, namely—	
	(1) Flexor tendons—	
	(a) for each primary suture of a tendon	19.60
	(b) for each secondary suture of a tendon	28.00
	(2) Extensor tendons—	
	(a) for each primary suture of a tendon	14.00
	(b) for each secondary suture of a tendon	19.60
32	Suture of Tendo Achilles	28.00
33	Blood transfusion	14.00
34	Taking blood	8.40
35	Typing blood	2.80
36	Rh Factor Reaction	2.80
37	Wassermann Reaction	2.80
38	Intravenous saline, glucose—	
	(1) When administered without cutting down on the vein	2.80
	(2) When it is found necessary to cut down on the vein	5.60
	PART 5.—MEDICAL PRACTITIONERS ASSISTING AT OPERATIONS	
39	For each medical practitioner, other than an anaesthetist, assisting at operations—	
	(1) For first hour	5.60
	(2) For each additional hour or part of hour	2.80

“ FOURTH SCHEDULE

Regulation 7.

CHARGES FOR RADIOLOGICAL SERVICES

Column 1	Column 3	Column 3
Item No.	Radiological Service provided	Charge
	PART 1.—RADIOGRAPHIC EXAMINATION OF EXTREMITIES AND REPORT	\$
1	Digits or phalanges—all or any of either hand or either foot	2.25
2	Hand, wrist, forearm, elbow or arm (elbow to shoulder)	4.50

CANBERRA COMMUNITY HOSPITAL ORDINANCE—

"FOURTH SCHEDULE—*continued.*

Column 1 Item No.	Column 2 Radiological Service provided	Column 3 Charge
	PART 1.—RADIOGRAPHIC EXAMINATION OF EXTREMITIES AND REPORT—<i>continued</i>	\$
3	Hand, wrist and lower forearm; upper forearm and elbow; or elbow and arm (elbow to shoulder)	4.50
4	Foot, ankle, lower leg, upper leg, knee or thigh	4.50
5	Foot, ankle and lower leg; or upper leg and knee	4.50
	PART 2.—RADIOGRAPHIC EXAMINATION OF SHOULDER OR HIP JOINT AND REPORT	
6	Shoulder region including clavicle and scapula	4.50
7	Hip joint	4.50
8	Pelvic girdle	6.75
9	Smith-Petersen nail—insertion or similar procedure	13.50
	PART 3.—RADIOGRAPHIC EXAMINATION OF HEAD AND REPORT	
10	Skull, sinuses or mastoids	6.75
11	Maxilla or orbit, or both	6.75
12	Mandible, malar bones or salivary calculus	6.75
13	Nose or eye	4.50
14	Larynx	4.50
	PART 4.—RADIOGRAPHIC EXAMINATION OF SPINE AND REPORT	
15	Spine—any one region	6.75
	PART 5.—RADIOGRAPHIC EXAMINATION OF THORACIC REGION AND REPORT	
16	Chest (lung fields) by direct radiography	4.50
17	Chest (lung fields) by direct radiography with fluoroscopic screening	6.75
18	Chest, by miniature radiography	1.80
19	Pleura	4.50
20	Orthodiagraphy	4.50
21	Teleoroentgenography with cardiac measurements	4.50
22	Cardiac examination (including barium swallow)	6.75
23	Cardiac measurements and Kymography	9.00
24	Sternum or one or more ribs	4.50
	PART 6.—RADIOGRAPHIC EXAMINATION OF URINARY TRACT AND REPORT	
25	Plain renal	4.50
26	Intravenous pyelography	13.50
27	Retrograde pyelography	6.75
28	Cystography, urethrography or vesiculography	11.25
29	Perirenal insufflation	6.75

“FOURTH SCHEDULE—continued.

