



Liberty
Insurance[™]
Member of Liberty Mutual Group

Liberty Insurance Pte Ltd

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proMediCare

INSURANCE POLICY

(Individual)

1. Cover

In consideration of the payment of the premiums, the Company agrees to indemnify or compensate the Insured, details of which are set out in the Proposal Form and Policy Schedule, in the manner and extent of the Schedule of Benefits selected for hospital and surgical expenses in respect of illnesses or injuries incurred during the Period of Insurance.

The policy schedule, conditions, exclusions and endorsements and memoranda shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part shall bear the same meaning wherever it appears.

The Proposal made to the Company by the Insured in connection with this insurance shall be the basis of and shall form part of this contract.

2. Geographical Cover

The benefits of the Policy (Scheme) are worldwide, 24 hours.

3. Policy Period

Insurance shall commence from the date specified on the Policy Schedule.

The Plan is an annual contract, renewable each year on the due date, subject to the option and renewal terms offered by the Company.

4. Eligible Persons

Persons eligible to be covered in the Scheme are :-

- a. Insured and legal spouse below 65 years old.
- b. Children (unmarried and unemployed) between 15 days old and below 18th birthday.

5. Additions of Covered Persons

Family members of the Insured who are eligible to be covered shall from time to time be included into the policy if a) the Insured requests such inclusion, b) upon evidence of insurability satisfactory to the terms and standards of acceptability by the Company, c) payment of required premium.

6. Successor Insured

If the Insured dies while the policy is in force, the Insured's spouse who is a Covered Person shall automatically become the Insured and all future references to the Insured shall thereafter mean the spouse.

7. Definitions

- a) "**Accident**" shall mean an event of violent, accidental, external and visible nature which shall independently of any other cause be the sole cause of bodily injury.
- b) "**Illness**" shall mean a physical condition, marked by a pathological deviation from the normal healthy state.

- c) "**Injury**" shall mean bodily injury caused by force or violent, external and visible means.
- d) "**Hospital**" shall mean only an establishment duly constituted and registered as a hospital for the care and treatment of sick and injured persons, as bed-paying patients, and which i) has facilities for diagnosis and major surgery, ii) provides 24 hours a day nursing services by registered graduate nurses, iii) is under the supervision of a physician, and iv) is not primarily a nature cure clinic, a place for alcoholics or drugs addicts, a nursing, rest or convalescent home or similar establishment, or home for the aged.
- e) "**Physician**" or "**Surgeon**" shall mean only a person qualified by degree in Western Medicine and legally licensed and duly qualified to practice medicine and surgery authorised in the geographical area of his practice.
- f) "**Physician's Visit**" shall mean a physician's visit to the hospital bedside of an Insured Person for treatment of a non-surgical disability.
- g) "**Surgical Fees**" shall mean all of the fees payable to Surgeon(s) for the operations performed including the surgeon's visits to the patient, pre-surgical assessment and normal post surgical care up to a maximum of 91 days from the date of operation or discharge from hospital.
- h) "**Dependants**" shall mean the insured employee's legal spouse aged under 65 and all unmarried and unemployed children who are aged between 15 days old and below 18th birthday. For those in full-time tertiary institutions, the age limit will be extended to their 24th birthday.
- i) "**Pre-Existing Illness**" shall mean any condition which existed or have developed symptoms or there exist manifestation of illness or medical treatment have been sought on drugs and medicine have been prescribed before the effective date of cover in respect of any Insured Person of which the Insured Person was aware or should reasonably have been aware or based on normal medically accepted physical or pathological development of the illness or illnesses.
- j) "**Waiting Period**" shall mean the duration of time between the beginning of an insured person's disability and the commencement of the insurance, and is applied only when the person is first insured. This shall not be applicable after the first year of insurance.
- k) "**Maximum Each Injury or Illness**" shall mean all claims arising from the same cause including any and all complications therefrom except that if the employee or dependant completely recovers after a period of 14 clear days continuously following the latest discharge from hospital any subsequent treatment shall be considered a new injury or illness.

