



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

PRIMARY CARE REIMBURSEMENT SERVICE

**SCHEDULE OF FEES PAYABLE UNDER
THE DENTAL TREATMENT SERVICES SCHEME**

**With effect from
1st January 2008**

Exit 5, M50,
North Road,
Finglas,
Dublin 11.

TREATMENT TYPE

Fee Rate
from
1 Jan 2008

€

A1	Oral Examination	33.61
A2	Prophylaxis	31.58
A3A	Amalgam Restoration	50.80
A3C	Composite Restoration	52.66
A4	Exodontics	40.14
A5	Surgical Extraction	35.74
	(Fee payable for each 15 minute unit, max 3)	(Max 107.23)
A6	<u>Miscellaneous</u> (Haemorrhage/Dry Socket/Abcess-Pretreatment/ Dressings/Prescription)	22.99
A7	1st Stage Endodontic Treatment (Anterior teeth only)	58.15
A8	<u>Denture Repairs</u>	
	1st Item of repair	46.24
	Each subsequent item	14.82
	Maximum	75.88

TREATMENT TYPE

Fee Rate
from
1 Jan 2008

€

B1	Endodontics (Anterior teeth only)	*Dentist Estimate
B2	Apicectomy/Amputation of Roots	*Dentist Estimate
B3	Protracted Periodontal Treatment	*Dentist Estimate
B4	<u>Extra Oral Radiographs</u>	
	1 Film	25.15
	2 or more Films	38.01
	Panoramic	42.09
B5	<u>Prosthetic</u>	
	Full Upper Denture	315.19
	Full Lower Denture	315.19
	Full Upper and Lower Denture	462.55
	Partial Acrylic Denture	231.18
	Complete Upper Reline	126.18
	Complete Lower Reline	126.18
	Complete Upper and Lower Reline	210.02

Note* Dentist Estimates are subject to agreement between a Dentist and the HSE.