Column 1 Item No.	Column 2 Radiological Service provided	Column 3 Charge
		\$
	PART 7.—RADIOGRAPHIC EXAMINATION OF ALIMENTARY TRACT AND BILIARY SYSTEM (WITH OR WITHOUT FLUOROSCOPY) AND REPORT	
30	Oesophagus, with or without examination for foreign body or barium swallow	6.75
31	Barium or other opaque meal of oesophagus, stomach and duodenum, with or without screening of chest	9.00
32	Plain abdominal	6.75
33	Barium or other opaque meal of oesophagus, stomach, duodenum and follow through to colon, with or without screening of chest	11.25
34	Opaque enema	9.00
35	Graham's test (cholecystography)	9.00
36	Cholangiography	11.25
	PART 8.—RADIOGRAPHIC EXAMINATION FOR LOCALIZATION OF FOREIGN BODIES AND REPORT	
37	Foreign body in eye (special method, Sweet's or other)	6.75
38	Foreign body elsewhere than in eye—the amount specified for the radiographic examination of the area and report, plus	2.25
	PART 9.—RADIOGRAPHIC EXAMINATION OF BREASTS	
39	Radiographic examination of breast or breasts and report	6.75
	PART 10.—RADIOGRAPHIC EXAMINATION IN CONNEXION WITH PREGNANCY AND REPORT	
40	Pregnant uterus	6.75
41	Pelvimetry	11.25
	PART 11.—OPAQUE OR CONTRAST MEDIA	
	<i>Radiographic examination, with opaque or contrast media, and report (not including any service covered by items 61 to 75 (inclusive) in this Schedule)</i>	
42	Myelography, encephalography, cerebral angiography or ventriculography	13.50
43	Uterine lipiodol (hysterosalpingography)	6.75
44	Bronchography, arteriography, phlebography, aortography or splenography	6.75
45	Sialography or vasoepididymyography	6.75
46	Sinuses and fistulae—the amount specified for the radiographic examination of the area and report, plus	2.25
47	Pneumarthrography—the amount specified for the radiographic examination of the area and report, plus	2.25
48	Pneumoperitoneum	6.75
	PART 12.—TOMOGRAPHY	
49	Tomography of any part and report	9.00

"FOURTH SCHEDULE—continued.

Column 1 Item No.	Column 2 Radiological Service provided	Column 3 Charge
	PART 13.—STEREOSCOPIC EXAMINATIONS	\$
50	Stereoscopic examination and report—the amount specified for the radiographic examination of the area and report, plus	2.25
	PART 14.—FLUOROSCOPIC EXAMINATIONS	
	<i>Fluoroscopic examination and report not covered by any other item in this Schedule (where radiograph is not taken)</i>	
51	Examination with general anaesthesia	4.50
52	Examination without general anaesthesia	2.25
	PART 15.—RADIOTHERAPY	
53	Radiotherapy (including treatment by means of X-rays, radium rays or other radio-active substances) not covered by any other item in this Schedule—each attendance at which treatment is given ..	4.50
	<i>Implantation of Radio-active Substances for Tumour</i>	
54	Lip	13.50
55	Mouth or tongue or both	27.00
56	Bladder	27.00
57	Prostate	27.00
58	Cervix or corpus uteri	27.00
59	Intrathoracic viscera	27.00
60	Retina	45.00
61	Region not specified in any other item in this Schedule, requiring a major anaesthetic	27.00
62	Region not specified in any other item in this Schedule, not requiring a major anaesthetic	13.50
	<i>Moulds of Radio-active Substances</i>	
63	Alveolus, palate or antrum	27.00
64	Scar following radical mastectomy	13.50
65	Hand or other skin area	13.50
	<i>Injection of Radio-active Substances</i>	
66	Intracavitary administration of radio-active substances	11.25
	PART 16.—PREPARATION FOR RADIOLOGICAL PROCEDURE	
	<i>Preparation (including injection of opaque or contrast media or the removal of fluid and its replacement by air, oxygen or other contrast media)</i>	
67	Myelography	9.00
68	Encephalography	13.50
69	Cerebral angiography or ventriculography	22.50
70	Bronchography (but not including bronchoscopy)	6.75
71	Aortography	13.50
72	Arteriography—peripheral, phlebography or splenography	6.75
73	Sinus or fistula, injection into	2.25
74	Perirenal insufflation	4.50
75	Pneumarthrography or pneumoperitoneum	4.50"