8. Description of Benefits

- a) **Hospital Room and Board** - charges for room and board accommodation inclusive of meals and general nursing services for each day of confinement as a patient in the hospital.
- b) **Intensive Care Unit** - payable when necessitated by an intensive care phase of critical illness or injury subject to a maximum of 20 continuous days per any one disability. The number of days for which charges incurred are payable in respect of daily room and board and ward charges for intensive care unit shall not in the aggregate exceed the maximum number of days provided under hospital room and board benefits.
- c) **Hospital Miscellaneous Services** - hospital charges for operating room x-ray examinations medicines dressings ordinary splints and plaster casts electrocardiograms basal metabolism tests laboratory tests intravenous infusions blood transfusions physiotherapy and other customary services rendered or supplied during the confinement period.
- d) **Surgical Fees** - fees actually charged for the operation by the surgeon including the surgeon's hospital visit to the patient and post operative care up to a maximum of 91 days from the date of operation. The maximum level payable as benefit is assessed according to the amount provided by the chosen Plan in relation to the Schedule of Surgical Benefits, depending on the nature of operation performed. Day surgery is also subject to the usual interpretation.

If two or more procedures are performed through a single incision, reimbursement for charges for all such procedures shall not exceed the amount specified for the one surgical procedure performed for which the largest amount is payable.

If surgery for a disability is performed in various stages over a period of time, then all surgical fees charged in the various stages will be aggregated in computing the maximum amount payable under the Schedule of Surgical Benefits.

Eligible surgical fees below S\$500 are covered in full.

- e) **Anaesthetist Fees** - charges will be reimbursed at up to 25% of the surgical reimbursement. Eligible anaesthetist fees of less than S\$75 are covered in full.
- f) **Diagnostic Services** - charges for specialist's opinion or advice or for diagnostic x-rays and laboratory examinations or tests which are recommended by a licensed physician because of illness or injury incurred within 91 days prior to hospital confinement or surgical operation. Payment will not be made for clinical treatments (including medications and subsequent consultations after an illness is diagnosed), or if the insured employee or dependant is not subsequently hospitalised or surgically treated after such consultations or examinations.
- g) **In-Hospital Physician's Visits** - fees charged by the physician for treatment or visits made to a patient, for whom a full day's room charge is made by the hospital for non-surgical treatment.
- h) **Post-Hospitalisation Treatment** - expenses for follow-up treatment of the specific medical condition for which the Insured Person received in-hospital treatment by the same physician up to a period of 91 days immediately following discharge from hospital.
- i) **Emergency Outpatient Accidental Treatment** - charges for services and medical supplies provided by the hospital or clinic for emergency treatment of an injury as a result of an accident and received as an outpatient within 24 hours after

the accident. When such emergency treatment for an injury is obtained from Registered Chinese bone-setter, charges up to S\$250 are covered. Eligible expenses incurred thereafter for follow-up treatment by the same medical practitioner, will be reimbursed up to 31 days from the date of the accident.

- j) **Ambulance Fees** - charges for ambulance services (inclusive of charges for attending medical personnel) to and/or from the hospital. Payment will not be made if the insured employee or dependant is not hospitalised.

9. Exclusions

The following treatments directly or indirectly, conditions, activities, items, and their related expenses and any complications relating thereto are excluded from this insurance and the Company shall not be liable for :-

- a) pre-existing illness or injuries contracted before the inception date of this Policy.
- b) illnesses which commence within a period of 30 days, except for accidental injuries (this waiting period is applied the first time the person is insured).
- c) charges which are not for actual, necessary and reasonable expenses incurred in the treatment of the illness or injury.
- d) outpatient treatment not related to in-patient treatment or day surgery, except as a result of an accident.
- e) costs resulting from abuse of drugs or alcohol, self-inflicted injuries, criminal act of the Insured Person and sexually transmitted diseases, or treatment which in anyway arises from, is attributable to, or is consequential upon Acquired Immune Deficiency Syndrome (AIDS), AIDS related Complex Syndrome (ARCS) and all diseases caused by and/or related to the virus HIV positive, and any communicable diseases requiring isolation or quarantine by law.
- f) treatment for injuries or diseases arising from or consequent upon war (whether declared or undeclared), riot, civil commotion, civil war, invasion, acts of foreign enemies, hostilities, rebellion, mutiny, revolution, insurrection or military or usurped power confiscation or nationalization by or under the order of any government or public or local authority nuclear energy (nuclear reactions radiation contamination) illegal act and full-time service in any of the uniform groups except reservist duty or training.
- g) routine medical examination (including vaccinations, the issue of medical certificates and attestations), routine eye and ear examinations, refractive errors of the eyes, cosmetic or plastic surgery and the provision of appliances including spectacles, special braces, hearing aids, lenses, wheelchairs and any prosthetic devices.
- h) dental care and treatment (including oral surgeries) except emergency treatment to sound natural teeth damaged during an accident.
- i) pregnancy including childbirth, caesarean operation, abortion, ectopic pregnancy, hydatidiform mole, miscarriage (except as a result of an accident), treatments against infertility, sterilisation and contraception.
- j) treatments relating to birth defects, congenital abnormalities and hereditary conditions.
- k) charges for private nursing, consultation with a general practitioner, routine health checks, precautionary services, acupuncture and inoculation and charges for telephone, television, newspapers and other ineligible non-medical items whilst as an in-patient.
- l) services or treatment of any institution that is mainly long term care facility like convalescent and nursing homes, nature cure clinics, spa, hydro-clinic or sanatorium and

