	The pric	ing schedule for services provided at Tadbir Clinic and Para	clinic		
Fee (\$)	Fee (Rials)	Service Description	Service Code	#	
\$9.64	5,784,000	Patient visit by a full-time geographical subspecialist physician	252537	1	
\$9.64	5,784,000	Patient visit by a non-full-time geographical subspecialist physician	252566	2	iic
\$7.56	4,536,000	Patient visit by a full-time geographical specialist physician	252536	3	linic
\$6.30	3,780,000	Patient visit by a non-full-time geographical specialist physician	252538	4	
\$10.04	6,024,000	Patient visit by a non-full-time geographical psychiatrist	252539	5	
Fee (\$)	Fee (Rials)	Service Description	Service Code	#	
\$43.55	26,130,000	Routine EEG monitoring during sleep, wakefulness, or coma	901220	1	
\$5.65	3,390,900	ECG with Interpretation and Reporting	900710	2	
\$8.13	4,878,000	The Comprehensive Basic Audiometry includes Pure Tone Air and Bone Conduction Audiometry, Speech Audiometry, and Patient's Hearing Threshold Assessment	900475	3	
\$23.81	14,286,000	Spirometry and measurements of slow vital capacity (SVC), forced vital capacity (FVC), maximal voluntary ventilation (MVV), along with plotting volume-flow and volume-time curves	901010	4	
\$81.30	48,780,000	Fetal echocardiography for the first sibling in a multiple pregnancy	900781	5	
\$27.10	16,260,000	Fetal echocardiography for the other siblings in a multiple pregnancy (for (each additional sibling	900782	6	
\$35.62	21,370,500	Complete echocardiography in non-congenital abnormalities	900785	7	
\$62.72	37,630,500	Complete echocardiography in congenital abnormalities	900780	8	

\$78.01	46,806,000	Electromyography (EMG) and Nerve Conduction Studies (NCS) (Cost of (Technique Implementation Included	901260	9
\$3.76	2,253,300	Measurement of tympanic impedance (impedance test)	900485	
\$18.58	11,149,500	Auditory Brainstem Response (ABR) Comprehensive or Limited Test for Stable Evoked Potentials	900500	
\$13.94	8,364,000	,Aspiration and/or Injection (Joint or Bursa, such as Shoulder, Hip, Knee (Subacromial Bursa	200067	12
\$5.23	3,136,500	Removal or Bivalving of Cast, Opening Cast Window, Cast Adjustment (excluding clubfoot)	204625	13
\$13.94	8,364,000	;Application of long leg cast (from thigh to toes) or walking cast (with a sole) Application of high top walking cast or cylinder cast (from thigh to ankle)	204575	14
\$6.97	4,182,000	Development and Prescription of Therapeutic Regimen for Ambulatory Patients for One Course of Treatment (Cost of consultation and visit is (calculated separately	901740	15
\$17.43	10,455,000	Peripheral nerve and its branch injections in neuropathy	601460	16
\$10.11	6,063,900	Tendon, Synovial Sheath, and Muscle Trigger Point Injections	200060	17
\$12.20	7,318,500	Intralesional Injection (More than Seven Lesions)	100166	
\$4.41	2,648,100	Execution of Auditory Brainstem Response (Screening and Diagnostic) or TEOAE Test	900505	19
\$27.88	16,728,000	Removal of Deep Screw or Pin by Any Method and in Any Number	200105	20

\$1.74	1,045,500	Removal of Foley Catheter from Bladder (Simple or Complicated)	500445	21
\$10.46	6,273,000	Removal of Foreign Body from External Surface of Eye and Superficial Conjunctival Tissue	601925	22
\$27.88	16,728,000	Closed treatment of wrist bone fractures- except for the scaphoid (navicular) fractures, manipulatively and non- manipulatively (Fee for each bone)	202170	23
\$62.73	37,638,000	Closed treatment of tibial shaft fractures (with or without fibula fracture), manipulatively and non- manipulatively; percutaneous skeletal fixation of tibial shaft fractures	203775	24
\$31.37	18,819,000	Individual Psychotherapy, by a Psychiatrist, utilizing Approaches such as Analytical, Cognitive, Behavioral, Cognitive-Behavioral, Supportive and Hypnotherapy (Per Session of at Least 30 Minutes)	900050	25
\$73.19	43,911,000	Sigmoidoscopy (Flexible/ Diagnostic)	401345	26
\$3.49	2,091,000	Simple Large Wound Washing and Dressing (More than 20 Centimeters)	100512	27
\$5.23	3,136,500	Removal of Sutures by a Physician (More than 10 knots or more than 10 centimeters)	100507	28

