

CAYMAN ISLANDS



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**THE HEALTH SERVICES LAW
(LAW 20 OF 1974)
THE HEALTH SERVICES (FEES)
(AMENDMENT) REGULATIONS, 1983**

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DENTURES

- 40. Partial Denture - plastic Full costs to be paid
- 41. Full upper or lower denture Full costs to be paid
- 42. Full upper and lower denture Full costs to be paid
- 43. Stainless steel clasp Full costs to be paid
- 44. Gold clasp Full costs to be paid
- 45. Reline Full costs to be paid
- 46. Additons to partial denture Full costs to be paid
- 47. Repairs - one item Full costs to be paid
- 48. - one additional item Full costs to be paid

OTHER SERVICES (EXCLUDING DRUGS)

- 49. District Medical Clinic visit \$ 8
- 50. District Nursing Clinic visit \$ 4
- 51. Home medical visit \$ 25
- 52. Home nursing visit \$ 4".

Made in Council this 8th day of March, 1983.

JENNY MANDERSON
Clerk of the Executive Council

CAYMAN ISLANDS

THE HEALTH SERVICES LAW (LAW 20 OF 1974)
THE HEALTH SERVICES (FEES) (AMENDMENT)
REGULATIONS, 1983

In exercise of the powers conferred on the Governor in Council by section 7 of the Health Services Law, the following Regulations are hereby made —

Citation and commencement.

1. These Regulations may be cited as the Health Services (Fees) (Amendment) Regulations, 1983, and shall come into operation on the 1st day of April, 1983.

Substitution of Schedule.

2. The Schedule to the Health Services (Fees) Regulations, 1975 is substituted by the following —

“SCHEDULE
(regulation 3)

DESCRIPTION OF SERVICE, TREATMENT, FACILITIES, ETC.	FEE
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GENERAL & PROFESSIONAL CARE
(Exclusive of administrative and other fees)

- | | |
|--|-----------------------|
| 1. Hospitalization (including room, routine medical and nursing services), per day | \$ 50 |
| 2. Intensive care (where special medical and nursing services are required due to the condition of a patient), per day | \$ 25 |
| 3. Use of Delivery Room by any maternity patient, per day | \$100 |
| 4. Use of Operating Theatre, irrespective of type of surgery, per day | \$150 |
| 5. Private duty nurse | Full costs to be paid |
| 6. Hospital clinic visit during scheduled hours (consultation only) (excluding drugs) | \$ 15 |

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7. Private medical appointment with a specialist outside scheduled hours	\$ 30
8. Emergency Room visit (excluding drugs)	\$ 30
9. Use of Casualty Theatre for emergency outpatient admission (no fee shall be payable under item 1 for the period covered by this item)	\$ 50
10. Ambulance service	\$ 40
11. Escorting patient to overseas institution	Full costs to be paid.
12. Drugs	Full costs to be paid

ADMINISTRATIVE

13. Patient registration card	\$ 1
14. Replacement of card in 13 above	\$ 5
15. Medical autopsy and report	\$600
16. Medical examination report	\$ 50
17. Medical certification of illness	\$ 10

SPECIAL SERVICES

18. Special laboratory service	Calculated according to service provided
19. Special radiology service (where extraordinary expenditure of labour and/or materials are involved)	Full costs to be paid
20. Electro-cardiogram	\$25 per service
21. Physiotherapy treatment	\$10 per service
22. Physiotherapy prosthetic device	Full costs to be paid

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DENTAL CARE

(a) Examination	
23. Examination, report advice	\$ 6
24. X-Ray	\$ 6 each
(b) Treatment	
25. Extraction, per tooth	\$ 7
26. Impacted tooth	\$ 15
27. Surgery	\$ 28
28. General anaesthetic	\$ 19
29. Scaling and polishing	\$ 7
30. Peridontal treatment	\$ 15 per quadron
(c) Fillings	
31. Silver - single surface	\$ 9
32. - each additional surface	\$ 6
33. Silicate or plastic, per tooth	\$ 12
34. - each additional surface	\$ 5
35. Gold inlays - single surface	Full costs to be paid
36. - each additional surface	Full costs to be paid
37. Gold crown	Full costs to be paid
38. Acrylic crown (tooth colour), per tooth	\$ 75
39. Root treatment - draining, treatment and filling, per root	\$ 40