establishments that provides only incidental or limited hospital services.

- m) treatments arising from any geriatric, psycho-geriatric, psychiatric conditions or physiotherapy.
- n) acquisition of any organ itself and all expenses incurred by the donor.
- o) treatment by a family member.
- p) treatment that is not scientifically/medically recognised.
- q) expenses recoverable from a third party, including Workmen's Compensation Insurance or Social Security Organisation.
- r) treatment for obesity, weight reduction and weight improvement.

10. Termination of Covered Persons

Cover ceases for the Covered Persons on

- a) the date of termination of the policy or
- b) the renewal date of this Policy next occurring after a Covered Person ceases to be eligible as defined herein.

The liability of this policy shall cease on the last day of the cover for the Insured Person or dependant.

11. Cancellation

This policy may be cancelled by either the Company or the Insured by giving 30 days notice in writing. No premium will be refunded if claims have already been made by the Insured.

Pro-rata refund of premium will be made to the Insured if the policy is cancelled by the Company during its currency.

Cancellation shall be without prejudice to any claim originating prior to the effective date of cancellation.

If the Insured terminates the policy, the premium charged will be based on the following :-

<u>Period of Cover</u>	<u>Premium Charged</u>
1 month	3 months rate
2 months	4 months rate
3 months	6 months rate
4 & 5 months	7 months rate
6 & 7 months	9 months rate
8 months	1 full year premium

12. Premium Payment

This policy is deemed to have lapsed automatically if no premium is received within 30 days from the commencement or renewal date of the policy. Notwithstanding the termination of the policy, the Insured shall be liable for the payment of all premium due while the policy has been in force including the grace period.

13. Notice and Proof of Claim

Written notice of claim must be given to the Company within 31 days after occurrence of any hospitalisation or surgery covered by the Scheme.

The Company upon receipt of such notice shall furnish the Insured such forms as are usually required for the filing of proof of illness or injury. Affirmative proof of illness or injury must be submitted to the Company at the expense of the Claimant.

14. Currency Exchange Rates

In the event of hospitalisation outside Singapore, bills rendered in terms of currency other than Singapore dollars, will be converted to the currency of Singapore dollars on the basis of quoted exchange rate (open market rate if a free market, official rate if not a free market) in effect on the date of discharge from hospital of the Claimant.

15. Other Insurance

If an employee or dependant included in this Scheme carries other insurance covering injury or illness that is also covered by this policy, the Claimant must inform the Company of such duplicate cover at the time of claiming. The total benefit payable for each claim, for which more than one insurance policy is applicable, shall not exceed the total of eligible expenses incurred.

16. Legal Proceedings

The parties hereto agree that the Laws of Singapore shall govern and control in the event of any conflict or dispute between the parties with regard to the Plan and that the parties submit themselves to the exclusive venue and jurisdiction of the courts of Singapore for the resolution of any conflict or dispute.

17. Alterations

No alteration to this Policy shall be valid unless authorised and endorsed by the Company.

18. Contracts (Rights of Third Parties) Act 2001

A person who is not a party to this Policy Contract shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

19. Non-Guaranteed Premium

Premiums payable for this coverage are not guaranteed and may be revised at policy renewal at the full discretion of the Company.

20. Change of Occupation/Country of Residence

In the event of a change in occupation/country of residence of the Insured, the Insured shall notify the Company in writing of the new occupation/country of residence. The Company shall increase or reduce the premium rates according to the risk classification for the new occupation/country of residence.

21. Right to Return Policy

In the event that the Insured is not satisfied with the Policy for any reason, it may be returned to the Company for cancellation within fourteen days of receipt and

- (a) any premium paid or billed will be refunded in full,
- (b) this Policy is deemed to be voided from inception and
- (c) the Company shall not be liable for any claims occurring prior to the return of the policy.