Fee (\$)	Fee (Rials)	Service Description	Service Code	#	
\$146.28	54,854,800	Sclerotherapy by all available method (with more than 20 injections)	302257	1	
\$443.46	166,299,000	Excision of the chest wall tumors without rib removal	100718	2	
\$219.71	82,391,600	Excision of soft tissue tumors located on patient flank or back (more than 5 cm)	200971	3	
\$231.17	86,688,000	Excision of pilonidal cyst or sinus (simple or extensive)	100160	4	
\$214.99	80,622,000	Excision of cysts, fibroadenoma, or any other benign tumor	100685	5	
\$118.85	46,851,634	Excision of the nail and nail bed partially or completely (e.g. when the nail is penetrated into the flesh) with or without wedge excision of the skin	100140	6	
\$79.87	29,950,400	Excision or reduction of benign and singular lesions in the dermis or epidermis areas of the trunk, arms, legs, scalp, neck, hands, genital area	100100	7	
\$345.07	129,399,600	Excision or removal of pterygium	601990	8	
\$452.43	169,659,560	Cataract surgery and lens implanting (All methods available)	602235	9	
\$585.66	219,624,000	Arteriovenous anastomosis (open and through vein displacement)	302520	10	
\$361.91	135,718,000	Back-up suturing of the abdominal wall (for treating organ protrusion)	402195	11	
\$329.36	123 510 840	Closing anal fistula with flap advancement from the rectum	401530	12	

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\$99.83	37,438,000	Layer-by-layer closure of the scalp and armpits wounds	100240	13
\$317.10	118,911,000	Blepharoplasty of upper or lower eyelid	100446	14
\$328.22	123,081,200	Performing biopsy or excision on deep axillary or breast tumors	302885	15
\$206.64	77,488,320	Perineoplasty (perineal reconstruction)	501490	16
\$56.91	21,341,400	Simple repair of superficial wounds in the skin areas of the head, neck, and underarms	100220	17
\$345.40	129,525,800	Primary inguinal hernia reconstruction	402115	18
\$118.85 "	156,354,2 17	Inguinal hernia reconstruction (Sliding)	402125	19
\$118.85	114,790,414	Umbilical hernia reconstruction	402160	20
\$118.85	71,751,814	Intravitreal injection of a pharmacological agent (e.g. Avastin)	602275	21
\$75.28	28,228,600	Intralesional Injection (More than Seven Lesions)	100166	22
\$454.92	170,594,000	Relocating and transferring of tissue adjacent to all parts of the body (1-10)	100295	23
\$118.85	166,026,814	Relocating and transferring of tissue adjacent to all parts of the body	100290	24
\$63.40	23,774,000	Removing the intrauterine device (IUD)	501865	25
\$61.50	23,063,200	Debridement of exudative or infected skin (up to 10% of body surface area)	100050	26

\$99.83	37,438,000	Venous port or peripherally inserted central catheter (PICC) removal	302460	27
\$293.85	110,192,000	Surgical treatment of anal fistula (fistolectomy-fistulotomy)	401525	28
\$173.88	65,206,000	Dilatation and curettage (diagnostic, therapeutic, and non-obstetric)	501795	29
\$798.63	299,486,000	Treating muscular, musculocutaneous, fasciodermis flaps (e.g. Temporalis, Masseter, Sternocleidomastoid, levator scapula muscles)	100385	30
\$190.73	71,524,400	Fissurectomy with or without sphincterotomy, cautery of anal fissures	401505	31
\$248.36	93,136,000	Venous port or peripherally inserted central catheter (PICC) removal	302435	32
\$387.79	145,422,480	Colporrhaphy (compartment repair) anterior and posterior	501615	33
\$512.20	192,076,000	Performing split skin graft in the trunk and lower limb area	100325	34
\$89.05	33,394,000	Skin, subcutaneous or mucous tissue sampling (including primary repair)-single or multiple	100090	35