This condition shall however only apply to policies issued in the name of the Insured Person. This Policy document is deemed to have been received by the Insured 3 days after the Company has dispatched it.

22. Premium Warranty Clause

Notwithstanding anything herein contained to the contrary and subject only and without prejudice to Clause 2 hereinafter set out it is hereby declared and agreed that it is a condition precedent to liability under this Policy, Renewal Certificate Endorsement or Cover Note that any premium due must be paid and actually received in full by the Company, the registered broker or registered agent through whom this policy was effected

- (a) When the period of insurance is 60 days or more within SIXTY (60) days from the
 - (i) INCEPTION date of the coverage under the Policy Renewal Certificate or Cover Note or
 - (ii) EFFECTIVE date of the coverage stated on each Endorsement if any issued under the Policy Renewal Certificate or Cover Note when the effective date of coverage stated on the Endorsement is on or after the issuance date of the Endorsement or
 - (iii) ISSUANCE date of each Endorsement if any issued under the Policy Renewal Certificate or Cover Note where the effective date of coverage under the Endorsement is before the issuance date

OR

(b) where the total premium under any single Policy exceeds S\$50,000 and the Company has allowed payment of that premium by instalments within SIXTY (60) days from the

(i) INCEPTION date of the cover under the Policy Renewal Certificate or Cover Note for the first instalment and thereafter from the agreed dates on which the subsequent instalments become payable and

(ii) EFFECTIVE date of coverage of any Endorsement issued under such Policy for the first instalment and thereafter from the agreed dates on which the subsequent instalments become payable

OR

(c) when the period of insurance is LESS than SIXTY (60) days, within the period of insurance specified in the Policy Endorsement Renewal Certificate or Cover Note

In the event any of the abovementioned premium is not paid in full to the company, registered broker or registered agent as described above in the manner and within the time stipulated above (the "premium warranty period") the cover under this Policy Renewal Endorsement or Cover note shall deemed to have terminated from the expiry of the premium warranty period and the company shall be discharged from all liability therefrom but without prejudice to any liability incurred before that date and the company will be entitled to a pro-rata time on risk premium subject to a minimum of S\$25/-

SCHEDULE OF SURGICAL BENEFITS

The limits for any surgical procedure will be determined by the amounts shown herein. If the operation is not shown in this table, the Company reserves the right to determine the limit for such operation which is consistent with the amounts listed herein; taking into account the nature and complexity of the procedure involved and the policy exclusions and/or other restrictions applicable.

Description of Surgical Benefits	Surg %
1. Abdomen	
Appendectomy	50
Biopsy of pancreas	45
Cholecystotomy, drainage or removal of calculus/gall stones	60
Cholecystotomy, removal of gall bladder	65
Colon resection, partial with or without colostomy	50
Colon resection, total	100
Gastric or duodenal ulcer, perforation, closure of	75
Gastro-enterostomy/Gastro-jejunostomy	75
Gastroscopy and/or duodenoscopy, diagnostic	15
Gastroscopy and/or duodenoscopy, operative	30
Gastrostomy (opening into the stomach / with exploration or foreign body removal)	60
Gut, resection of	100
Gastrectomy, total or partial resection of stomach	100
Hepatectomy (resection of liver) partial lobectomy	75
Intestinal obstruction, acute	100
Laparotomy, exploratory	55
Liver Biopsy	20
Pancreatectomy, total or sub-total	75
Splenectomy, removal of spleen	65
2. Abscess	
Incision and drainage of abscess, boil, furuncle or carbuncles; one or more	
- Simple, not requiring hospitalisation	5
- Requiring hospitalisation	20

Description of Surgical Benefits	Surg %
3. Amputation of	
Arm, upper, forearm, entire hand or foot	55
Fingers, thumbs or toes; primary or secondary, any joint or phalanx, single, including neurectomies with direct closure	20
Hip joints	100
Leg, through tibia and fibula	55
Shoulder joint or blade (interscapula-thoracic)	100
Thigh, between hip and knee	75
Wrist, distal to metacarpals	30
4. Breasts	
Biopsy of breasts, incisional	20
Excision of cyst, fibro-adenoma or other benign tumor, aberrant breast tissue, duct lesion or nipple lesions	25
Mastectomy, simple	50
Mastectomy, radical, including breast, pectoral muscles and axillary lymph nodes, unilateral	75
5. Chest	
Artificial pneumothorax, induction of Initial	12
Refills, each but not more than six	5
Bronchoscopy, diagnostic, rigid bronchoscope	20
Bronchoscopy, operative, excluding biopsy	30
Cardiolysis (removal of portion of chest walls)	100
Cardiac heart, requiring sutures of wall/ repair with bypass	100
Intrathoracic or intra-abdominal aneurysm	100
Lobectomy, total or sub-total/segmental	90
Hepatectomy partial Lobectomy, wedge resection or enucleation of lesion, single or multiple	75
Lung, complete removal or portion of	90
Pericardium, opening and draining	75
Pneumonectomy, total	100
Thoracoplasty, complete	100
Thoracotomy, exploratory	50
Thoracotomy, removal of pus, tapping excepted	12
6. Circulatory System	
Intra-abdominal aortic aneurysm (circumscribed dilation of aorta/with or without ileo-femoral)	100
Intrathoracic aortic aneurysm-transverse arch graft	100
Transvenous placement of endocardial pacemaker	30
7. Dislocations and Joints	
Ankle dislocation, closed or open, reduction	60
Arthroscopy	20
Hip dislocation, closed or open, reduction	65
Knee dislocation, open with uncomplicated soft tissue closure, manipulative reduction	40
Shoulder dislocation, open, with uncomplicated soft tissue closure, manipulative reduction	30
Tarsal bone dislocation, closed or open reduction with or without skeletal fixation	35
Wrist dislocation, closed or open reduction	35
8. Ear	
Ear operation for epithelioma of	20
Fenestration, one or both sides	100
Mastoidectomy	
- simple	50
- radical	80
Myringoplasty	65
Myringotomy for otitis media	15
Removal of adenoids alone	10
Removal of aural polypi	5
Stapes, mobilisation	60

Description of Surgical Benefits	Surg %	Description of Surgical Benefits	Surg %
Tympanoplasty, with mastoidectomy	100	Removal of, with total ureterectomy & bladder cuff	85
Tympanoplasty, with ossicular chain reconstruction	100	Removal of stone	50
9. Esophagus		Laparoscopy	20
Esophagoscopy	20	Myomectomy, single or multiple, excision of fibroid tumor of uterus-abdominal approach	60
Esophagus, operation for stricture	37.5	Orchidectomy, simple, unilateral	30
Esophagus, resection of	100	Renal homotransplantation with unilateral recipient neprectomy	100
10. Excision or Fixation by Cutting		Salpingectomy or oophorectomy or both, unilateral or bilateral, independent procedure	55
Ankle dislocation, closed or open, reduction	50	Testicles - Castration for growth or tuberculosis of	33
Bone, removal of, diseased position of femur, tibia, humerus or fibula	40	- Open testicular biopsy	10
Hip joint, shoulder or spine	75	Transurethral resection of prostate	75
Lesser bones	20	Endoscopic means - partial removal	30
Synovectomies of ankle and toes	40	Ureter, removal of stone	85
11. Eye		Urethra, Stricture of, open operation	30
Cataract, removal of	60	Intra-urethral cutting operation	15
Detached retina, operation of	75	Varicocele, epididymectomy	
Eyeball, removal of	45	Excision of - single	25
Foreign body, removal of, from cornea	5	- bilateral	35
Glaucoma or trauma	45	14. Goitre	
Pterygium, excision or transposition or removal of	15	Hemithyroidectomy	40
Style or chalazion, incision of	7	Lymphatic glands	
12. Fractures, Treatment of		- Removal of malignant tumours of	100
Simple, closed reduction :		- Removal of tumours for diagnosis or adenoma of thyroid	50
Ankle, carpal bone, metacarpal, phalanges, tarsal bone	20	Thyroidectomy, sub-total	50
Elbow	15	total	65
Hip	65	15. Hernia	
Lower jaw or patella	15	Herniorhapy	35
Radius & ulna	20	Herniotomy	50
Shoulder, knee	50	Strangulated hernia	75
Thoracic or lumbar spine (closed or open)	95	16. Ligaments and Tendons	
Tibia and Fibula	20	Tendon, lengthening or shorting	20
Wrist	15	Repair and suture	25
Compound fracture - the limit is twice the amount for the corresponding simple fracture treated by closed reduction subject to a max of 100%		Transplantation	50
Hallux Valgus (Bunion), operation for Single	25	Extensive grafting	50
Bilateral	50	Deep suppuration in palm, forearm, arm sole, leg or thigh involving multiple incisions or drainage	30
Meniscectomy (removal of semilunar cartilage of knee)	50	Repair of the tendoachilles	40
Osteomyelitis of long bones, Acute	75	17. Nail	
Chronic	60	Excision of nail and nail matrix, partial or complete (e.g. ingrown nail)	15
Release of carpal tunnel	30	18. Nose	
13. Genito - Urinary Tract		Antrum puncture	5
Cystorrhaphy: suture of bladder wound, injury or rupture, simple	60	Extranasal sinus operation	17.5
Bladder, removal of growths by abdominal surgery	60	Intranasal sinus operation	25
removal of growths by diathermy	40	Mastoid, radical cure for	60
removal of stone	75	Nose, reconstruction of	70
Circumcision, surgical excision other than clamp or dorsal slit, except newborn	15	Polypus, removal, one or more	10
Curettage or cauterisation of cervix, non-puerperal	12.5	Sarcoma, operation for, or epithelioma of nose	60
Cystectomy - with ureteroileal conduit or sigmoid with bilateral pelvic lymphadenectomy	100	Submucous resection, nasal septum, classic	40
Cystoscopy - diagnostic	5	Toilet and suture	5
- with minor endoscopic procedure (e.g. biopsy)	10	Turbinectomy	10
Dilation and curettage, non-puerperal	25	19. Paracentesis	
Exploration for undescended testis, unilateral	40	Tapping of - Abdomen	12.5
Evacuation of foreign bodies from the bladder	25	Chest or bladder, cauterization excepted	7.5
Hydrocele, radical care of	30	Ear drum, hydrocele, joints or spine	5
Hysterectomy, radical for cancer	65	20. Pilonidal Cyst or Sinus	
with complete removal of tubes and ovaries	75	Removal of	30
with or without appendectomy	65	21. Rectum	
Kidney hemorrhage due to accident	75	Colonoscopy with or without biopsy	20
Fixation of	75		

Description of Surgical Benefits	Surg %	Description of Surgical Benefits	Surg %
Fissure-in-ano, cutting operation for - Independent Procedure	40	partial excision	50
Fistulotomy or fistulectomy - simple	35	Laryngectomy, without neck dissection	75
- multiple	45	Laryngoscopy, direct operative with biopsy	25
Hemorrhoidectomy, internal & external, complex or extensive	55	Parotidectomy	60
Hemorrhoidectomy and fistulotomy or fistulectomy	60	Removal of lower lip for cancer	50
Incision & drainage of ischioanal and/or perirectal/perianal abscess	15	Tongue, total excision of for cancer	100
Papillectomy, single or multiple procedure	7.5	Tonsillectomy with or without adenoidectomy	20
Other cutting operation of rectum	25	Tracheotomy, independent procedure	20
Rectum, excision of	100	Turbinectomy	10
Sigmoidectomy	20		
22. Skull		25. Tumors	
Cutting into cranial cavity, trephning and tapping excepted	100	Benign tumors of the testicles	20
Removal of bone trephining or decompression	40	Benign tumors one or more, except as otherwise herein provided;	
Trephining for fracture middle meningeal or other intracranial hemorrhage	100	Requiring hospital confinement	20
Tumor or abscess of the brain, cerebral of cerebellar tumor	100	Not requiring hospital confinement	5
		Excision of Bartholin's tumor or cyst	25
		Incision or drainage of cyst	5
		Lesion of tendon or fibrous sheath or capsule (e.g. cyst or ganglion) foot or toe	20
		Lesion of tendon sheath - wrist	20
		Malignant tumors of the mucous membrane, skin and subcutaneous tissue	25
		Malignant tumors, surgical removal of, except those of the mucous membrane, skin and subcutaneous tissue	50
		Warts or moles	5
23. Spine or Spinal Cord		26. Varicose Veins	
Division of posterior spinal tracts or roots	100	Aneurysm in large arteries	50
Gasserian ganglion, resection of	75	Cutting operation, complete procedure	
Intervertebral disc, excision of		One leg	25
- without spinal fusion	75	Both legs	40
- with spinal fusion	100	Injection treatment, complete procedure one or both legs	20
Laminectomy	100	Ligation of small arteries, smaller aneurysms	10
Nerve grafting	50	Stripping of varicose vein, one leg	30
Spinal cord tumor, operation for	100		
24. Throat			
Adenoidectomy, independent procedure	15		
Excision of tumor of cords & epiglottis/ or stripping of vocal cords	35		
Jaw, total excision of upper or lower	100		

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